



Updated: February 2008

## EHDIT State and Territorial Profiles Virgin Islands

This profile includes information about a state or territorial EHDIT program related to general program information, hearing screening, re-screening and diagnostic evaluations, early intervention, and the EHDIT data system.

If any information in this profile is incorrect or needs to be updated please email: [ehdi@cdc.gov](mailto:ehdi@cdc.gov)

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Category and Questions	Information
<b>General Program Information</b>	
Official name of the state/territory Early Hearing Detection and Intervention (EHDIT) program	Early Hearing Detection, Intervention and Tracking (EHDIT) program
Contact for the state/territory EHDIT program.	C. Patricia Penn, R.N. MCH Director Division of Maternal and Child Health (MCH) MCH & CSHCN #2C Contant AQ Building, 2nd Floor St. Thomas,, VI 00802 (340) 776-3580 <a href="mailto:cppenn@earthlink.net">cppenn@earthlink.net</a>
Legislation regarding newborn hearing screening?  If yes, does the legislation mandate or provide funds for newborn hearing screening and follow-up services?	Yes,  VI mandates that hearing screening be offered and that the results of hearing screenings be reported to the EHDIT program.
State/territory website related to infant/child hearing loss?	No
State/territory CDC/EHDIT Cooperative Agreement related to hearing screening?	No
State/territory have a Maternal	Yes

and Child Health Bureau Grant related to hearing screening?	
Participate in a CDC funded research project?	No
<b>Hearing Screening Information</b>	
State/territory written guidelines and/or protocols for performing hearing screenings?	<i>No information currently available</i>
Primarily responsible in most hospitals for conducting in-hospital hearing screenings?	Technicians, Audiologists
Estimated percentage of newborns that are initially screened with OAE or AABR. (Of the newborns that failed the initial screen, estimated percentage that are re-screened in the hospital with OAE or AABR.)	NICU Screening: OAE _____%; AABR _____%  WBN Screening: OAE _____%; AABR ______%  NICU Re-screening: OAE _____%; AABR _____%  WBN Re-screening: OAE _____%; AABR _____%
State/territory requires parental consent for hearing screening(s) to be done at the time of birth?	Yes Like metabolic screening, hearing screening is considered a standard of care and is usually included in a blanket consent form that parents sign during admission.
What happens if a baby does not pass the initial hearing screening(s)?	Re-screen in hospital before discharge, Re-screen as outpatient . If an infant does not pass the first hearing screening, a second screening can be performed with the same technology (i.e.,OAE) before the infant is discharged from the birth hospital. Outpatient rescreens are also done in some cases.
Birthing hospitals/facilities/providers required to report hearing screening results to the state?	No
How birthing hospitals/facilities report hearing screening information to the state/territory	100% of individual-level screening results are received on the metabolic forms.  Information such as the infant's name and results of the screening(s) are handwritten into a paper logbook by the screening technician. This screening logbook is delivered or faxed to the Early Hearing Detection, Intervention and Tracking program and the
Hearing screening results reported to the infant's physician? [If yes, are all results reported or only failed screening?]	Notify all screening results ("Refer" and Pass) Hearing screening results are usually placed on the infant's "Boy / Girl" card, which is usually brought to the infant's first doctor visit.

<b>Rescreening and Diagnostic Evaluations</b>	
State/territory written guidelines and/or protocols for performing hearing re-screenings?	<i>No information currently available</i>
State's program guidelines for helping families with third party preauthorization of re-screening or diagnostic evaluations?	<i>No information currently available</i>
State/territory written guidelines and/or protocols for performing diagnostic evaluations?	<i>No information currently available</i>
State/territory EHDI program list of audiologic diagnostic centers and audiologists skilled in providing pediatric services to infants?	<i>No information currently available</i>
Number of pediatric audiologists and/or diagnostic centers on the list	<i>No information currently available</i>
Who is responsible for scheduling appointments for outpatient hearing re-screenings?	Hospitals If an infant does not pass the first hearing screening, a second screening is usually performed before the infant is discharged from the birth hospital.
Who is responsible for scheduling appointments for diagnostic audiologic evaluations?	Parents or guardians Parents of infants referred for diagnostic testing are given an information packet about infant hearing loss and are asked to make an appointment for follow-up testing with the MCH / CSHCN audiologist.
How audiologists report diagnostic audiological evaluation results to the state/territory	100% of audiological evaluations are reported on paper form.
Guidelines and/or protocols for audiologists to report diagnostic audiological evaluation results to the state/territory?	VI mandates that audiological evaluations be reported to the EHDI program  VI seeks to obtain audiological evaluation data for only those children who did not pass their hearing screening.  The VI EHDI program does receive audiological evaluations for children with risk factors for hearing loss.
One or more persons on the EHDI staff who are responsible for the follow-up of families who need to return for re-screen, diagnostics, or referral to intervention?	<i>No information currently available</i>
<b>Early Intervention</b>	

