Michigan Universal Newborn Hearing Screening Program Rating Form

<table>
<thead>
<tr>
<th>Hospital:</th>
<th>Reporting period</th>
<th>Date report was run:</th>
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<tr>
<th>Reporting</th>
<th>Excellent &gt;95%, Good 90-95%, Fair 85-89%, Unsatisfactory &lt;85%</th>
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</table>
| Percentage of inpatient hearing screen reports received at MDCH. (\# of inpatient hearing screen reports received / \# of births) | \(
\frac{\text{\# of inpatient hearing screen reports received}}{\text{\# of births}} \times 100 = \) ______ |

<table>
<thead>
<tr>
<th>Inpatient Screening Outcomes</th>
<th>Excellent &lt;5%, Good 5-7%, Fair 8-10%, Unsatisfactory &gt;10%</th>
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</table>
| Percentage of infants with refer hearing screen results. (\# of infants referred / \# of completed reports received) | \(
\frac{\text{\# of infants referred}}{\text{\# of completed reports received}} \times 100 = \) ______ |
| Percentage of infants with an incomplete report due to infant restlessness, equipment failure, environmental noise, parent refusal, or transferred. (\# of infants with an incomplete report / total \# of reports received) | \(
\frac{\text{\# of infants with an incomplete report}}{\text{\# of reports received}} \times 100 = \) ______ |
| Percentage of infants with an incomplete report due to discharged without screen. (\# of infants discharged without screen / total \# of births) | \(
\frac{\text{\# of infants discharged without screen}}{\text{\# of births}} \times 100 = \) ______ |

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<tr>
<th>Outpatient Follow-up</th>
<th>Excellent &gt;90%, Good 80-90%, Fair 70-80%, Unsatisfactory &lt;70%</th>
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| Percentage of inpatient infants referred (bilateral) who completed outpatient testing. (\# of completed outpatient results / total \# of inpatient bilateral referrals) | \(
\frac{\text{\# of completed outpatient results}}{\text{\# of inpatient bilateral referrals}} \times 100 = \) ______ |
| Percentage of inpatient infants referred (unilateral) who completed outpatient testing. (\# of completed outpatient results / total \# of inpatient unilateral referrals) | \(
\frac{\text{\# of completed outpatient results}}{\text{\# of inpatient unilateral referrals}} \times 100 = \) ______ |
| Percentage of inpatient infants with incomplete screens who completed outpatient testing. (\# of completed outpatient reports / total \# of inpatient incomplete) | \(
\frac{\text{\# of completed outpatient reports}}{\text{\# of inpatient incomplete}} \times 100 = \) ______ |

In Excellent Category:
5 out of 6 = Gold Rating (Certificate of Excellence)
4 out of 6 = Silver Rating
3 out of 6 = Bronze Rating
## Suggestions for Improvement

### Reporting

**Goal:**
>95% of all births have a hearing screen reported to the MDCH/EHDI Program

- Develop protocol to document all births, hearing screens, reporting results on blood card/chart, and blood card results submitted to state.
- Develop backup protocol for discharge nurse to ensure screening was complete and report sent to state.
- NICU infants should be reported as incomplete, test pending on blood card (subsequent screen should be reported on Aud/Med form).

### Inpatient Screening Outcomes

**Goal:**

- #1 <5% referral rate
- #2 <5% incomplete rate
- #3 <1% discharge without screening

### Documentation

- Document screener who is performing screen.
- Document reasons for parental refusal.
- Document when repeat inpatient screen is needed and completed.
- Document when referral for outpatient screen is needed.
- Document the name of the primary care physician for all children who need outpatient screening.
- Develop system for recording when outpatient screens are completed.

### Screening technique

- Train enough screeners to have daily coverage, but don’t train more screeners than necessary.
- Assess individual screener competence/provide further training if needed.
- Establish environment conducive to screening
  - quiet, free from distractions
  - appropriate timing (early morning, night, after feeding).
- When preparing the infant for screening, do not unnecessarily disturb the infant.
- Screen the ear up side first.
- If using OAE, gently massage ear canal.
- Screen infants who refer at least twice before discharge.

### Equipment Considerations

- Document calibration and equipment checks.
- For equipment failure: know community sites that have equipment and establish equipment contract for backup.
- Call manufacturer for consultation on screening equipment.

### Outpatient Follow-up

**Goal:**

- #1: >90% complete outpatient testing
  
  (Outpatient screening should be completed by 1 month and, if needed, diagnostic testing by 3 months)

- Develop an outpatient recall rescreening program within the hospital or develop referral protocol where the referral site is known.
- Provide parents with verbal and written information regarding hearing screening results, importance for follow-up, and protocol for follow up before discharge.
- Ensure that follow-up literature is language appropriate.
- Make appointment/referral for testing before discharge.
- Obtain alternate contact numbers for the family.
- Confirm with the family the name of the physician who will be caring for the child after discharge.
- Inform primary care physician of the results and discuss follow-up protocol.
- Know and make available information regarding community support services that can assist families in the rescreen/diagnostic process. (Public Health Nurse, Part C, CSHCS).
- Join/establish county EHDI consortium meeting.
- Call family to confirm that follow-up is completed.
- Contact referral site to confirm that outcome is completed.

(Updated 1/13/03)