Healthy People 2010 Operational Definition

28-11. Increase the proportion of newborns who are screened for hearing loss by age 1 month, have audiologic evaluation by age 3 months, and are enrolled in appropriate intervention services by age 6 months.

28-11b. Receipt of audiologic evaluation before age 3 months among infants with possible hearing loss.

National Data Source Early Hearing Detection and Intervention (EHDI)

Program, CDC, NCBDDD; Directors of Speech and Hearing Programs in State Health and Welfare

Agencies (DSHPSHWA).

State Data Source Jurisdictional Early Hearing Detection and

Intervention (EHDI) Program data

Healthy People 2000

Objective

Not applicable.

Changes since the

2000 Publication

Baseline (Year)

New subobjective (see Comments).

Measure Percent.

Target 70

Target-Setting Method 25 percent improvement.

For a discussion of target-setting methods, see Part

A, section 4.

56 (2001)

Numerator Number of newborns who did not pass a hearing

screening and received a comprehensive diagnostic

audiologic evaluation before 3 months of age.

Denominator Number of infants who did not pass a hearing

screening test before 3 months of age.

Population Targeted U.S. live births.

Questions Used To Obtain the National

Baseline Data

Not applicable.

Expected Periodicity Periodic.

Comments

Comprehensive diagnostic audiologic evaluation includes physiologic measures and developmentally appropriate behavioral techniques.

Objective 28-11 moved from developmental to measurable during the Healthy People 2010 Midcourse Review. Three subobjectives were created, focusing on the three age categories addressed in the original objective. Objective 28-11a focuses on newborns screened for hearing loss before age 1 month; 28-11b addresses infants not passing the hearing screening who receive an audiologic evaluation before age 3 months; and 28-11c focuses on infants with confirmed hearing loss who are enrolled in intervention services before age 6 months.

Data related to the provisions of hearing screening and follow-up (e.g., diagnostic and intervention) services are collected annually from jurisdictional EHDI Programs. These data were first collected by the Directors of Speech and Hearing Programs in State Health and Welfare Agencies (1999-2004) and are currently collected by the CDC (2005-2007).

In 2005, the CDC began working directly with the jurisdictions to acquire annual data through a new survey tool, called the Hearing Screening and Follow-up Survey (HSFS). This survey requested more complete data and included more specific data definitions, which is why some of the rates in 2005, 2006 and 2007 are lower and are not comparable with the data reported in previous years.

The number of States providing data varied among the subobjectives, with fewer States reporting on audiologic evaluation (28-11b) and intervention services (28-11c) than on hearing screening (28-11a). Participation in the survey has increased from 22 States providing data for year 2000 to 46 States, 3 territories, and the District of Columbia for year 2007. Over time, more jurisdictions are expected to provide data for the annual survey.

See Appendix A for focus area contact information.