

EHDI Diagnostic Quality Assurance Report

unknown

Report Period: 01/01/2017 - 12/31/2017

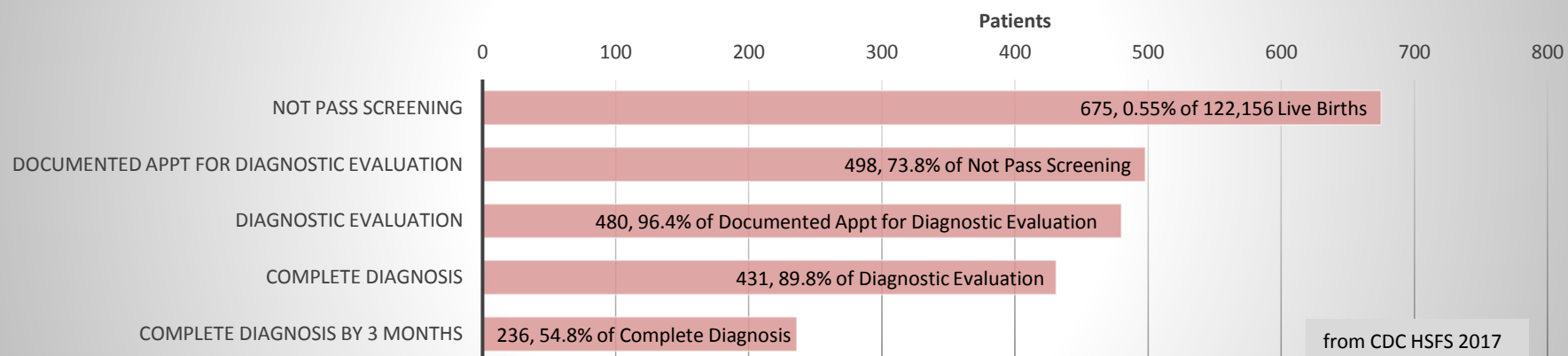
To ensure each child has their best chance for language development free from hearing loss, the NC EHDI program strives to meet the national goals of universal hearing screening by 1 month, diagnosis by 3 months and intervention by 6 months of age.

One key role Audiologists play is the diagnostic evaluation of infants not passing newborn hearing screening. This report presents a snapshot of how successful we are being state-wide and by individual audiology practice.

This report's data covers babies born in the reporting period who need diagnostic evaluation because they did not pass newborn screening, specifically, they were screened but do not have a screen in which both ears passed (counting both initial screen and rescreen, if any). It includes both NICU and well-baby births. To measure success we've excluded babies born in the time period when we did not have the opportunity to diagnose because they're deceased, the family declined, the family is non-resident, moved out of state, medical reason or are in-process (rare).

State Wide

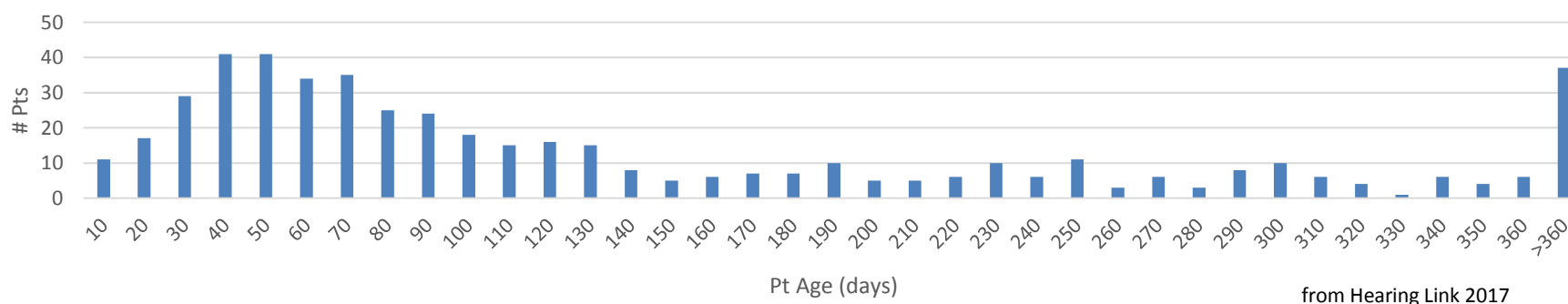
State Wide



Over one-third of the babies who are referred for Audiologic evaluation from newborn hearing screening do not receive it. Over one-quarter never see an Audiologist.

