

EHDI Quality Improvement Project Phase 2 Pre-implementation Survey

Welcome to the Early Hearing Detection and Intervention Quality Improvement Project!

We would like to find out some general information about the family-centered care you currently provide for patients and families. The survey will take no more than 15 minutes of your time. Your survey responses will be kept strictly confidential. We will never link your responses to your name in reports or anywhere else.

The purpose of the pre- and post-implementation survey is to gauge practice team progress towards project aims and measures as well as any practice team growth in quality improvement methodology. Specifically, this survey will highlight the following topics:

- Overall organizational and quality improvement process
- Identification of process improvements made over the 6 month collaborative
- System based, not provider based-changes

You will be given approximately two weeks to complete the survey.

If you have any question about the survey or any other aspect of this AAP QI project, please contact Christina Boothby, MPA, at 847/434-4311 or cboothby@aap.org.

In order to progress through this survey, please use the following navigation buttons:

- Click the Next button to continue to the next page.
- Click the Previous button to return to the previous page.
- Click the Done button to submit your survey.

* 1. Practice Name

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Hospital Hearing Screening Questions

Please answer the following questions based on the "typical" experience for your practice.

Please note that final screen is defined as the second screen that is completed either in the hospital or in an outpatient setting.

* 2. Are the hospital hearing screening results received prior to the first newborn visit?

Yes

No

3. If the hospital hearing screening results are **not** received, are the results requested from the birthing hospitals/facility at the time of the first newborn visit?

Yes

No

4. What is the process used by the practice when the results are not received after requested?

* 5. Do you know what technology is used in your local hospital(s) **normal newborn nursery** to screen infants for hearing loss?

Yes, I'm familiar with the technology used in all hospitals from which we receive babies

Yes, I'm familiar with the technology used in some hospitals, but not from all hospitals from which we receive babies

I'm not familiar with the technology used in any of the hospitals from which we receive babies

Comment:

* 6. Do you know what technology is used in your local hospital(s) NICU to screen infants for hearing loss?

- Yes, I'm familiar with the technology used in all hospitals from which we receive babies
- Yes, I'm familiar with the technology used in some hospitals, but not all of the hospitals from which we receive babies
- I'm not familiar with the technology used in any of the hospitals from which we receive babies
- Comment:

* 7. What is the next step when your practice has an infant who does not pass the hospital newborn hearing screening?

- The hospital re-screens the infant
- The practice re-screens the infant
- The hospital sets up a diagnostic exam
- The practice sets up a diagnostic exam
- The parent/family sets up a diagnostic exam
- Other (please specify):

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Final Newborn Hearing Screening Questions

Please note that final screen is defined as the second screen that is either completed in the hospital or in the outpatient setting.

* 8. Does your practice receive all final hearing screening results in a timely fashion?

Yes

No

Sometimes

9. If you answered no to the question above, please explain why your practice does not receive final screening results in a timely fashion.

* 10. Do clinicians in your practice review the results of the newborn hearing screening with families? (Please note: this includes the results of the screen done in the hospital AND results from the second and final screen.)

Results are not reviewed with the family

Results are reviewed with the family only if the infant did not pass the screening

Results are reviewed with all families

Comment:

11. If the results are reviewed with the family, is the discussion documented in the patient's medical record?

Yes

No

Sometimes

* 12. Is your practice able to identify all infants who did not pass their final newborn hearing screening and require referral to an audiologist for a diagnostic evaluation?

Yes

No

* 13. In your practice, do clinicians review the importance of diagnostic follow-up with families of infants who do not pass their final newborn hearing screening?

Yes

No

Sometimes

14. If clinicians do review the importance of diagnostic follow-up with families, is this discussion documented in the patient's medical records?

Yes

No

Sometimes

* 15. If the infant does not pass their final newborn hearing screening, is your practice able to place this child in a tracking system to alert the need for ongoing monitoring?

Yes

No

* 16. Does your practice reach out to families to encourage them to attend the scheduled diagnostic appointment?

Yes

No

Sometimes

17. If you answered yes to the question above, how do you reach out to families?

* 18. Does your practice receive the results of the diagnostic testing from the audiological provider?

Yes

No

Sometimes

* 19. Does your practice review the diagnostic results with the family?

Yes

No

Sometimes

20. If your practice does review the diagnostic results with families, is the discussion documented in the patient's medical record?

Yes

No

Sometimes

21. At what age does your practice typically receive the diagnostic testing results?

By 2 months

By 4 months

By 6 months

After 6 months

Indicate another time:

22. What is your practices process for families who do not complete a diagnostic follow-up?

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Identified Hearing Loss Questions

* 23. For infants identified as having hearing loss, does your practice make a referral to Early Intervention?

Yes

No

Sometimes

* 24. For infants identified as having hearing loss, does your practice provide the family with written next steps and a list of local resources, including parent/family support organizations?

Yes

No

Sometimes

* 25. Is your practice able to identify all infants who have a diagnosed hearing loss?

Yes

No

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Risk Factor Questions

* 26. Do clinicians in your practice assess infants for risk factors associated with late onset or progressive hearing loss?

Yes

No

27. If yes, when does this assessment take place?

The initial visit with the infant

The first 2 weeks

By 6 weeks of age

By 4 months of age

Indicate another time:

* 28. What risk factors associated with late onset or progressive hearing loss are you assessing for?

Parental or caregiver concern

Family history of permanent childhood hearing loss

Neonatal intensive care of more than 5 days or any exposure to ototoxic medications

Intrauterine infection

Craniofacial anomalies

Physical findings associated with a syndrome known to include a sensorineural or permanent conductive hearing loss

Syndromes associated with progressive hearing loss

Culture-positive postnatal infections associated with sensorineural hearing loss

Other (please specify):

* 29. Are clinicians reviewing the results of these risk factor assessments with families?

Yes

No

Sometimes

30. If your practice reviews risk factor assessments with the family, is the discussion documented in the patient's medical record?

Yes

No

Sometimes

31. If risk factors for late onset or progressive hearing loss are identified, what does your practice do differently for those patients?

* 32. If an infant is identified as having risk factors for late onset or progressive hearing loss, is your practice able to place this child in a tracking system to alert the need for ongoing monitoring?

Yes

No

Sometimes