

Early Intervention Checklist for Professionals Who Serve Infants, Toddlers, and Young Children with Deafness or Hearing Loss

Deafness or hearing loss from birth, even if it is mild or in one ear, can have a significant impact on the early acquisition of communication, speech, language, listening skills, cognitive and social-emotional development and later academic achievement. The Joint Committee on Infant Hearing (JCIH) provides comprehensive guidelines for early hearing detection and intervention (EHDI) programs on establishing strong early intervention (EI) systems with appropriate expertise to meet the needs of children who are deaf or hard of hearing (D/HH). The Early Intervention team must focus on promoting the development of language and communication using the option the family prefers. This checklist takes into account many of the recommendations from the **Supplement to the JCIH 2007 Position Statement: Principles and Guidelines for Early Intervention After Confirmation That a Child Is Deaf or Hard of Hearing**. Please review the following checklist for each child you serve who has any degree of hearing loss.

1. **Getting Started: Resources for Parents and Families of Infants and Young Children with Hearing Loss:** The family has access to [Getting Started](#).
 - Yes
 - No
2. **Universal Newborn Hearing Screening:** Have you inquired about the child's results and recorded them in PELICAN?
 - Yes
 - No
3. **Authorization to Release Information:** Have you requested that the family provide permission for you to share information about the child's eligibility for Early Intervention by signing the Authorization to Release Information form? *Please consider requesting that the family authorize Early Intervention to share information with the Department of Health and Family Connections for Language and Learning to receive information from and direct contact with another trained parent of a child with hearing loss.*
 - Yes
 - No, please complete the [BEISFS Authorization to Release Information for Children with Hearing Concerns form](#) with the child's family.
4. **Medical Assistance:**
 - The family is aware their child may be eligible for [Medical Assistance](#).
 - The family has applied for [Medical Assistance](#) for their child.
 - The child is approved for [Medical Assistance](#).
 - I need to provide the family with additional information about applying for [Medical Assistance](#) by sharing the [MA Talking Points](#).
5. **Communication Options:** The family has been provided with unbiased information about all communication options. Information on all communication strategies can be found in the [Getting Started document](#).
 - American Sign Language (ASL)
 - Total Communication (TC)
 - Cued Speech (CS)
 - Listening and Spoken language (L&SL, formerly auditory-oral or auditory verbal)
 - ASL/English Bilingual approach to language

Early Intervention Checklist for Professionals Who Serve Infants, Toddlers, and Young Children with Deafness or Hearing Loss

6. **Early Intervention Communication Plan:** The [EI Communication Plan](#) is an optional tool that identifies considerations that should be addressed during the planning process. The team may choose to use this tool as an aid to the team discussion and embed the communication plan components into the IFSP/IEP; or the team may select to complete the EI Communication Plan and append it to the printed IFSP/IEP. Did you explain both options to the parents/caregivers?
- Yes
 No
7. **Expertise in Hearing Loss:** Is the family receiving Early Intervention services from professionals who have expertise in hearing loss, such as an educator of the deaf, speech-language pathologist, or hearing therapist?
- Yes
 No
8. **Family Connections for Language and Learning, (717) 580-0839:** Have you offered one-to-one family support services and opportunities for contact with other parents of children with deafness or hearing loss and adults who are deaf or hard of hearing through Family Connections?
- Yes
 No
 I need to provide information to the family about Family Connections.
9. **Fluent Adult Language Role Models and Language Peers, (717) 580-0839:** Does the family have access to a fluent adult language model and to language peers of the child in the primary or chosen language and communication mode of the child/family?
- Yes
 No
 Offer family a Deaf/Hard of Hearing Mentor through Family Connections, (717) 580-0839, agaspich@pattan.net
10. **Parent to Parent of PA, (888) 727-2706:** Have you offered support through [Parent to Parent of PA](#) for a peer mentor match for disabilities or special needs in addition to hearing loss?
- Yes
 No
 I need to provide the family with information about Parent to Parent of PA.
11. **PA Office for the Deaf & Hard of Hearing (ODHH):** Have you provided information about [ODDH services](#) for Pennsylvanians, who are deaf, hard-of-hearing or Deaf-Blind, and their families and caregivers?
- Yes
 No
 I need to provide the family with information about [ODHH](#).
12. **Variety of Factors Regarding the Design of Early Intervention Services:** Has the child's team considered a variety of factors regarding the design of Early Intervention services including, but not limited to:
- Family choice of communication method
 Additional disabilities
 Assistive technology, including hearing aid (HA) monitoring, FM systems and cochlear implant (CI) monitoring

Early Intervention Checklist for Professionals Who Serve Infants, Toddlers, and Young Children with Deafness or Hearing Loss

13. **Appropriate Services:** Is the child and family being provided services such as:

- Audiology assessment
- Speech and language assessments in the language you use with your child
- Developmental evaluation designed for children who are deaf/hard of hearing, as well as for hearing children, preferably administered by a professional who is knowledgeable in evaluating a child with a hearing loss
- Appropriate intervention/instruction
- Communication access using the language and communication option chosen by the family
- Family training in the chosen language and/or communication option
- Provision and maintenance of assistive devices
- Referral to community, regional, state and national resources for parents of children who are deaf or hard of hearing such as [Family Connections for Language and Learning](#), [AG Bell](#), [American Society for Deaf Children](#), [Hands & Voices](#)

14. **Additional Information:** Does the family need additional information about:

- The ear and hearing
- Causes of hearing loss
- Understanding the audiogram
- Use, care, and maintenance of a hearing aid/cochlear implant/other assistive technology (including Ling 6 Sound Test/Listening check)
- Audiology services
- Other: [Click or tap here to enter text.](#)