



Part C Service Coordinator's / Service Provider's Checklist; Supporting Families of Young Children Who are Deaf or Hard of Hearing, Revised September 2021

This checklist was created in collaboration with members of the MN Regional EHDI Teams, families of young children with hearing differences, early childhood education professionals, and representatives of Minnesota agencies that serve individuals who are Deaf or Hard of Hearing. It is offered as a supplement to resources and materials provided by the MN Department of Education for service providers of all young children and their families who are receiving early intervention services. This checklist includes information resources to be discussed with, and provided to, families of young children who are Deaf or Hard of Hearing as they begin to receive MN Part C Infant and Toddler Intervention Services or Part B Preschool Special Education Services. Service Coordinators and other service providers are encouraged to use this checklist as a record of information shared with staff and families, and to record the dates on which these topics were discussed, and any actions taken.

Contact Information

Child's Name:

Birthdate:

Parent(s)/Caregiver(s):

Service Coordinator/Primary Service Provider:

Resident School District:

Intake/Initial Evaluation Process

Dates Discussed, Actions Taken:

1. A Teacher for Children who are Deaf or Hard-of-Hearing, an Educational Audiologist, and other highly qualified professional(s) with specific training and expertise in serving young children who have hearing differences are members of the child's evaluation/early intervention team and have been involved early in the intake process.
 - a. A helpful resource for teams from the MN Department of Education and MN Low Incidence Projects: [Part C Intervention Services for Infants and Toddlers \(Birth to Age 3\) with Sensory Loss: Recommended Collaborative Practices](#) - 12/23/20.

Recommended collaborative practices when providing early intervention services for infants and toddlers with sensory loss, including those who are Blind/Visually Impaired, Deaf/Hard of Hearing, or DeafBlind.



Family Needs

Dates Discussed, Actions Taken:

1. A spoken language interpreter, cultural liaison, or sign language interpreter is provided as needed to facilitate communication with the family during the intake, evaluation, and IFSP processes, and to support the provision of Early Intervention Services.
2. The family's primary needs are met. The child and family have adequate food, shelter, clothing, heat, etc. Educational teams collaborate with interagency partners, such as Local Public Health Nurses and County Social Services, as needed to assure that the family's needs are met. Teams refer to appropriate resource organizations as needed.

Medical and Audiological Care

Dates Discussed, Actions Taken:

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.
 - a. Primary Health Care Provider's name:
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 to obtain more detailed hearing results and to monitor for possible progressive hearing loss;
 - e. Fitting/purchase of quality hearing aids or other hearing technology appropriate for the child, if chosen by the family;
 - f. Hearing aid follow-up checks/repair/replacement and new earmolds as needed;
(Note: New earmolds may be needed every 1-2 months for children younger than 1 year of age and every 3 to 4 months for children 2 to 3 years of age).
4. The Primary Health Care Provider has discussed with the family any additional medical referrals for care related to co-occurring condition(s). Needed medical referrals have been made by the PCP.
5. The Primary Health Care Provider has discussed with the family additional medical referrals to clinical audiology, ENT, and Ophthalmology; to Genetics specialists as appropriate for the child.
 - a. An Otolaryngology (ENT) evaluation was discussed? Evaluation completed?



- b. A Clinical Audiology evaluation was discussed? Evaluation completed?
 - c. An Ophthalmology evaluation was discussed? Evaluation completed?
 - d. *A Genetics evaluation was discussed? Evaluation completed? (**Note: There are personal and cultural considerations unique to each family regarding a possible genetics evaluation. Not every family will desire, be referred for, or receive a genetics evaluation.*)
 - e. Other?
6. A diagnostic hearing evaluation has been completed, indicating that the child has a hearing loss in one or both ears.
- a. Date of confirmation of hearing loss:
 - b. Clinical Audiologist's name and contact information:
7. A written report from the clinical audiologist has been received by the parents and the local school district ECSE Part C or Part B Preschool intake and evaluation team.

Hearing Technology

Dates Discussed, Actions Taken:

1. Has the use of hearing technology (e.g. hearing aids, cochlear implants, bone conduction devices) 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 for their child, has an initial fitting of hearing technology been completed by the clinical audiologist?
 - a. Date of initial hearing technology fitting:
 - b. *Note: The clinical audiologist may connect with the [University of Minnesota Lions Infant Hearing Device Loaner Program](https://hearbank.web.health.state.mn.us/home.xhtml) (<https://hearbank.web.health.state.mn.us/home.xhtml>) as needed to assist the family in acquiring initial hearing technology for their child.*
4. The family has received information and resources for how to help their child wear their hearing aid, cochlear implant(s), or other hearing assistive technology.
5. The family has received a hearing aid or cochlear implant monitoring kit and monitoring instructions. Safety precautions have been discussed with the family, including precautions to prevent a child from swallowing a hearing aid battery.
6. The child's hearing technology has been insured against loss/damage.



