



EHDI State and Territorial Profiles Colorado

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

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

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Category and Questions	Information
General Program Information	
Official name of the state/territory Early Hearing Detection and Intervention (EHDI) program	Colorado Infant Hearing Program
Contact for the state/territory EHDI program.	Vickie Thomson, M.A., CCC-A State Audiology Consultant Colorado Dept. of Public Health & Environment 4300 Cherry Creek Drive, South PSD-A4A-HCP Denver, CO 80246-1530 (303) 692-2458 (303) 782-5576 vickie.thomson@state.co.us
Legislation regarding newborn hearing screening? If yes, does the legislation mandate or provide funds for newborn hearing screening and follow-up services?	Yes. Legislation for Universal Newborn Hearing Screening (UNHS) was enacted in 1997 (House Bill 97-1095). It mandates that hearing screening be offered and that results of screening and audiological evaluations are reported to the EHDI program.
State/territory website related to infant/child hearing loss?	Yes http://www.cdphe.state.co.us/ps/hcp/hearing/index.html
State/territory CDC/EHDI Cooperative Agreement related to hearing screening?	Yes

State/territory have a Maternal and Child Health Bureau Grant related to hearing screening?	Yes
Participate in a CDC funded research project?	Yes <u>Completed:</u> Family Surveys: With Colorado
Hearing Screening Information	
State/territory written guidelines and/or protocols for performing hearing screenings?	Yes http://www.cdphe.state.co.us/ps/hcp/hearing/audiologyguide.pdf
Primarily responsible in most hospitals for conducting in-hospital hearing screenings?	Nurses, Technicians, Volunteers, Other Hearing screening is usually conducted by nursing staff, but volunteers and trained technicians are also used in select hospitals.
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 Parents must be informed that a hearing screening is going to be done and are only required to sign a form if they refuse to have the screen or if the actual screening is going to be performed by an outside source.
What happens if a baby does not pass the initial hearing screening(s)?	Re-screen in hospital before discharge. Re-screen as outpatient Referred for diagnostic audiological evaluation. If an infant does not pass the initial hearing screen, hospitals are encouraged to re-screen the infant at least once before discharge. Regardless, infants are brought back to the birth hospital, if possible, within two weeks after the initial screen for re-screen.
Birthing hospitals/facilities/providers required to report hearing screening results to the state?	<i>No information currently available</i>
How birthing hospitals/facilities report hearing screening information to the state/territory	90% of individual-level screening results is received from the EBC; 10% from paper form. Report each child, Electronic Birth Certificate An Electronic Birth Certificate (EBC) clerk at the birth hospital enters the screening results onto the EBC at the birth hospital and modems the final EBC (within 10 days after birth, as required) to the Health Care Program for Children with Special Needs

<p>Hearing screening results reported to the infant's physician? [If yes, are all results reported or only failed screening?]</p>	<p>Notify all screening results ("Refer" and Pass) An infants primary care provider is notified of hearing screening results by a paper reporting form.</p>
<p>Rescreening and Diagnostic Evaluations</p>	
<p>State/territory written guidelines and/or protocols for performing hearing re-screenings?</p>	<p>Yes http://www.cdphe.state.co.us/ps/hcp/hearing/audiologyguide.pdf</p>
<p>State's program guidelines for helping families with third party preauthorization of re-screening or diagnostic evaluations?</p>	<p><i>No information currently available</i></p>
<p>State/territory written guidelines and/or protocols for performing diagnostic evaluations?</p>	<p>Yes http://www.cdphe.state.co.us/ps/hcp/hearing/audiologyguide.pdf</p>
<p>State/territory EHDI program list of audiologic diagnostic centers and audiologists skilled in providing pediatric services to infants?</p>	<p>Yes A "Pediatric Audiology List" that includes contact information for "audiologists who have the equipment to comply with Recommended Protocol for Infant Audiologic Assessment and Recommended Guidelines for Pediatric Amplification." Has also has a list of regional coordinators. http://www.cdphe.state.co.us/ps/hcp/hearing/audiologyguide.pdf</p>
<p>Number of pediatric audiologists and/or diagnostic centers on the list</p>	<p>46 audiologists</p>
<p>Who is responsible for scheduling appointments for outpatient hearing re-screenings?</p>	<p>Primary Care Provider (PCP), Department of Health (DOH), Hospitals</p>
<p>Who is responsible for scheduling appointments for diagnostic audiologic evaluations?</p>	<p>Primary Care Provider (PCP), Department of Health (DOH), Hospitals For some hospitals, the pediatrician may make the referral and appointment for an infant to be seen by an audiologist for further testing. While parents may not schedule an appointment for follow-up testing they usually receive a copy of the referral form.</p>
<p>How audiologists report diagnostic audiological evaluation results to the state/territory</p>	<p>100% of the audiological evaluation are reported via fax.</p>
<p>Guidelines and/or protocols for audiologists to report diagnostic audiological evaluation results to the state/territory?</p>	<p>Audiologists are required to report hearing screening results to the state using the Follow-up Hearing Loss Report form. This paper form can be mailed or faxed to the Colorado Department of Public Health and Environment (CDPHE) when completed. CO seeks to obtain audiological evaluation data for all occurrent births below a given age that obtain an audiological evaluation, including</p>