Lead agency for the Part C Early Intervention Program	Department of Health Renée Joseph Rhymer, Director <a href="mailto:birthto3usvi@viaccess.net">birthto3usvi@viaccess.net</a>
State/territory written guidelines, and/or protocols for providing intervention services for children with hearing loss?	<i>No information currently available</i>
Eligibility criteria for Part C services for infants and toddlers with hearing loss	<i>No information currently available</i>
Eligibility criteria for Part B services for preschool children with hearing loss	<i>No information currently available</i>
Children with mild or unilateral hearing loss eligible for services under Part C or Part B?	<i>No information currently available</i>
Other public or private programs(s) and services (other than Part C or Part B) that provide intervention services to children with hearing loss	<i>No information currently available</i>
Services such as family support, transportation to follow-up appointments, parent to parent available to families with children with hearing loss? List.	<i>No information currently available</i>
Program receives information regarding whether or not a referred child is receiving Part C services or other intervention services?	Yes, at the individual child level from Part C, but not other EI providers.
Intervention programs report other information about children, such as type of intervention, developmental test scores, use of assistive devices?	No
<b>EHDI Data System</b>	
State/territory written guidelines and/or protocols related to the EHDI tracking system?	<i>No information currently available</i>
Type of system program uses to	VI uses commercial software: Microsoft Access.

<p>track hearing screening and follow-up information. .</p>	<p>The VI program does not obtain birth certificate data for all occurrent births. The VI programs receives 96% of screening data in aggregate form.</p>
<p>State EHDI tracking system includes data items to identify infants and children with risk factors for hearing loss?</p>	<p>No</p>
<p>Unique identifier is used to identify infants/children in the state/territory EHDI tracking system</p>	<p><i>No information currently available</i></p>
<p>How program addresses de-duplication of screening and diagnostic evaluation data</p>	<p>De-duplication of screening data is addressed during data entry, software checks for approximate or probabilistic matches. Diagnostic evaluation data are obtained through a trusted source and assumed to be de-duplicated or free of duplicate entries. If it is determined that two records belong to the same individual, it is possible to combine these two records under the same ID number without re-entering all of the data for one of the records. If two records have been combined into a single record, but then it is determined that this was an error, it is not possible to “undo” this and re-create the original, separate records under different ID numbers without re-entering the data.</p>
<p>EHDI system linked to or integrated with any of the following: -Blood spot card -EBC -Audiology -Early Intervention -Immunizations -Other</p>	<p>VI has an integrated state data system (i.e., EHDI is only one piece in a larger system that includes other programs).</p>
<p><b>Other EHDI Questions</b></p>	
<p>State materials/ brochures/ protocols for parents and professionals about the EHDI program. (Link to matrix).</p>	<p>Yes <a href="http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/virgin_islands.htm">http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/virgin_islands.htm</a></p>
<p>Agencies, foundations, organizations, or other programs that provide funding for the purchase of any of the assistive devices for children with hearing</p>	<p><i>No information currently available</i></p>

loss	
Statewide hearing aid loaner program for infants, toddlers, and children with hearing loss?	<i>No information currently available</i>
Resources, other than those from the state or territory, available to help families with the costs of caring for an infant, toddler, or child with a hearing loss?	<i>No information currently available</i>