

INFANT HEARING PROGRAM- GOALS & DELIVERABLES

APRIL 1, 2018- MARCH 31, 2019

Deliverables for April 1, 2018 – March 31, 2019

- At least 90% of all babies with a “refer” result from UNHS will have an audiology assessment (provided in accordance with the IHP Audiologic Assessment Protocol, January 2008 or any subsequent updated versions).
- 75% of all babies with a “refer” result from UNHS who have an audiology assessment will access it by 4 months corrected age.
- 40% of babies with confirmed PHL whose families choose amplification will access amplification services (provided in accordance with IHP Amplification Protocol, October 2007 and the Protocol for the Provision of Amplification Version 2014.01), no later than 9 months corrected age.
- 40% of babies with confirmed PHL will access language development services (provided in accordance with IHP Language Development Services Guideline, Spring 2009 and the IHP Guidelines for Communication Development Services, November 2012 or any subsequent updated versions) no later than 9 months corrected age.
- 75 % of infants born at risk for hearing loss will receive surveillance hearing screening by 18 months of age (in accordance with IHP High Risk Surveillance Protocol Revision, June 2009).
- Infants and preschool children with confirmed permanent hearing loss will have an identified case coordinator and a documented Individual Family Service Plan (IFSP) which is updated through progress measurement and outcomes assessment every 6 months (provided in accordance with IHP Language Development Services Guideline, Spring 2009).
- For any infant or preschool child for whom a change in language development services/ intervention approach is implemented, an associated IFSP update and team meeting will be documented.
- 100% of children who are discharged for the reasons “attending JK”, “attending SK” and “attending Grade 1” will receive transition to school plans