

General Health Appraisal

Hearing Screening

A. Regulations

OAR 581-022-2220

Health Services (excerpted)

- (1) The school district shall maintain a prevention-oriented health services program for all students that provides:
 - (f) Vision and hearing screening.

B. Overview

In order to be successful, especially academically and socially, children must learn how to communicate with others. The most significant effect of a hearing loss is the creation of a speech and language barrier that interferes with communication. The U.S. Department of Education reports that, during the 2003-04 school year, 71,903 students aged 6 to 21 (or 1.2% of all students with disabilities) received special education services under the category of hearing impairment. However, the number of students with hearing loss and deafness is undoubtedly higher, since many of these students may have other disabilities as well and may be served under other categories.

C. Background/Rationale

Hearing screenings promote identification of hearing deficiencies in order to provide early intervention to prevent or minimize effects on educational progress. Hearing impairments can occur at any age and their effects can be subtle, making school an ideal site for screening programs. Without hearing screening programs, hearing losses may go undetected in students and consequently potentially impede academic success while also possibly creating speech and language delays, social and emotional problems, and additionally impacting general physical well-being and safety. The Individuals with Disabilities Education Act (IDEA) requires states to identify children from 3 to 21 years of age with disabilities, including hearing loss.

D. Guidance

Roles and Responsibilities

Reference the “Guidance” section of the “General Health Appraisal” chapter for commentary about the inclusion of the constituent domains of the coordinated school health program. It is important to provide appropriate health education for students and families about routine hearing examinations and associated health maintenance, hearing safety, the hearing screening process, and referral criteria. Likewise, it is important to involve pertinent community persons to assist in defining the screening population when resources do not allow all at-risk students to be routinely screened and to help in identifying resources for students needing medical referral. Ideally, hearing screening of preschool and school-age children should be done annually.

Procedures

1. Hearing screening shall be offered annually for all students in as many of the following categories as resources allow, starting with:
 - First entry into school.
 - Every year from pre-kindergarten through 3rd grade.
 - 7th and 11th grades.
 - Upon entrance into special education.
 - Upon grade repetition.
 - Parent or school staff referrals.
 - School-age children who already receive **regular** audiologic management need not participate in a screening program.

The frequency of screenings and the participating population should be determined in consultation with appropriate local health care providers.
2. Hearing screening programs should be conducted under the direction of a licensed audiologist, a speech language pathologist, or the school nurse. The supervising professional has the responsibility for training and monitoring screening activities.
 - An individual pure tone screening is recommended. (See Hearing Screening Appendix III, “Flow Chart of Recommended Procedures for

Identification, Audiometry Program in the Schools,” for recommended frequencies and screening levels.)

- Conventional audiometry where students are instructed to raise their hand (or point to the appropriate ear) when they hear a tone is the commonly used procedure.
3. Proper handling of machines, daily equipment check, and yearly calibration should be the standard to assure accurate screening.
 4. Parents should be informed of hearing screenings to have the option to decline the service. Communication mechanisms include a parent notice in a school publication, hand-carried notes to parents, or as part of the student handbook (see the sample form in Hearing Screening Appendix I).
 5. Students should be informed of rationale and process to afford informed assent. Students shall not be screened against their will.
 6. The school must provide adequate time, student supervision, and environmental space to ensure appropriate assessment and individual privacy. Screenings should be in the quietest area of the building. (It is best to avoid hallways, gymnasiums, cafeterias, or areas adjacent to playgrounds and continuous noise, such as running motors and blowers, etc.)
 7. Students failing to respond to one or more frequencies in either ear should be re-instructed, have the earphones repositioned, and re-screened. Re-screening may occur in the same session, on the same day, or within two weeks of screening. When the student fails after re-instruction and re-screening, s/he should be referred to an audiologist for evaluation.
 - Students failing the follow-up audiological testing must be referred to appropriate medical and/or further audiological evaluation to occur within four to six weeks.
 - Follow-up should occur within one month and no longer than three months to ensure students’ medical, educational, and rehabilitative needs are met.
 8. Results of all screenings and testing should be shared with parents or guardians.
 9. For students identified as hearing disabled, the speech-language pathologist, audiologist, or school nurse should work with the classroom teacher(s) to implement necessary adjustments (such as seating location) to maximize learning.

