



## Part C Service Coordinator's / Service Provider's / IEP Case Manager's Checklist: Supporting Families of Children Who are Deaf or Hard of Hearing

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*This informal checklist was created by members of the MN Regional EHDI Teams, with participation of families, early childhood education professionals, and staff members from other agencies that serve individuals who are Deaf or Hard of Hearing. It is offered as a supplement to resources and materials available for use with all young children receiving Early Intervention or Preschool Special Education services, including the Service Coordinator Project modules and resources that can be found on the MN Centers of Excellence website. [Click here to go to the MN COE website](http://mncoe.org/documents/) (<http://mncoe.org/documents/>). This checklist includes important supports and resources to be discussed with and/or provided to families of young children who are Deaf or Hard of Hearing as they begin to receive Part C Early Intervention Services or Part B Preschool Special Education Services. Service Coordinators and Service Providers are encouraged to use this checklist to record the date(s) on which these topics were discussed with families and the information provided.*

Child Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent(s)/Caregiver(s): \_\_\_\_\_

Service Coordinator/Provider(s): \_\_\_\_\_

### Intake / Initial Evaluation Process

Note Dates Discussed/Actions:

1. A Teacher for Deaf and Hard-of-Hearing children, Educational Audiologist, and/or other highly qualified professional(s) with specific training and expertise in serving young children who have hearing loss are members of the child's evaluation team and have been involved early in the intake process.

### Family Needs

Note Dates Discussed/Actions:

1. The family's primary needs are met. The child and family have adequate food, shelter, clothing, heat, etc. Collaborate with interagency partners (including EHDI Key Contact person at your Local Public Health Agency and County Social Services) to assure that the family's needs are met; refer to appropriate resources as needed.
2. If needed, a spoken language interpreter, cultural liaison, or sign language interpreter is available to facilitate communication with the family, to assist in the intake-evaluation-IFSP process and the provision of Early Intervention Services.

## Medical and Audiological Care

Note Dates Discussed/Actions:

1. The child has a consistent medical home and/or Primary Health Care Provider who has been informed of the child's hearing status and provides follow-up care.
2. The family has accessible transportation to medical and audiological appointments.
3. The family has adequate health care insurance/medical assistance coverage/funding for:
  - a. Appointments with the child's Primary Health Care Provider
  - b. Appointments with medical specialists (including ENT and Ophthalmology)
  - c. Initial clinical audiology/diagnostic hearing evaluations to confirm hearing status
  - d. Clinical audiology rechecks of hearing acuity every 3-6 months until 3 years of age to obtain more detailed hearing results and to monitor for progressive hearing loss
  - e. Fitting/purchase of quality hearing aids appropriate for the child; if chosen by the family
  - f. Hearing aid follow-up checks/repair/replacement and new earmolds as needed  
*(New earmolds may be needed every 1-2 months for children younger than 1 year of age and every 3-4 months for children 2-3 years of age).*
4. The Primary Care Provider has discussed with the family / made medical referrals for care related to co-occurring condition(s) as needed.
5. The Primary Care Provider has discussed with the family / made medical referrals as appropriate to clinical audiology and appropriate medical specialists.
  - a. Otolaryngology (ENT) evaluation discussed?      Evaluation completed?
  - b. Clinical Audiology evaluation discussed?      Evaluation completed?
  - c. Ophthalmology evaluation discussed?      Evaluation completed?
  - d. Genetics evaluation\* discussed?      Evaluation completed?
  - e. Other

*(\*Note: There are personal considerations unique to each family regarding the decision to have a genetics evaluation. Not every family will desire, be referred for, or receive a genetics evaluation.)*

6. A diagnostic hearing evaluation has been completed, indicating that the child has a hearing loss in one or both ears. Date of confirmation of hearing loss: \_\_\_\_\_  
Clinical Audiologists name and contact information: \_\_\_\_\_
7. A written report from the diagnostic Audiologist has been received by the parents and the local school district ECSE Part C/B evaluation team.

## Hearing Technology

Note Dates Discussed/Actions:

1. Has the use of hearing aid(s) and/or cochlear implant(s) been recommended for the child?  
Do parents wish to pursue the use of hearing technology for their child?
2. Has medical clearance been received for the child to wear hearing technology?
3. If the use of hearing technology is chosen by the family, has an initial hearing aid fitting been completed by the clinical audiologist? Date of initial hearing aid fitting: \_\_\_\_\_

*Note: The clinical audiologist may connect the family with the Lion's Hearing Aid Loaner Program at the University of Minnesota. [Click here for more information about the Lion's Hearing Aid Loaner program.](http://www.improveehdi.org/mn/library/files/lionsloanerbank.pdf) (<http://www.improveehdi.org/mn/library/files/lionsloanerbank.pdf>)*

4. The family has received a hearing aid listening kit and hearing aid monitoring instructions. The hazards and response to a child swallowing a hearing aid battery have been discussed with the family.
5. The child's hearing aid(s) and/or cochlear implant(s) have been insured against loss/damage.

## Connections and Communication

Note Dates Discussed/Actions:

1. The family has met with a Teacher for Deaf and Hard-of-Hearing children and/or other highly qualified provider with expertise in the unique needs of infants/toddlers who have hearing loss.
2. The family has been given the opportunity to meet with other families of young children who are Deaf or Hard of Hearing in their community.
3. The family has been provided with unbiased, accurate information about all communication choices, along with resources for additional information.
4. Individuals with training and/or expertise in the family's specific communication area(s) of interest are available to talk to, or meet with the child and family.

