

A photograph of a woman with long brown hair and a young child with blonde hair. The child is wearing a cochlear implant on their left ear. They are both looking at a red heart-shaped toy that the child is holding. The woman is holding the toy near her mouth. The background is a simple indoor setting with a white wall and a wooden shelf.

Infant Hearing Program Roadmap for Families

Congratulations on the recent birth of your baby! Over the coming years, you will watch your baby grow and develop into their amazing little self. Along the way, you will have some help to make sure baby is set up for their success. Follow this roadmap as your baby grows and you navigate their journey to communication!

How to Use This Roadmap: Follow the road of your child's journey through the steps of the Infant Hearing Program. Your path may pause, skip a step, or stop at anytime. Follow the guidance along the way to know what next steps apply to your child.

Any items that are underlined will direct you to more information about that portion of the journey. You may use this roadmap often or find yourself coming back to it every now and then for more understanding or resources when you need them. Use it however is helpful to your family!



**Department of
Health**

Infant Hearing Program Roadmap for Families

1

Birth up to 1 Month

Screening, before hospital discharge,
Home birth no later than 1 month



Pass: Your baby passed the hearing screening. It is important to monitor speech and language development as hearing can change as your baby grows.

Pass with Risk Factors: Your baby passed the hearing screening, but it is recommended your baby's hearing be monitored by a pediatric audiologist.

Non-Pass: After two non-pass results, additional testing is needed to determine if your baby has hearing loss called a diagnostic hearing evaluation.

Missed: If there's a problem with screening equipment, you are discharged early, or other reasons, you may be asked to come back to complete the screening.

2

1 Month-3 Months

A diagnostic hearing evaluation is completed by a pediatric audiologist.



Normal Hearing: Your baby has normal hearing, continue to monitor hearing developmental milestones.

Hearing Loss Identified: The hearing loss type and degree in each ear will be diagnosed and discussed by your pediatric audiologist.

3

3 Months – 6 Months

Once hearing loss is confirmed, your family will be referred to receive Early Intervention (EI) services. These are home-based services to help with your baby's development.



4

6 Months – 2 Years & 6 Months

Your child is now enrolled in and receiving EI services. Goals were made based on your desires for your family and your child's needs. These can be revised at anytime at your request.



5

2 Years & 6 Months to 3 Years

Your child will age out of EI services at 3 years old. Before then and with the help of your EI team, you will change your goals to now be education based through preschool services.



Department of
Health

1 Birth to 1 Month

Your child is born – CONGRATULATIONS!



Hospital Birth: State law requires babies born in a hospital to have a newborn hearing screening before going home. The screening is completed shortly after birth in the mother's room or in the nursery in a simple and safe manner. The screening shows if there is a risk for hearing loss and uses one or both of these tests.

1. **Auditory Brainstem Response (ABR):** This test checks the hearing nerve. Three small patches are placed on the baby's face, shoulder, and neck; then, small headphones are placed over the baby's ear, or small ear tips are placed in the baby's ears and the baby hears soft sounds.
2. **Otoacoustic Emission (OAE):** Small, soft foam or rubber tips are placed inside the baby's ears and the baby hears soft sounds. Small echoes are recorded from the baby's ear to observe the function of the inner ear.

Home Birth: Hearing screenings are strongly encouraged to be completed before your baby reaches 1 month of age, and older babies may need additional testing due to age. When registering your baby's birth at the local health department, you will receive a [home birth parent brochure](#). The [EHDI PALS](#) website has a list of screening locations where you can schedule a screening and can be filtered to schedule an appointment closest to home.

Screening Results & Next Steps

Pass: Your baby passed the hearing screening. No further tests are required at this time, but you should monitor your child's [speech and language development milestones](#).

Pass with Risk Factors: Your baby passed the hearing screening but has a risk factor(s). A risk factor could mean your baby has a higher chance of developing hearing loss later in their life. A follow-up test may be recommended, and it is important to monitor your baby's communication.

