Purdue Office of Child Development and Early Learning
Bureau of Early Intervention Services and Family Supports

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**Subject:** Recommendations for Infants, Toddlers and Preschool-Age Children Who are Deaf or Hard of Hearing

**To:** Infant/Toddler and Preschool Early Intervention Programs’ Leaders

**From:** Tracey Campanini
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**PURPOSE**
To provide the most recent guidance and recommendations to Early Intervention programs serving infants, toddlers and preschool-age children who are deaf or hard of hearing, and their families. This announcement replaces Announcement EI-13 #06, entitled *Children who Have a Hearing Loss.*

**BACKGROUND**
Deafness or hearing loss from birth, even if it is mild or in only one ear, can negatively impact a child’s early acquisition of communication, speech, language, and listening skills. Additionally, cognitive, and social-emotional development, and future academic achievement could be affected in the absence of timely access to Early Intervention services. Growing evidence suggests when infants are identified as deaf or hard of hearing early, and promptly addressed through the provision of Early Intervention supports and services, an infant’s ability to achieve outcomes related to linguistics, literacy, and social/emotional development are significantly increased (JCIH, 2019). The Joint Committee on Infant Hearing (JCIH), a national collaborative effort between federal and professional agencies and programs in health, human services, and education, has published position statements summarizing the state of the art, and services in infant hearing, and recommended practices in early identification and appropriate intervention for infants, toddlers and preschool-age children who are deaf or hard of hearing and their families. The JCIH publications have become the standard of care across several fields including pediatrics, audiology, and Early Intervention. This announcement incorporates several of the JCIH recommendations.
DISCUSSION

Identification:

A child is automatically eligible for Early Intervention services when they have any degree of diagnosed, permanent hearing loss including mild and unilateral hearing losses, and needs Early Intervention services. A multidisciplinary evaluation (MDE) is not required to establish eligibility, however, an MDE Team is needed to determine the child’s strengths, needs, family priorities and desired outcomes. When conducting a MDE with the child and family, information should be obtained on the child’s hearing and newborn hearing screening results and any audiological reports should be requested. The MDE should not be delayed if the family needs to obtain documentation or reports pertinent to the child’s hearing loss diagnosis. All pertinent information on the child’s hearing should be documented in the Early Intervention Evaluation Report.

Referral and Reporting Back to Referral Sources:

All children who are deaf or hard of hearing in one or both ears should be referred immediately to an Early Intervention program to receive appropriate services and supports. Parents, pediatricians, audiologists, or other professionals can make a referral or obtain more information about Early Intervention services by calling CONNECT at 1-800-692-7288 or emailing help@connectpa.net. Infant/toddler and preschool Early Intervention programs shall encourage parents to communicate the results of the MDE to the referral source or request parental consent to communicate the results of the MDE to the referral source. The results can provide valuable feedback to the referral source. The Bureau of Early Intervention Services and Family Supports has a form available that can be used to obtain consent from parents or guardians to communicate the results of the evaluation to the referral source. The form is located at the following link: https://www.pattan.net/Forms/Authorization-to-Release-Information-for-Children.

The Early Hearing Detection and Intervention (EHDI) program in the Pennsylvania Department of Health must meet the Centers for Disease Control and Prevention’s federal requirements by annually reporting the number of infants who do and do not receive follow-up, such as additional hearing testing, and referral to Early Intervention services, after newborn screening. Infant/toddler Early Intervention programs can further assist with this requirement by obtaining consent from a parent or guardian to release information for children with hearing concerns to the EHDI program. The form for parents or guardians to sign to consent to release of this information is located at the following link: https://www.pattan.net/Forms/Authorization-to-Release-Information-for-Infan-3?NodeId=1512290.
On-Going Assessment:

Hearing loss is not an obvious condition and can occur at any time beyond the newborn period. It is the responsibility of the MDE, Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP) teams to address each child’s medical status, including hearing and vision, as part of the evaluation and plan development process. In addition, families should be encouraged to closely monitor their child’s auditory, communication (receptive and expressive) development, hearing assessments/reviews conducted during well-child visits, and collaborate with Early Intervention personnel to ensure the IFSP or IEP contains current information. Any child who demonstrates delayed communication skills development, even if the child passed their newborn hearing screening, should be evaluated by an audiologist who regularly works with young children. Early Intervention programs shall assist families who may need help with an audiological referral.