Only about half of patients receiving a complete audiologic evaluation do so within 3 months meeting the national goal.

Distribution of Pt Age at Diagnosis



Your Primary Practice Area

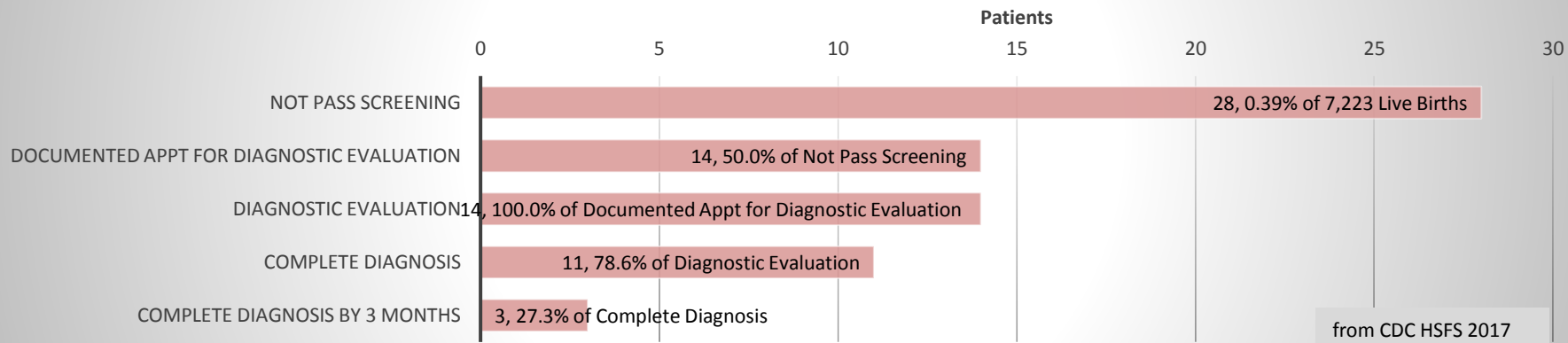
To see the situation in your practice area, this report defines your Primary Practice Area as the counties (up to 20) where the most of your patients live according to addresses in Hearing Link. These are the counties making up your Primary Practice Area:

Robeson, Cumberland

Your Primary Practice Area (cont'd)

The following shows the success patients in your Primary Practice Area have had receiving hearing diagnosis within 3 months (whether the diagnosis is done at your facility or elsewhere).

unknown Primary Practice Area



Like state wide, a significant fraction of babies not passing newborn screening are not seen by an audiologist.

And about half of patients receiving a complete diagnosis do so within 3 months meeting the national goal.