Non-Pass: Your baby did not pass the hearing screening, and a more detailed test is needed: A diagnostic hearing evaluation. The evaluation will need to be scheduled soon, within two to four weeks after discharge, with a pediatric audiologist who can find hearing loss. Insurance information needs to be provided when scheduling the screening so that the payment will go through the baby's insurance plan. If you are worried about paying for additional evaluations and medical appointments, <https://odh.ohio.gov/know-our-programs/children-with-medical-handicaps/Family-Resources> (CMH) program can cover diagnostic evaluations if seen by a CMH-approved provider. For more information: [My Baby did not Pass the Hearing Screening](#).

Missed: Your baby missed the hearing screening. This can be because you and your baby were able to be discharged early, there was an problem with the screening equipment or other reasons. If this is the case, it is recommended you still have the screening completed for your baby. Before your baby is 1 month of age, you may return to the hospital or go to an audiologist to complete the screening. Hospital staff or your baby's pediatrician can give you this information. If your baby is over 1 month old, you will not go for screening, but instead schedule a diagnostic hearing evaluation. See information about this above in the 'Non-Pass' section.

2 1 Month-3 Months

Your baby needs a diagnostic hearing evaluation



Completing diagnostic testing and finding any level of hearing loss early is important to ensure that all children can develop on-time language and communication skills.

The diagnostic hearing evaluation is completed by a pediatric audiologist. A list of pediatric audiologists may be provided by hospitals and birthing centers and can be found on the [EHDI PALS website](#).

What to expect at the diagnostic hearing evaluation:

- When scheduling the evaluation, you should be given instructions to prepare for the visit. Often, audiologists will ask that your baby is hungry and fussy when you arrive for the appointment. This may mean delaying a feeding and avoiding a nap on the travels to the appointment. Once you arrive at the clinic, you will be given time to feed and relax your baby. This will soothe their hunger and fussiness, encouraging a nice nap during the test. A restfully sleeping baby helps the audiologist get the most accurate results for your baby.
- At the evaluation, an audiologist will use a few tests that provide detailed information about your baby's hearing and help the audiologist identify hearing loss.
- The audiologist will then go over the results of your baby's evaluation.

The three most commonly used tests:

- **Diagnostic Auditory Brainstem Response (ABR):** Several types of ABR may be used at the follow up evaluation. This test records information from the hearing nerve by placing three small patches on the baby's face, shoulder, and neck, then small headphones are placed over the baby's ear, or small ear tips are placed in the baby's ears and the baby hears soft sounds.
- **Diagnostic Otoacoustic Emissions (OAE):** Small, soft foam or rubber tips are placed inside the baby's ears and the baby hears soft sounds. Small echoes are recorded from the baby's ear to observe the function of the inner ear.
- **Tympanometry:** This test looks at how well your baby's eardrum moves. It is used to detect an ear infection or see if fluid is present. A small probe is placed in your baby's ear and the air pressure is gently changed. Sometimes fluid can prevent getting accurate hearing results. More testing or a referral to the baby's doctor or otolaryngologist, more commonly known as an ear, nose, and throat (ENT) doctor, may be needed.

Evaluation Results & Next Steps:

Normal Hearing: No hearing loss was detected in your baby's diagnostic evaluation. No further tests are required at this time, but you should monitor your child's [speech and language development milestones](#).

Hearing Loss Identified: In some instances, until the Audiologist can confirm the hearing loss is permanent. If you have any concerns you can always schedule additional appointments with an audiologist. This can be typical. You may also be directed to an Ear, Nose, and Throat doctor (Otolaryngologist) for more care between Audiology appointments.

Once confirmed, the audiologist will talk with you about the type and degree of hearing loss in your baby. Resources on [early intervention services](#), how to connect with families of children with hearing loss, and information on [communication options](#) are provided. The next step is to choose to be referred to Part C Early Intervention Services.

Parent-to-Parent Support:

You may have many questions about the next steps for you that may not best be answered by your medical professional or you might not know to ask. You can receive parent-to-parent support and learn about resources available to you from our parent consultant. This is the parent of a child who, like your baby, has hearing loss. They have lived experiences that may help you navigate your next steps.

