

SOUND MATTERS

Audiology Newsletter of the Minnesota Early Hearing Detection & Intervention Program



Transient Conductive Hearing Loss

In 2014, MDH reviewed cases of newborn hearing loss initially diagnosed by audiologists as transient conductive (101 cases reported in 2012). Final hearing outcomes (after middle ear issues resolved) remained unknown two years later in 70% of cases initially reported as transient conductive. Further review showed that:

- 40% had complex medical histories that included multiple risk factors for hearing loss
- 16% of those who had a final outcome reported had underlying permanent hearing loss after middle ear issues resolved

Infants born in 2017, who were reported to have transient conductive hearing loss, were actively followed to obtain final hearing outcomes after middle ear issues resolved. The audiology clinic was first contacted 10 weeks following the date of initial diagnosis, and then once again at around six months of age. If the outcome remained unknown after six months, then a notice was sent to primary care requesting updates on hearing status if follow-up continued.

- 105 cases were reported with transient conductive loss

- 57% had bilateral transient conductive loss
- 33% were cared for in NICU
- 61% (64/105) had unknown final hearing outcome at final MDH contact around six months of age (follow-up and/or middle ear issues were ongoing or follow-up had not occurred)
 - 35% (23/64) of unknown cases had NICU stay
- 39% (41/105) had final outcomes reported
 - 37 resolved to normal hearing (15 of those resolved by the 10 week follow-up)
 - 4 had underlying permanent loss confirmed
 - 11 were received after the end of the MDH active follow-up process (suggesting the final letter to primary care was of benefit and/or that audiologists are reporting the final outcome whenever it is obtained)

MDH will continue to actively follow transient conductive hearing loss for final outcomes and will continue to examine data reported in 2018 to further streamline this tracking process.

Did you know? 2018 MDE Report on D/HH Students

[The Minnesota Department of Education 2018 legislative report on outcomes for Students Who are Deaf or Hard of Hearing \(D/HH\)](#) is now available. The report includes regional and large district aggregate student educational outcome data using MCA reading and math proficiency scores as the measurement tool. Students who had D/HH listed as their primary special education designator met or exceeded proficiency at higher rates than students with other special education designators, but scored lower compared to all students. The report concludes that more detailed examination of the educational environment will continue to be necessary to improve outcomes for students not meeting educational standards. Ongoing professional development for all IEP team members is part of the plan to reduce outcome disparities.

Have You Heard?



Early Learning Outcomes for D/HH Students

Educational teams who serve Part C infant/toddler (birth through two years) and Part B preschool special education services (three to five years/entering kindergarten) complete assessments for early learning outcomes. The Minnesota Department of Education (MDE) collects this data. For 133 children who are DHH completing Part B preschool services between 7/1/16 and 6/30/17:

- 76% had early literacy skills at/above age level
- 89% had early numeracy skills at/above age level
- Primary communication mode chosen by families included 58% listening/spoken language, 32% combined methods (90% of the combinations included spoken language, 28% included some level of ASL), 4.5% (n=6) spoken language supplemented by signing, 2.3% (n=3) ASL, 1.5% (n=2) simultaneous spoken and signed, 1.5% (n=2) augmentative, <1% (n=1) spoken and cued.

SLEDS

The Minnesota Statewide Longitudinal Education Data System (SLEDS) is designed to help districts, schools, and workforce supports make informed, data-driven decisions. The Minnesota Department of Education and the Minnesota Department of Employment and Economic Development use this tool to match student data from pre-k through postsecondary education and employment. With this tool, a range of educational programming and delivery questions can be answered to gauge the effectiveness of current programs and to target improvement strategies. Recent data about ACT scores shows that students who are Deaf/Hard of Hearing (average score=21) are testing nearly even when compared to all students (average score=22). Learn more at <http://sleds.mn.gov/>.



Last Words from the Advisory Committee



Meeting highlights...

- Early Hearing Detection and Intervention (EHDI) can also mean “Early Healthy Deaf Identity” in the eyes of some families. Cultural sensitivity to this viewpoint is important.
- Multiple statewide databases continue to expand knowledge about children who are Deaf/Hard of Hearing (D/HH) and their learning outcomes. Audiologists can explore trends using the [Minnesota Early Childhood Longitudinal Data System \(ECLDS\)](#) and [Minnesota Statewide Longitudinal Education Data System \(SLEDS\)](#).
- [Foundations for Literacy Curriculum](#) focuses on improving language and literacy skills with preschool students who are DHH. It will be launched by 21 Minnesota teams during 2018-19.

Next meeting:

November 7, 2018
1:00 – 4:00 p.m.
Amherst A. Wilder Foundation
451 Lexington Parkway North
St. Paul, MN 55104

Contact Us:

Newborn Screening

601 Robert St N, St Paul, MN 55155

Phone: (800) 664-7772 or (651) 201-5466

Fax: (651) 215-6285

Email: health.newbornscreening@state.mn.us

Web: www.health.state.mn.us/newbornscreening

EHDI Website: www.improveehdi.org/mn