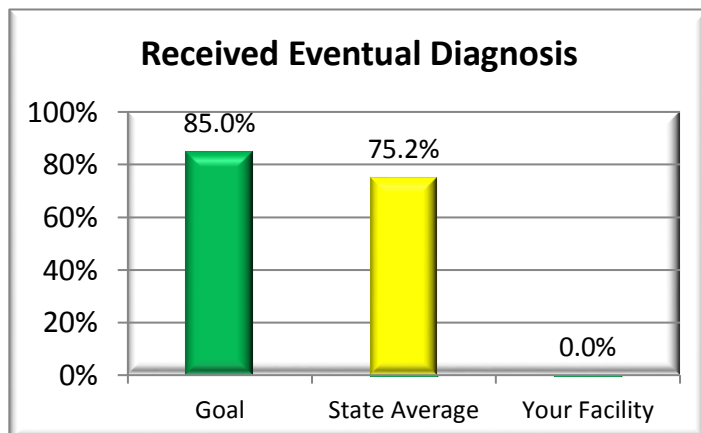
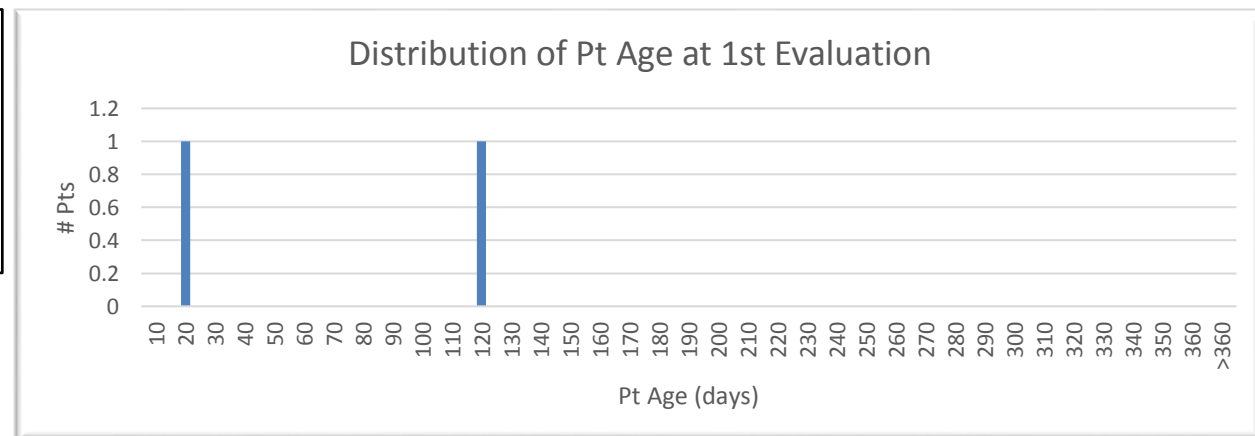
Your Practice

Now we look specifically at your practice.

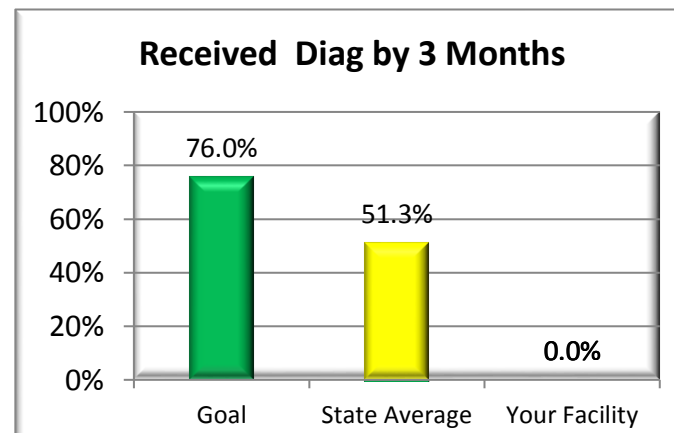
Though you do diagnostic evaluations on many patients at many stages in their diagnosis and treatment, you have the best opportunity to influence the timing of diagnosis with patients who come to you for their first audiology evaluation.

The following section describes your success with this group of patients, which we are calling "1st Diagnostic Pts". All data in this section is from Hearing Link.

1st Diagnostic pts	2
Diagnosis	0
Normal Hearing	0
Confirmed Loss	0
Diagnosis in 3 mos	0
No Diagnosis - LTF	2 100.0%

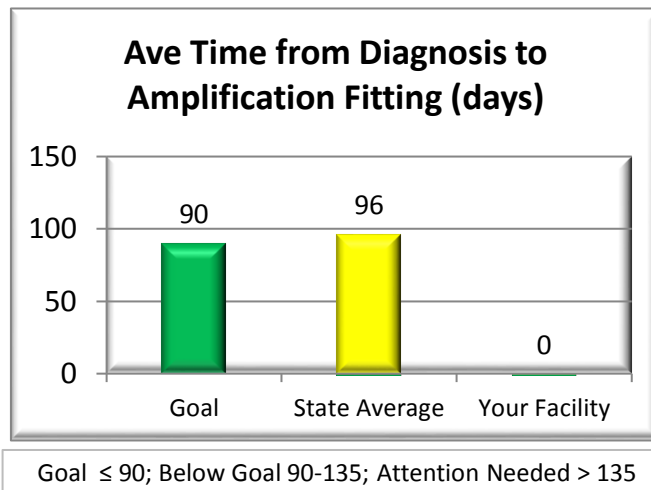


Goal >85%; Below Goal 75-85%; Attention Needed <75%



Goal 76-100%; Below Goal 50-76%; Attention Needed < 50%

Your Practice (cont'd)