Contact our parent consultant at (614) 698-8233 or InfantHearingProgram@odh.ohio.gov.

Ohio Hearing Aid Assistance Program:

The Ohio Hearing Aid Assistance Program (OHAAP) provides assistance to families with children, birth up to 26 years of age, with hearing loss, to purchase hearing aids, assistive listening devices, earmolds, external cochlear implant processor replacements, and/or hearing aid batteries.

Families with income at or below 400% of the federal poverty guidelines are eligible for this program. The table of federal poverty guidelines can be found here https://odh.ohio.gov/wps/wcm/connect/gov/28bc7f33-8b03-4398-bc77-0ca3cb367c20/2024+Guidelines+-+FPR+and+Family+Sliding+Scale+Fee-UPDATE.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_79GCH8013HMOA06A2E16IV2082-28bc7f33-8b03-4398-bc77-0ca3cb367c20-oSeGQyb. Families who qualify and are interested in the program must complete the [Family Application Form](#) and provide verification of income.

To learn more about OHAAP and its costs/eligibility, visit <https://odh.ohio.gov/know-our-programs/hearingaid-assistance/ohaap> or contact the OHAAP coordinator at 614-466-1995 or OHAAP@odh.ohio.gov.

Complex Medical Help (CMH) Program:

Your audiologist may recommend additional testing for your child. This can include: additional audiological evaluation, genetic testing, and a referral to medical specialists. With suspected hearing loss, your baby may qualify for financial assistance regardless of your insurance status.

To apply for this financial assistance or ask additional questions, please visit the [CMH Website](#) or call (800)755-4769.

Regardless of your income, you may also qualify to take part in a cost sharing program to reduce the costs of your medical expenses. Visit <https://odh.ohio.gov/know-our-programs/children-with-medical-handicaps/welcome-to> to learn more.

3

3 Months – 6 Months

Early Intervention Services



What is Part C Early Intervention?

Part C Early Intervention (EI) is a statewide program that provides coordinated early intervention services with a local EI team consisting of a service coordinator, service providers, and your family. Enrollment in EI before your baby is 6 months is recommended to ensure their speech, language, and social skills will reach their full potential. The first 55 hours of services (or equivalent of assistive technology) in a year are always provided at no cost to all families; if more than 55 hours are needed, costs/insurance coverage for the services will be discussed by your service coordinator.

Why is Early Intervention Important for Your Child?

EI provides supports and resources to assist parents and caregivers in enhancing children's learning and development through everyday routines. It is a collaborative, home, and community-based system where you and a team work together to provide ongoing support to your child.

EI also requires the creation of an Individualized Family Service Plan (details about this are in the section below). This document, which you only receive while enrolled in EI, will make the creation of an Individual Education Plan (IEP) a more seamless process when it comes time to enroll your child in preschool. The EI team will keep deadlines and processes flowing that otherwise, you may be responsible for as a parent.

Who is on an Early Intervention 'Team'?

People who you frequently interact with in EI will be referred to as your team. Some of these people may come and go or be with you and your family for your child's entire time in early intervention.

Service Coordinator: This person may be one of your first contacts within EI and be with you every step of the way. The service coordinator helps prepare your EI services, helps you develop your Individualized Family Service Plan (details below), ensures deadlines for service are met, and adds service providers to your team. Your service coordinator should routinely be checking in with you to gauge your family's experience in early intervention and answer questions you may have.

Service Provider: This person will be the individual meeting with you to demonstrate techniques and provide ideas and activities so you can help your child learn new skills. A service provider is a trained professional in the field of the goal they are helping you and your child to accomplish.

Hearing Service Provider: This person is specially trained to address issues related to childhood hearing loss. As a family with a child with hearing loss, you are eligible to receive specialized service from this qualified individual. Hearing service providers can help you explore communication options, set up language and learning rich environments at home, and more!

What is an Individualized Family Service Plan?

Your team works with you in your home or other place where you and your family spend time to develop a coordinated plan called an Individualized Family Service Plan (IFSP). An IFSP is a written plan that details the early intervention services that children and their families are eligible for. It will address the families' strengths, priorities, and concerns to identify support services that meet those needs.

