

NEWBORN HEARING SCREENS
PEDIATRIC LISTSERV SUMMARY
APRIL 2018

Responses:

ORG A

- Do you contract out your Newborn Hearing Screening program in your NICU and/or for outpatient newborn hearing screenings? [I am not referring to any diagnostic audiology work with these infants. No but we have two different areas targeting hospital affiliate newborn screening needs under physician supervision and a NICU newborn screener that is under Acute Care Rehab \(.75 FTE\)](#)
- Which piece do you contract out? NICU or OP? Both? [None](#)

If you do contract it out:

- Are you satisfied with the services provided by the Newborn Hearing Screening company?
- If you would be willing to share the company that provides your services – either as a part of the reply to be compiled or privately?

If you keep it in-house:

- Does the program work through the Audiology department? [The NICU program is under the Audiology department, and we have Audiologists float over to Acute Care and oversee the program](#)
- What is the skill set of the person that runs the program (monitors the state data base, etc.) [Our administrative assistant enters the NICU data in the state data base. For the physician provider group, there is a newborn screening supervisor that manages this data.](#)
- how much time is dedicated to managing the data base? [The physician group has a newborn screening supervisor that manages this data base.](#)

ORG B

In house – We do not contract out screening.

- Nursing technically “owns” the majority of the program. Audiology consults on program design, development, training, validation and if asked equipment selection.
- The state data base is monitored through our program in DPH. The State staff closely monitor 1-3-6 benchmarks and manage loss to follow-up at various stages in the process through letters to medical home, consulting with birth hospitals, and with the state early intervention program.

- Our audiologists and audiology assistant have access to the state database and closely manage our patients to reconcile data re 1-3-6 benchmarks and to manage loss to follow-up.
- We are a diagnostic audiology site for many birth hospitals beyond our own and contribute to managing follow-up (3 and 6 month benchmarks) for babies that refer from those programs but not those that pass.
- We also sit on a state Task Force that serves in an advisory capacity to the program in DPH. The task force meets monthly and includes diverse stakeholders.
- Time? This is a wild guess maybe 8-10 hours per month at most.

ORG C

Do not contract out - program does work through Audiology. We have an RN that works contingent; she does our NICU screenings.

She sends results to the state; I don't know that we really "monitor" the data base. We certainly check the data base to determine a child's history of testing/passing/referring.

ORG D

Recently contracted out Outpatient only to Peloton NBHS company. No problems noted.

ORG E

- Do you contract out your Newborn Hearing Screening program in your NICU and/or for outpatient newborn hearing screenings? *I am not referring to any diagnostic audiology work with these infants. We have our own pediatric audiology department who handles the screenings in OB and NICU using Communication Assistants. Babies who need further testing can be tested in our audiology department (within 1 month of discharge)*
- Which piece do you contract out? NICU or OP? Both?

If you do contract it out:

- Are you satisfied with the services provided by the Newborn Hearing Screening company?
- If you would be willing to share the company that provides your services – either as a part of the reply to be compiled or privately?

If you keep it in-house:

- Does the program work through the Audiology department? *Yes*
- What is the skill set of the person that runs the program (monitors the state data base, etc.)? *Communication Asst. are on the job trained. Their skills set competency is reviewed by an audiologist as part of the supervision program/*

The communication asst. input information directly into the state data base. A pediatric audiologist reviews and manages the state data base outcomes.

- About how much time is dedicated to managing the data base? Audiologist: 6 hours monthly. Communication assistants may take up to an hour daily to input data.

ORG F

Do you contract out your Newborn Hearing Screening program in your NICU and/or for outpatient newborn hearing screenings? I am not referring to any diagnostic audiology work with these infants.

No, all hearing screening is completed by ORG F Audiologists.

If you keep it in-house:

- Does the program work through the Audiology department?
Yes
- What is the skill set of the person that runs the program (monitors the state data base, etc.)
Licensed and certified audiologist
- About how much time is dedicated to managing the data base?
Varies. Tied to state reporting as well – two states. Also have audiologist assistant helping with data management.

ORG G

- Do you contract out your Newborn Hearing Screening program in your NICU and/or for outpatient newborn hearing screenings? I am not referring to any diagnostic audiology work with these infants. No.
- Which piece do you contract out? NICU or OP? Both?

If you do contract it out:

- Are you satisfied with the services provided by the Newborn Hearing Screening company?
- If you would be willing to share the company that provides your services – either as a part of the reply to be compiled or privately?

If you keep it in-house:

- Does the program work through the Audiology department? Yes.
- What is the skill set of the person that runs the program (monitors the state data base, etc.)
We have an audiologist (Program Coordinator) who runs the program and oversees the audiologists and associates that conduct the newborn hearing screenings.
- About how much time is dedicated to managing the data base?
We spend about 5-6 hours per week updating the database & follow up for kiddos missed/referred in the NICU. For reference/comparison, we had approximately 1400 admissions in our NICU last year, and we screened/followed just over 500 babies.

ORG H

We contract out our newborn hearing screenings to the same company for consistency across all our nurseries and our NICU. We use Pediatrix. We did this several years ago when we realized that we were not getting paid to do the screenings but Pediatrix was getting paid for the hospitals they served. We have had to work on the process for making sure we got any follow up appointments scheduled. It seems to be working ok now.