



# **Making the Switch: Improving Diagnostic Reporting to EHDI by Audiologists**

**Mallory Minter, MA**

Ohio Department of Health



# Agenda

- Explore the rationale and steps for electronic reporting of audiology diagnostic test results.
- Describe the phases used to move from paper diagnostic reporting to statewide electronic reporting.
- Discuss the importance of quality assurance.

# Infant Hearing Program Overview



# Ohio's EHDI System

- 129 birthing facilities
- 138,000-140,000 births per year
- 4,000 babies refer
- 204 diagnostic audiologists
- Estimated 275 diagnostic evaluations conducted monthly
- Estimated 35 babies diagnosed with hearing loss monthly



# Move to Electronic Reporting

- Streamline EHDI reporting
- Reduce possibility of errors (data entry, mail, fax, etc.)
- Reduce time between diagnosis and referral for Early Intervention services
- Reduce printing costs
- COACH Protocols




# Reporting is Mandatory

Ohio Administrative Code 3701-40-08:

- Any audiologist that conducts a hearing evaluation of a newborn or infant referred to such provider shall report the diagnostic hearing evaluation results to the director, **in the manner and format prescribed by the director**, upon confirmation of the infant's hearing status.

# Hearing Evaluation Submission Form

### Hearing Evaluation Submission Form



**Child Demographics**

Patient ID:  Birth Date:  Birth Facility:

Name-Last:  Time: :  Gest. Age:  ICU Days:

First:  Birth Order:  Gender:

Middle:  Alt. ID:  Physician:

**Contact Info**

Last:  First:  Birth Date:

Phone:  Zip Code:   Birth Mother

**Visit Details**

Audiologist:  State HT Code:  Dx Facility:

Test Date:  Test Stage:  Note:

- ▶ Hearing Disposition
- ▶ DxABR
- ▶ OAE
- ▶ Tympanometry
- ▶ Behavioral
- ▶ Screening

Data Entry by:

← Diagnostic Tests

# Getting Started

- Developed electronic training materials
  - Guidance document
  - Web-based tutorial
- Pilot with 11 diagnostic audiologists
  - Children's Hospitals, Speech and Hearing Clinics
- Provided trainings to audiologists
  - Username and password



# Training Schedule

- Divided the audiologists into 3 facility groups
  - Group 1: Facilities that have more than 10 audiologists
  - Group 2: Facilities that have between 5 to 9 audiologists
  - Group 3: Facilities that have less than 5 audiologists
- Identified a point person in each facility
- Transitioned reporting in 12 months

# Quality Assurance Reports

- Quarterly quality indicator reports
  - Specific to each audiologists
  - Breakdown of results submitted in Hi\*Track for previous 3 months
- Undetermined results
  - Trends of results by audiologists
- Unconfirmed results
  - Assess baseline and trends of unconfirmed losses

# Benefits of Electronic Reporting

- More detailed diagnostic information about types of tests performed and hearing status
  - Monitoring of test battery – COACH Protocols
  - Coalition of Ohio Audiologists and Children’s Hospitals
- Results are available to EHDI staff following the electronic submission
- Notes from audiologists about no show appointments and upcoming appointments

# Questions

# Contact Information

Mallory Minter, EHDI Researcher

Ohio Department of Health

(614) 466-1471

Mallory.Minter@odh.ohio.gov

Sheryl Silver, EHDI Audiologist

Ohio Department of Health

(614) 728-4676

Sheryl.Silver@odh.ohio.gov

Allyson Van Horn, EHDI Coordinator

Ohio Department of Health

(614) 728-6785

Allyson.VanHorn@odh.ohio.gov

# Ohio EHDI Presentations

- Outcomes from COACHing: Implementation of a Statewide Audiologic Protocol
- Integrating Ohio Early Hearing Detection and Intervention (EHDI) with State-Level Data Systems to Assess Longitudinal Outcomes for Children who are Deaf or Hard of Hearing