10. Documentation should reflect screening and testing results and parent or student declines.
11. Documentation should be filed according to guidelines in the section “Health Information and School Records.”

Staff Development Needed

- Establish policies and procedures about screenings to be offered.
- Provide training for staff about symptoms suggestive of hearing problems and actions to take for referral to the school’s nurse and parent.

References

- U.S. Department of Education www.ed.gov 
- U.S. Department of Education
Institute of Education Sciences National Center
for Special Education Research
*“The Secondary School Experiences and Academic Performance of Students
With Hearing Impairments”*
<http://ies.ed.gov/ncser/pubs/20113003/pdf/20113003.pdf> 
- U.S. Department of Education
Office of Civil Rights
“Deaf Students Education Services”
<http://www2.ed.gov/about/offices/list/ocr/docs/hq9806.html> 

E. Oregon Resources

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- Oregon Department of Education: www.ode.state.or.us 
- Deaf and Hard of Hearing Services [State of Oregon: Oregon's Deaf and Hard of Hearing Services](#) 

F. National Resources

American Society for Deaf Children
P.O. Box 3355
Gettysburg, PA 17325
1-800-942-2732 (Voice/TTY); (717) 334-7922 (T/TTY)
E-mail: asdc1@aol.com 
Web: www.deafchildren.org 

American Speech-Language Hearing Association (ASHA)
10801 Rockville Pike
Rockville, MD 20852
(301) 897-5700 (Voice/TTY); 1-800-638-8255 (Helpline)
Web: www.asha.org 

Laurent Clerc National Deaf Education Center and Clearinghouse
KDES PAS-6, Gallaudet University
800 Florida Avenue NE
Washington, DC 20002-3695
(202) 651-5051 (Voice); (202) 651-5052 (TTY)
E-mail: Clearinghouse.Infotogo@gallaudet.edu
Web: [Clerc Center](#) 

National Institute on Deafness and Other Communication Disorders
P.O. Box 1492
Washington, DC 20013
1-800-695-0285
E-mail: nichcy@aed.org
Web: www.nichcy.org


General Health Appraisal - Hearing Screening Appendix I

Template for Parent Information Letter

Hearing screening for all 8th grade students will be held on **(insert day and date)**.

You will be notified of the results of the screening by mail if your child needs further assessment by a specialist. Otherwise, your child will hand carry his/her report home. Expect results within 2-3 weeks after the screening.

Only 8th graders will be screened on that day. However, should you have concerns regarding your 6th or 7th grade child's hearing please feel free to call me. I would be happy to screen your child at any time upon request.

(Signature) , School Nurse
(Phone Number)
(Email Address)

General Health Appraisal - Hearing Screening Appendix II

Letter to Parents on Hearing Screening Results

To Parent/Guardian:

(Student Name) _____ Grade: _____

had a hearing screening on **(date)** _____ at _____ school.

Hearing screening results:

- Your child passed the screening.** You may disregard the rest of this form.
- Your child did not pass the screening.** (Colds, ear infections, earwax, and allergies may cause a temporary hearing problem.)
- We were unable to obtain results today.** The audiologist or audiology assistant will try to obtain results when re-testing is done later at school.

Follow-up testing will generally be done at school within six to eight weeks. Results will be mailed to you. If you do not want your child included in this testing, please complete the information below and mail this form to School Health Services.

- Your child was absent today,** but will be included in screening at school within six to eight weeks. If your child doesn't pass the screening, **follow-up testing will be done** at that time. **If you do not want follow-up testing done at that time,** please complete the information below and mail this form to School Health Services.

NOTE: If you have questions about these screening results, please call the Hearing Program audiologist.

If you do not want your student's hearing tested, please mail this form to:

[list school's address]

I DO NOT GIVE PERMISSION for _____'s hearing to be tested by the hearing specialist at school.

Parent Signature

Date

General Health Appraisal - Hearing Screening Appendix III

Flow Chart of Recommended Procedures for Identification, Audiometry Program in the Schools

