

Chapter 21

The Role of Educational Audiologists in the EHDI Process

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Educational audiologists provide a critical link within the Early Hearing Detection and Intervention (EHDI) process. School-based audiologists are in a unique position to facilitate and support the developmental and educational management of children with hearing loss. Audiologists who are employed in school settings have an opportunity, as well as a responsibility, to promote early detection and intervention of hearing loss. While the Individuals with Disabilities Education Act (IDEA) definition of audiology includes identification of children with hearing loss, the responsibility of population-based screening activities are generally considered health initiatives rather than special education responsibilities. Even so, audiologists should be involved with the management of these screenings to ensure that appropriate procedures are followed and screening targets are met. The Joint Committee on Infant Hearing (JCIH) Position Statement outlined guidelines for EHDI programs that include procedures for hearing screening, confirmation of hearing loss, and continued surveillance of infants and toddlers who are at risk for

hearing loss. In addition to identification, IDEA mandates assessment, referral, provision of amplification and habilitation services, and counseling parents and teachers. It also requires activities that promote the prevention of hearing loss. Further, educational audiologists have a responsibility to support families through the development of the Individual Family Service Plan (IFSP) under IDEA Part C.

There are several components of early identification and intervention of hearing loss that warrant consideration by educational audiologists. Foremost are the roles and responsibilities described in the IDEA Part C definition of audiology. These are discussed in Table 1 with specific examples of how educational audiologists may be involved. Other areas where educational audiologists serve as a resource include:

- Information about communication and educational options.
- Information about technology.
- Delivery of services within a child's natural environment.
- Requirements for qualified providers.

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Table 1

Roles & Responsibilities of the Educational Audiologist under IDEA Part C [303.13(b)(2)]

For each of the roles described in Table 1, activities of the educational audiologist are suggested. The degree of involvement is dependent on state and local systems and resources. The educational audiologist should always work in collaboration with families, the EHDI team, Part C, and local clinical audiologists.

Role 1. Identification of children with auditory impairments using at-risk criteria and appropriate audiological screening techniques.

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| <ul style="list-style-type: none"> • Attend equipment trainings at hospitals and provide screening inservices. • Assist with data tracking and management. • Review the screening program outcomes to ensure that the protocol used has met the desired identification targets. • Provide screening rechecks prior to referral for diagnostic evaluation. | <ul style="list-style-type: none"> • Assist with tracking referrals from screening to rescreening to assessment. • Provide information to families about the screening/rescreening process and necessary follow-up steps for assessment, where appropriate. • Participate as a resource provider for the community. • Refer to the Part C point of entry within 2 days of rescreen to | <p>initiate the referral process for possible service coordination and IFSP services. NOTE: In some communities, this step may not be completed until a hearing loss is actually diagnosed. However, if the family needs support and assistance to obtain a hearing evaluation, the Part C referral should be initiated.</p> |
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Role 2. Determination of the range, nature, and degree of hearing loss and communication functions by use of audiological evaluation procedures.

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| <ul style="list-style-type: none"> • Assist families with referrals for initial diagnostic evaluation, helping them locate appropriate pediatric audiological testing facilities. | <ul style="list-style-type: none"> • Refer to confirm diagnosis if necessary. NOTE: In some settings, the educational audiologist may be the diagnostic evaluator. • Contact Part C point of entry within | <p>2 days of hearing loss confirmation to initiate the IFSP process.</p> <ul style="list-style-type: none"> • Assist in the IFSP process with the family and appropriate infant and toddler service provider. |
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Role 3. Referral for medical and other services necessary for the habilitation or rehabilitation of an infant or toddler with a disability who has an auditory impairment.

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| <ul style="list-style-type: none"> • Assist families in understanding diagnostic information (e.g., medical genetics). • Assist families in identifying appropriate medical and other services that may be needed. • Provide unbiased information to families about intervention, communication, and educational options. | <ul style="list-style-type: none"> • Act as liaison between medical providers, the family, and other IFSP team members. |
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Photo courtesy of Sound Beginnings/Utah State University

Table 1 (continued)

Role 4. Provision of auditory training, aural rehabilitation, speech reading and listening device orientation and training, and other services.

- Participate as a member of the multidisciplinary IFSP team to plan services.
- Assist the IFSP team in developing functional outcomes around the priorities the family has identified.
- Provide parents with information about their service agency options considering necessary service provider qualifications. **NOTE:** In some settings, the educational audiologist may be the direct service provider.
- Assist family in transition from Part C to Part B (school) services.

Role 5. Provision of services for prevention of hearing loss.

- Provide hearing screening services through local Part C and Part B (Child Find) agencies.
- Conduct ongoing surveillance measures to monitor hearing of “at-risk” children.
- Provide information on genetic counseling.