This graph counts all patients for whom you did the Complete EHDl diagnostic evaluation. For the subset of those who received amplification (from you or others), it calculates the number of days from the diagnosis to the amplification fitting. The average of that time over these patients is shown in the graph, compared to State Average and Goal. Zero indicates no patients in this category received amplification in this time period.

Two procedural choices that we believe influence your success in meeting the national goal of diagnosis by 3 months, are Number of Appointments used to obtain diagnosis and Reporting Results in Hearing Link.

The Number of Appointments to reach diagnosis is important because something like half of patients drop out of the process with each additional appointment required. Additional appointments also stretch out the time to diagnosis.

Reporting Results in Hearing Link is important because prompt reporting activates patient followup by the regional EHDl consultants. They help bring the patients back in to complete diagnosis.

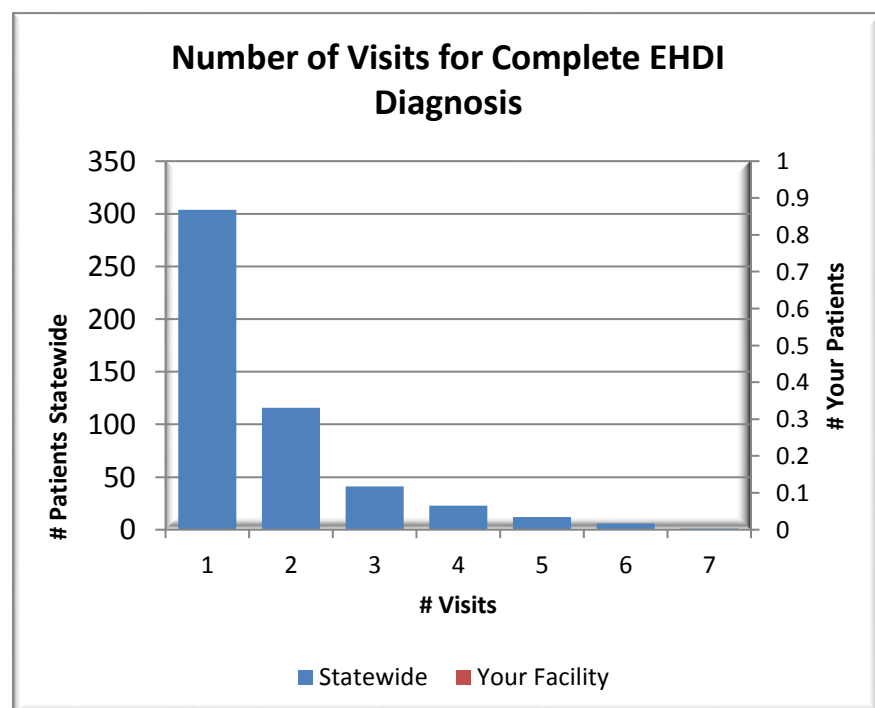
The following two metrics show how your practice is doing in these areas. All data in this section is from Hearing Link.

Results Reported Within 5 Days (In compliance with 15A NCAC 21F.1204)

Within 5 days for half or more	Within 5 days for less than half
unknown Unknown (3)	

Interpretation: Audiologists on the left enter their results into hearing link within 5 days at least 50% of the time. Those on the right do so less than half the time. The number in parentheses is the number of diagnostics done by that audiologist.

Number of Appts Required



Interpretation: The wide blue bars show the state wide distribution (left axis). The narrow red bars show your facility's distribution (right axis). Comparing the shapes of the two distributions reveals if you are using more or fewer appointments to arrive at a diagnosis than average.

Date data pulled from Hearing Link: 11/12/2018
Date Report Printed: 12/5/2018