Communication and Connections

Dates Discussed, Actions Taken:

1. The family has met with a Teacher for Children who are Deaf or Hard of Hearing and/or other highly qualified providers with expertise in supporting the unique language and learning needs of infants, toddlers and preschoolers who have hearing differences.
2. The family has been provided with unbiased, accurate information about all communication opportunities for children with hearing differences, along with quality online and print resources for additional information.
 - a. A helpful information resource for teams and families from the MN Low Incidence Projects: [Early Hearing Detection and Intervention; Exploring Communication Opportunities](https://www.mnlowincidenceprojects.org/Projects/ehdi/ehdiCommunicationOpp.html).
(<https://www.mnlowincidenceprojects.org/Projects/ehdi/ehdiCommunicationOpp.html>)
3. Professionals with specific background and expertise in the family's communication area(s) of interest, language(s) and modality choice(s) are available to meet with the family and share information.
4. The family has received information about family-to-family [services and supports](https://www.mnhandsandvoices.org/about-us/our-services) (<https://www.mnhandsandvoices.org/about-us/our-services>) available through [Minnesota Hands & Voices, A program of Lutheran Social Service of Minnesota](http://www.mnhandsandvoices.org/) (<http://www.mnhandsandvoices.org/>). Assistance with contacting a MN Hands & Voices Parent Guide has been provided as needed.
5. The family has received a call or message from a MN Hands & Voices Parent Guide. *(Note: Under a contract with the MN Department of Health EHDI Follow-up Program, MN Hands & Voices Parent Guides make introductory calls to all MN families of young children newly identified with a hearing difference.)*
6. The family has received information about additional [Deaf & Hard of Hearing--Family Services, Lutheran Social Services of MN](https://www.lssmn.org/services/families/deaf-hard-of-hearing) (<https://www.lssmn.org/services/families/deaf-hard-of-hearing>). Assistance with connecting families to additional supports and services has been provided as needed. Support opportunities include:
 - a. [MN Hands & Voices-Deaf and Hard of Hearing Guide Program](https://www.mnhandsandvoices.org/about-us/deaf-and-hard-hearing-guide-program).
(<https://www.mnhandsandvoices.org/about-us/deaf-and-hard-hearing-guide-program>) DHH Guides are adult role models who represent a variety of lived experiences and communication modalities. They attend and assist with family events, provide information and learning opportunities for children and families.
 - b. [Deaf Mentor Family Program](https://www.lssmn.org/services/families/deaf-hard-of-hearing/mentor-program), (<https://www.lssmn.org/services/families/deaf-hard-of-hearing/mentor-program>) Deaf Mentors help families learn about Deaf culture and American Sign Language (ASL).
7. The family has been provided opportunities to meet with other families of young children who are Deaf or Hard of Hearing in the community.



8. The family has been provided opportunities to meet with adults who are Deaf or Hard of Hearing in their community, through the MN Hands & Voices Deaf and Hard of Hearing Guide Program, and/or through the Deaf Mentor Family Program.

Initial EHDl Information Resources Provided to Families

Dates Discussed, Actions Taken:

1. The family has received information about state and national resources and family-to-family supports, including those listed in the *Helpful Websites* section of this checklist, and those included in the NCHAM resource, [“Just in Time; Resources to Support Families of Children who are Deaf or Hard of Hearing”](https://www.infanthearing.org/just-in-time/index.html) (<https://www.infanthearing.org/just-in-time/index.html>).
 - a. [“Just in Time”\(pdf\)](https://www.infanthearing.org/just-in-time/docs/just-in-time-color.pdf) [handout](https://www.infanthearing.org/just-in-time/docs/just-in-time-color.pdf) (<https://www.infanthearing.org/just-in-time/docs/just-in-time-color.pdf>)
2. The family has received the MN 2020 version of the book *Understanding Your Child’s Hearing Loss—A Guide for Parents* from their child’s clinical audiologist at the time of confirmation of hearing loss. (Currently available printed in English only.) Families have opportunities to review and discuss the book with their educational service provider(s).
 - a. This MN resource is provided at no cost to MN families by the MN Department of Health EHDl Program through clinical audiologists. With permission from the authors and the organization [North Carolina Beginnings for Parents of Children Who Are Deaf or Hard of Hearing, Inc.](http://ncbegin.org/) (<http://ncbegin.org/>), the MN-edited version of *Understanding Your Child’s Hearing Loss* includes information and links specific to MN programs and services for young children with hearing differences and their families.
 - b. Members of the statewide MN Regional EHDl Teams have access to copies of the 2020 MN-edited version of “the Beginnings Book”.
 - c. The North Carolina Beginnings organization’s 2019 book *Understanding Your Child’s Hearing Loss—A Guide for Parents* is currently available for purchase in English and Spanish through [Beginnings for Parents of Children Who Are Deaf or Hard of Hearing, Inc./shop](http://ncbegin.org/shop/) (<http://ncbegin.org/shop/>)
3. The family has received the following two information resources by mail from the MN Department of Health EHDl Program following confirmation of their child’s hearing loss. Families have opportunities to review and discuss these resources with their educational service provider(s).
 - a. The *Parent Roadmap*, available in [English](#), [Hmong](#), [Somali](#), and [Spanish](#). (<http://improveehdi.org/MN/library/files/roadmapenglish.pdf>)
 - b. *What You Need to Know; Resources for Families*, a 3-ring binder organizer of initial EHDl information resources. It is currently available printed in English.



- c. **Note:** A content list of the information resources included in the “*What You Need to Know*” binder organizer is available on the [MN Department of Health Improve EHDI](http://www.improveehdi.org/mn/) website (<http://www.improveehdi.org/mn/>) under Resources to Share with Families, [EHDI Parent Resource Binder](https://www.health.state.mn.us/docs/people/childreneyouth/cyshn/ehdibinder.pdf). (<https://www.health.state.mn.us/docs/people/childreneyouth/cyshn/ehdibinder.pdf>)
4. The family may also receive a folder of information provided by MN Hands & Voices. Information resources that may be shared with families by MN Hands and Voices include the following. Families have opportunities to review and discuss these resources with their educational service provider(s).
 - a. [“The Book of Choice—Support for Parenting a Child who is Deaf or Hard of Hearing”](http://www.handsandvoices.org/resources/products.htm), published by Hands and Voices. Currently available in English and Spanish. (<http://www.handsandvoices.org/resources/products.htm>)
 - b. [The Hands & Voices Fostering Joy Reflective Journal](https://handsandvoices.org/resources/products.htm) (<https://handsandvoices.org/resources/products.htm>)
 - c. [“Pathways to Language and Communication”](http://ncbegin.org/product/pathways-to-language-and-communication/) DVD, produced by N. Carolina Beginnings for Children Who Are Deaf or Hard of Hearing. (<http://ncbegin.org/product/pathways-to-language-and-communication/>)

Helpful Websites for Families of Young Children Who are Deaf or Hard of Hearing

- [Beginnings for Parents of Children Who are Deaf or Hard of Hearing](https://ncbegin.org/) (<https://ncbegin.org/>)
- [Communicate With Your Child](http://communicatewithyourchild.org/index.html) (<http://communicatewithyourchild.org/index.html>), National Center for Hearing Assessment and Management (NCHAM)
- [Hands & Voices \(national\)](http://www.handsandvoices.org/) (<http://www.handsandvoices.org/>)
- [Minnesota Hands & Voices](https://www.mnhandsandvoices.org/) (<https://www.mnhandsandvoices.org/>)
- [Hearing Loss in Children](http://www.cdc.gov/ncbddd/hearingloss/index.html) (<http://www.cdc.gov/ncbddd/hearingloss/index.html>), Centers for Disease Control
- [Help Me Grow Minnesota](http://helpmegrowmn.org/HMG/index.htm) (<http://helpmegrowmn.org/HMG/index.htm>)
- [Improve EHDI MN](http://www.improveehdi.org/mn/) (<http://www.improveehdi.org/mn/>), Minnesota Department of Health—Early Hearing Detection and Intervention (EHDI) Program
- [Just in Time; Resources to Support Families of Children who are Deaf or Hard of Hearing](https://www.infanthearing.org/just-in-time/index.html) (<https://www.infanthearing.org/just-in-time/index.html>), National Center for Hearing Assessment and Management (NCHAM)
- [My Baby’s Hearing](http://www.babyhearing.org) (<http://www.babyhearing.org>), Boys Town National Research Hospital
- [PACER Center](https://www.pacer.org/) (<https://www.pacer.org/>)



Contact for more information

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