Role 6. Determination of the child’s need for individual amplification, including selecting, fitting, and dispensing appropriate listening and vibrotactile devices and evaluating the effectiveness of those devices.

- Refer for personal and assistive hearing instrument selection and fitting. **NOTE:** In some settings, the educational audiologist may be the direct service provider for selecting and fitting of amplification.
- Assist families in identifying financial resources for amplification devices, when needed.



Photo courtesy of Octicon A/S

Family Support

Educational audiologists are in a unique position to offer support to families of infants and young children who are diagnosed with hearing impairment. Because IDEA spans birth to age 21, educational audiologists frequently function as service coordinators for these children until they graduate from high school or otherwise age out of the state's education system. Educational audiologists are a vital link between families and other services children receive, including community-based audiology, cochlear implant centers, physicians, and community family service agencies. As infants transition to preschool and then school-age services and programs, educational audiologists have an increasingly important role within the school team responsible for each child's educational services and particularly as an advocate for their auditory access needs. Educational audiologists who are involved from the time of diagnosis provide consistency for families as their children transition to preschool and beyond. Family support by educational audiologists may include the following support activities:

- Counseling and guidance of parents, family members, and professionals regarding a child's hearing status.
- Identifying needs of parents and families through the IFSP and IEP process.
- Assisting families with identification of appropriate service providers for the family's choice of communication, amplification, and education options.
- Organizing or facilitating parent support groups.
- Connecting families with other deaf and hard-of-hearing individuals.
- Providing unbiased descriptions of communication, amplification, and education options.

Communication and Education Resource

Educational audiologists offer families an unbiased perspective of local, regional,

and state resources. They work with families to empower them in their children's education and to utilize the available resources to assist their child. Educational audiologists support families through the IFSP process by providing information regarding all service options available to deaf and hard-of-hearing infants and young children. They also are instrumental in guiding families through the transition process from Part C to Part B educational services and supports.

Technology

Depending upon the degree of hearing loss and etiology, most newly diagnosed infants are fitted with hearing aids or considered for cochlear implantation. These instruments are the beginning of a technological "journey" that educational audiologists help families navigate. Many infants are fitted with remote microphone hearing assistance technology systems soon after receiving their hearing aids or cochlear implants. Educational audiologists have specialized training in hearing assistance technology and are required to assist families with these devices. Technology can be overwhelming for anyone but can be especially daunting for families of newly identified infants. However, technology provides a critical link to language and communication and therefore is an essential component for building these skills. By working with educational audiologists early on, families can gain greater knowledge and confidence with technology for their children's present and future.

Natural Environments

Educational audiologists have an opportunity to provide services to children in settings that are comfortable to both the child and the parent(s). In most situations, educational audiologists can support families in their homes by observing children in their customary environments. This opportunity helps educational audiologists build

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relationships with families that result in effective communication and encourage partnerships when developing IFSPs and Individualized Education Programs (IEPs). The educational audiologist may also provide information to help families adjust communication in other environments, such as riding in the car, shopping, restaurants, etc. This support may include providing technology and instructing families on the appropriate use of the technology for those situations.

Qualified Providers

Educational audiologists are state licensed professionals with the education and training necessary to provide high-quality services to children who are deaf and hard of hearing. Most audiologists hold a doctorate in audiology (AuD). Educational audiologists can also recommend other qualified service providers for families. There are many parts of an educational team for deaf or hard-of-hearing children, including, but not limited to, speech-language pathologists, early childhood specialists, educational psychologists, teachers, clinical audiologists, otolaryngologists, and pediatricians. Educational audiologists are instrumental

in helping families choose providers that meet their individual family needs.

Partnering with Educational Audiologists

What can be done to begin partnerships between families, EHDI programs, service providers, clinical audiologists, and educational audiologists? The following suggestions are recommended for getting the relationship started::

- The EHDI coordinator can provide the name and contact information of the local educational audiologist to parents. Parents can then contact their local educational audiologist directly.
- Invite the educational audiologist to an appointment with the family or arrange a meeting to discuss resources and services available through the school for infants and toddlers with hearing loss.
- Link families with other families of children with similar hearing losses. Utilize the educational audiologist to assist in identification of appropriate families in the community.
- Include the educational audiologist in the IFSP meeting.

NOTE: Portions of this chapter were drawn from:

Johnson, C. D., & Seaton, J. (2011). *Educational audiology handbook* (2nd ed.). Clifton Park: Delmar Cengage Learning.

Individuals with Disabilities Education Act, idea.ed.gov

Educational Audiology Association. (2009). Recommended professional practices for educational audiology, www.eduaud.org