	infants 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?	A state follow-up coordinator works with birth hospitals to help make sure that infants receive rescreens and/or diagnostic evaluations when needed. Many hospitals that have audiologic services have standing orders for infants who do not pass the hearing screening.
Early Intervention	
Lead agency for the Part C Early Intervention Program	Human Services/Developmental Disabilities Part C is housed at the Colorado State School for the Deaf and Blind Ardith Ferguson, Part C Coordinator ardith.ferguson@state.co.us
State/territory written guidelines, and/or protocols for providing intervention services for children with hearing loss?	Yes Guidelines are available in the Colorado Infant Hearing Advisory Committee: Guidelines for Infant Hearing Screening, Audiologic Assessment, and Early Intervention. Additionally, parents with an identified infant is given "The Colorado Resource Guide for Families of Children Who are Deaf/Hard of Hearing." http://www.cdphe.state.co.us/ps/hcp/hearing/audiologyguide.pdf
Eligibility criteria for Part C services for infants and toddlers with hearing loss	Use of set standards (please select which standards below) Laterality of hearing loss (specify unilateral or bilateral) All infants with bi-lateral hearing loss are eligible for Part C services. Infants with unilateral loss are not eligible.
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?	Children with mild losses are eligible but not unilateral losses.
Other public or private programs(s) and services (other than Part C or Part B) that provide intervention services to children with hearing loss	Childrens Hospital has clinic based services which are child centered. Listen Foundation - Auditory Verbal, Center based.
Services such as family support, transportation to follow-up appointments, parent to parent available to families with children with hearing loss? List.	Yes
Program receives information regarding whether or not a referred child is receiving Part C services or other intervention	Yes, from Part C and other EI providers.

services?	
Intervention programs report other information about children, such as type of intervention, developmental test scores, use of assistive devices?	Yes, from Part C and other EI providers.
EHDI Data System	
State/territory written guidelines and/or protocols related to the EHDI tracking system?	Yes Guidelines were established by the Colorado State Advisory Committee.
Type of system program uses to track hearing screening and follow-up information. .	Part of an integrated system. CO does obtain birth certificate data for all occurrent births. CO receives individual-level data for ALL hearing screens.
State EHDI tracking system includes data items to identify infants and children with risk factors for hearing loss?	No Risk factors are collected on a state-level only for those infants who have been diagnosed with a hearing loss. The data system does not automatically distinguish between higher- and lower-risk infants.
Unique identifier is used to identify infants/children in the state/territory EHDI tracking system	Birth certificate ID Currently, infants are uniquely identified using the Electronic Birth Certificate (EBC) number.
How program addresses de-duplication of screening and diagnostic evaluation data	CO addresses de-duplication of screening data during data entry, software checks for exact matches. De-duplication of diagnostic evaluation data is addressed during data entry, staff search for possible matches. If it is determined that two records belong to the same individual, or two records have been wrongly combined into a single record, it is possible to correct the error without re-entering the data.
EHDI system linked to or integrated with any of the following: -Blood spot card -EBC -Audiology -Early Intervention -Immunizations -Other	Hearing screening and demographic information from the Electronic Birth Certificate (EBC) is automatically entered into the Colorado Infant Hearing Data Management System.
Other EHDI Questions	
State materials/ brochures/	Yes

protocols for parents and professionals about the EHDI program. (Link to matrix).	http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/colorado.htm
Agencies, foundations, organizations, or other programs that provide funding for the purchase of any of the assistive devices for children with hearing loss	<i>No information currently available</i>
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>