5. The family has been given information about Minnesota Hands & Voices for family-to-family support. Contact with a Parent Guide has been offered / completed. [Click here for more information about MN Hands and Voices](http://www.mnhandsandvoices.org/) (<http://www.mnhandsandvoices.org/>)
  
6. The family has received a call from a parent representative of MN Hands & Voices. *(Note: MN Hands & Voices Parent Guides make calls to all families of children newly-identified with hearing loss under a contract with the MN Department of Health EHDI Follow-up Program.)*
  
7. The family may wish to receive a folder of information from MN Hands & Voices, provided at no cost to families, which may include:
  - a. **“THE BOOK OF CHOICE—SUPPORT FOR PARENTING A CHILD WHO IS DEAF OR HARD OF HEARING,”** Hands and Voices. Currently available in English and Spanish. [Click here for Hands and Voices product information.](http://www.handsandvoices.org/resources/products.htm) (<http://www.handsandvoices.org/resources/products.htm>)
  
  - b. **“PATHWAYS TO LANGUAGE AND COMMUNICATION”** DVD, Beginnings for Children Who Are Deaf or Hard of Hearing. [Click here for Beginnings product information](http://ncbegin.org/product/pathways-to-language-and-communication/) (<http://ncbegin.org/product/pathways-to-language-and-communication/>)
  
8. The family has received the book **“UNDERSTANDING YOUR CHILD’S HEARING LOSS—A GUIDE FOR PARENTS”** from their clinical audiologist at the time of confirmation of hearing loss. (Currently available in English and Spanish.)

*Note: This MN resource is provided to families by the MN Department of Health through the clinical audiologists. It is based on a book written and disseminated by Beginnings for Parents of Children Who Are Deaf or Hard of Hearing, Inc. in North Carolina. [Click here for the NC Beginnings website](http://www.ncbegin.org) ([www.ncbegin.org](http://www.ncbegin.org)). [Click here for Beginnings product information](http://ncbegin.org/product/pathways-to-language-and-communication/) (<http://ncbegin.org/product/pathways-to-language-and-communication/>).*

9. The family has received the 3-ring binder organizer for parents by mail from the MN Department of Health, titled, **“WHAT YOU NEED TO KNOW; RESOURCES FOR FAMILIES,”** and the **“Parent Roadmap”** brochure. (Currently available in English.) [Click here to view contents of the binder organizer](http://www.improveehdi.org/MN/library/files/parentbinderindex.htm) (<http://www.improveehdi.org/MN/library/files/parentbinderindex.htm>) [Click here to view the Parent Roadmap](http://www.health.state.mn.us/divs/cfh/program/cyshn/content/document/pdf/roadmap-en.pdf) (<http://www.health.state.mn.us/divs/cfh/program/cyshn/content/document/pdf/roadmap-en.pdf>)
  
10. The child’s Early Intervention Service Providers also have access to the print resources listed above in 7, 8, and 9 and are able to use and discuss these resources with families.

11. The family has been provided information about the Deaf Mentor Family Program through Lifetrack Resources. [Click here for more information about the Deaf Mentor Program](http://www.lifetrack-mn.org/services/dmfp).  
(<http://www.lifetrack-mn.org/services/dmfp>)
  
12. The family has been provided information about connections with Deaf or Hard of Hearing adult role models. [Click here to read a Hands and Voices article on adult role models](https://www.mnhandsandvoices.org/news-events/focus-newsletter/julyaugust-2014/mnhv-the-role-of-the-adult-role-model.aspx)  
(<https://www.mnhandsandvoices.org/news-events/focus-newsletter/julyaugust-2014/mnhv-the-role-of-the-adult-role-model.aspx> )

## **Helpful Websites for Families of Newly-Identified Young Children Who are Deaf or Hard of Hearing:**

Beginnings for Parents of Children Who are Deaf or Hard of Hearing  
[Click here to go to the Beginnings website](http://www.ncbegin.org) (<http://www.ncbegin.org>)

Boys Town National Research Hospital; *"My Baby's Hearing"*  
[Click here to go to "My Baby's Hearing" website](http://www.babyhearing.org) (<http://www.babyhearing.org>)

Centers for Disease Control; *"Hearing Loss in Children"*  
[Click here to go to the CDC Hearing Loss in Children website](http://www.cdc.gov/ncbddd/hearingloss/index.html)  
(<http://www.cdc.gov/ncbddd/hearingloss/index.html> )

Centers for Disease Control; *"Making a Plan for Your Child: IFSP Considerations for Children Who are Deaf or Hard of Hearing"*, [Click here for the "Making a Plan" resource](http://www.cdc.gov/ncbddd/hearingloss/freematerials/planforyourchild.pdf) .  
(<http://www.cdc.gov/ncbddd/hearingloss/freematerials/planforyourchild.pdf>)

Hands & Voices (national)  
[Click here to go to the Hands and Voices website](http://www.handsandvoices.org/) (<http://www.handsandvoices.org/>)

Minnesota Hands & Voices  
[Click here to go to the MN Hands and Voices website](https://www.mnhandsandvoices.org/) (<https://www.mnhandsandvoices.org/>)

National Center for Hearing Assessment and Management; *"Just in Time" Hearing-Related Resources for Families*, [Click here for the "Just in Time" resource](http://www.infanthearing.org/familysupport/just-in-time-color.pdf).  
(<http://www.infanthearing.org/familysupport/just-in-time-color.pdf>)

## **Additional Resources for Service Providers:**

This Service Coordinator/Provider checklist, additional resources, and links for more EHDI information can be found on the MN Low Incidence Projects website-EHDI page. [Click here to go to the MN Low Incidence Projects-EHDI website](http://www.mnlowincidenceprojects.org/ehdi.html). (<http://www.mnlowincidenceprojects.org/ehdi.html>)

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