

Gathering Needs & Resource Assessment information to Guide Tele-audiology

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How do we determine the best use of our tele-audiology efforts?

1. Identify the stakeholder groups in our System of Care
 - a. Families/Children (Hands & Voices, AGBell, ASDC, F2F HIC, Family Voices, etc.)
 - b. Private Providers (PCPs, ENTs, Audiologists, birthing centers, etc.)
 - c. EHDI, other state administration (NBHS/EHDI, Part C/EI, TitleV, Department of Health, Educators, Audiologists, etc.)
2. Determine needs, inquire about; what is the most critical barrier is to getting kids screened/diagnosed? Which geographical areas have greatest need? Where is the “low hanging fruit” (resources in place, etc.). This creates buy-in, validates thinking/beliefs, identify potential locations.
 - a. Survey
 - i. Formal (survey monkey) and/or
 - ii. Informal (asking around, inquiring)
 - b. Analyze needs
 - i. Did they match up with what we thought we knew?
 - ii. New information not previously considered?
 - c. Questions to be answered
 - i. What areas had the highest Loss to Followup?
 - ii. What birthing centers have high miss/refer rates?
 - iii. Where are pediatric audiologists physically located?
 - iv. Where/what kind of equipment is out there for doing screenings and diagnostic assessments? (type/locations)
 - v. What are barriers to attending appointments? (Mileage/distance, terrain, weather, transportation, literacy, etc.)
 - vi. How do we do referrals today?
 - vii. Where are resources today that could be trained for “spoke” location?
 - viii. Are there audiologists with minimal experience that we could train to be “spoke” to get them some experience?
 - ix.
3. Assessing needs of families/children
 - a. Identify the stakeholder groups
 - b. Examination of state EHDI database for geographical clusters of children lost to follow up

- c. Information gathering from providers of diagnostic and rehabilitative audiology service providers regarding capabilities (also soon to be available from EHDI-PALS)
 - d. Survey Part C service coordinators about barriers to accessing care and recommendations about geographic areas in which to focus tele-audiology efforts
- 4. Assessing needs of private providers
 - a. Contacts through state speech and hearing associations, state chapters of the academy of audiology.
 - b. Surveys regarding continuing education needs.
 - c. Partner with state speech and hearing associations to provide training (annual meetings/conferences, hands-on training).
 - d. Provide training at state EHDI conferences
- 5. Assessing needs of EHDI, other state administration
 - a. ??? what to say about this
 - b. Medicaid? What information would they need to make a decision about reimbursement??
 - c. Licensure boards