Recommended Practices:

1) Providing children with Early Intervention services as soon as possible is considered best practice and the need to start Early Intervention services as soon as possible should be explained to the family. The Getting Started: Supporting Children with Hearing Loss booklet was prepared by parents to benefit parents of young children who are deaf or hard of hearing. This resource was designed for families and professionals with the aim of increasing their knowledge and understanding about young children who are deaf or hard of hearing and the supports that are available in Pennsylvania.

2) To best serve children who are deaf or hard of hearing, each Early Intervention program should designate specific Service Coordinators who have obtained proficiency with supporting children who are deaf or hard of hearing through annual and continuing in-service education.

3) Early Intervention services for children who are deaf or hard of hearing should focus on individualized support and include the provision of information specific to language and communication. Accurate and up-to-date information about all language and communication opportunities, including visual, tactile, and listening technologies that support language learning should be provided to families.

4) The IFSP or IEP shall address the communication needs of children who are deaf or hard of hearing. The IFSP or IEP team should also develop an Early
**Intervention Communication Plan** as a part of the IFSP or IEP process. The Early Intervention Communication Plan is a helpful tool to promote discussion among all members of the IFSP or IEP team and can be used to facilitate language and communication driven decisions for children who are deaf or hard of hearing. Discussion at the IFSP or IEP meeting should cover each of the areas identified under Language and Communication Needs; Opportunities for Direct Communication; and Progress, Assistive Technology, Devices and Services. The team should either complete the Early Intervention Communication Plan and append it to the IFSP or IEP or include all the communication plan components in the IFSP or IEP.

5) The IFSP or IEP team for a child who is deaf or hard of hearing should ensure that the learning environment offered to the child complies with the Individuals with Disabilities Education Act (IDEA). In accordance with the JCIH Year 2019 Position Statement, services outlined in the IFSP or IEP may be provided in the home or in a center, in a combination of the two locations, or in community-based environments.

6) Early Intervention services should be delivered by provider(s) with knowledge and skills that are specific to working with children who are deaf or hard of hearing and their families. Providers include teachers of the deaf, speech-language pathologists, listening and spoken language specialists, special instructors, special instructors – hearing, and educational audiologists. Participation in professional development will assist providers in meeting the changing needs of families and provide them with the skills needed to coach families and caregivers with culturally and linguistically sensitive services that are responsive to the needs of the child.

7) A variety of factors should be considered regarding the design of Early Intervention services. These factors include but may not be limited to the following: informed family choice, a child's additional disabilities, a child's communication methodology, assistive technology used by the child, and the family’s cultural beliefs.

8) Families of children receiving Early Intervention services should be offered opportunities to be linked with families in similar circumstances. Early Intervention programs should try to link children and families who choose the same communication option to allow for mutual support and the opportunity for the children to interact in naturally occurring play opportunities. Families should also have access to information about all resources and supports available to
assist them in meeting their child’s educational and communication/language needs. Early Intervention programs can use the following parent support services to help them link families of children who are deaf or hard of hearing and can inform families of these resources:

- **Family Connections for Language and Learning**, is a unique Pennsylvania program affiliated with **Parent to Parent of Pennsylvania**. It is dedicated to serving families of infants, toddlers, and preschool-age children who are deaf or hard of hearing. *Family Connections for Language and Learning* can be reached by calling (717) 580-0839 or emailing FamilyConnections@tiu11.org.

- **Parent to Parent of Pennsylvania** is a statewide resource that can match parents and family members of children with disabilities or special needs with other families with disabilities or special needs. It also provides support to parents on a one-to-one basis, according to the child's diagnosis or parental concerns. *Parent to Parent of Pennsylvania* can be reached at 1-888-727-2706.

9) The revised JCIH risk factor guidelines should be referred to when there is a concern for later on-set hearing loss because a significant number of children who pass the newborn hearing screen or the hearing rescreen are at-risk for later on-set hearing loss, *(JCIH Year 2019 Position Statement, Table 1)*. All Early Intervention personnel should familiarize themselves with the guidelines and recommendations for diagnostic follow-up. The recommendations for diagnostic follow-up are based on the fact that standard newborn screening procedures do not identify all children who are deaf or hard of hearing due to mild or neural hearing loss, progressive hearing loss, or delayed on-set hearing loss.

**NEXT STEPS**

1) Early Intervention programs should evaluate their current practices and make appropriate changes based on this announcement.

2) Announcement EI-13 # 06, titled *Children who Have a Hearing Loss*, is made obsolete with the issuance of this announcement.