To enroll your baby into early intervention services, complete this form: [EI Referral Form](#).

To know what to expect in an early intervention visit, see this handout: [EI Visit: What to Expect](#).

4 6 Months – 2 Years, 6 Months

Support Alongside Early Intervention Services



Your family and child are not alone in navigating through this journey. There are many systems of support offered throughout the state that are specific for children with hearing loss. EI services continue to provide your family ongoing support with assisting programs such as the Deaf Mentors Program and Snapshots Providers Program. Both programs aim to strengthen family support for children up to 3 years of age who are deaf or hard of hearing (D/HH).

Snapshots Providers Program:

The Snapshots Providers Program is available to families enrolled in Part C Early Intervention and is free of cost. Providers are trained through the SKI HI Institute at Utah State University and are experienced in working with families. The providers are D/HH adults who communicate using Listening and Spoken Language, ASL, and/or Cued Speech/ Cued English, and are involved in their local deaf community. The Snapshots Providers offer up to six visits to provide families to ask questions about deafness and to share their lived experiences as a D/HH.

To learn more, visit the [Deaf Mentor/Snapshot Program webpage](#).

To complete a referral form to enroll in the Deaf Mentors/Snapshots Program, fill out this survey: [Referral Registration Form](#).

Deaf Mentors Program:

The Deaf Mentor Program is available to families enrolled in Part C Early Intervention and is free of cost. Deaf mentors are trained through the SKI HI Institute at Utah State University and are experienced in working with families. The mentors are D/HH adults who are fluent in American Sign Language (ASL) and involved in their local deaf community. Together you and your mentor will plan and develop a language-rich environment for your child: ASL instruction, one year of ASL and Deaf History/Culture instruction, and introduction to local deaf communities.

To learn more, visit the [Deaf Mentor/Snapshot Program webpage](#).

Infant Hearing Program Parent Consultant:

The Ohio Department of Health's Infant Hearing Program has a parent of a child with hearing loss on staff titled the Parent Consultant. The Parent Consultant is available to provide parent-to-parent support – allowing you to ask questions, receive resources, or talk about the specifics of raising a child with hearing loss with someone who is on a similar parenting journey.

Infant Hearing Program Parent Consultant contact information:

InfantHearingProgram@odh.ohio.gov
(614)698-8233

Hands & Voices:

Hands & Voices is a network of parents, family members, and professionals with a strong commitment to the deaf and hard of hearing (D/HH) education community, supporting families like yours.

The Hands & Voices Program leads the Family Leadership in Language & Learning Center (FL3), which focuses their work into these three areas:

1. **Family Engagement “For Their Own Child”** - Language development tip sheets and milestones, family activity plan, and how to find Family to Family or D/HH Adult to Family Support Programs.
2. **Family Leadership “In the System”** - FL3 “office hours” are provided to talk about resources and strategies. Additionally, leadership tips, book clubs, and curriculum are established to empower family members in their involvement in their children’s journey.
3. **Family Support “For One Another”** - Family to Family or D/HH Adult to Family Support Program Guidelines and training are provided for families who wish to *offer* support in these programs. Also, a Parent Event Guide is given to aid families in hosting events to create a culture of support for families with children who have D/HH.

The Hands & Voices Program provides the listed resources and much more!

To learn more, visit <https://handsandvoices.org/fl3/>.

5 2 Years, 6 Months – 3 Years

Transition to Preschool



Individualized Family Service Plan to Individualized Education Plan:

As long as your child is enrolled in early intervention, an early intervention service coordinator will coordinate a transition planning conference for all children served in early intervention at least 90 days before their third birthday. During the Transition Planning Conference, your child’s strengths and educational needs will be discussed to create an Individualized Education Plan: A plan that outlines the goal for your child and the services that will be provided by your school.

To prepare for a Transition Planning Conference, some items to think about when looking at school options that are best for your child are outlined by the Hands & Voices organization: [H & V Communication Considerations](#).