

Dear Parents,

When a child is found to have a hearing level outside the typical range, the audiologist or diagnosing provider reports these findings to the Minnesota Department of Health (MDH).

Learning this information about your child's hearing may come with a variety of emotions and questions. Our goal is to support you and your child in the best way that we can. We rely upon the organization Minnesota Hands & Voices and your local public health nurse to help you understand more about your child's hearing and answer any questions you might have. They will reach out to you to provide these resources and if you do not wish to receive them, you have the right to decline. Here is more information about what Minnesota Hands & Voices and your local public health nurse can offer you:

**Minnesota Hands & Voices** Minnesota Hands & Voices provides parent-to-parent support to families with children who are deaf and hard of hearing. Their staff are themselves parents of children who are deaf and hard of hearing. A Parent Guide in your area will call you. During this call, they will talk with you about your questions or concerns. They can also send you additional information and connect you with other parents or professionals in your area.

**Local public health nurse** Your nurse can link you to services in your community that may benefit your child. The nurse will assess your eligibility for and provide referrals to various programs such as financial resources, insurance benefits, transportation aid, food assistance, housing support, and home visiting. Your nurse may also refer your child for early intervention and educational support services through [Minnesota's Help Me Grow \(www.helpmegrowmn.org\)](http://www.helpmegrowmn.org). In addition, you may be referred to the [Follow Along Program \(www.health.mn.gov/mnfap\)](http://www.health.mn.gov/mnfap) to help you follow your child's development through resources and activities. You can join these programs at no cost.

You might see lots of terms used to describe hearing. MDH often uses the term "hearing loss" when talking about a medical diagnosis. MDH recognizes that everyone has their own unique identity, and we respect the terms people want to use to identify themselves. MDH often uses "deaf and hard of hearing" in an all-inclusive manner.

MDH works to improve access to high quality services for children. We want all children to get the care they need, when they need it. This mailing will provide information you may find helpful in learning more about resources available to you as you begin this journey.

I am a parent of two children who are deaf. I have used many of these resources for my children. Please call me if you have questions or would like more information. My team and I are committed to helping children reach their fullest potential. Best wishes to you and your family.

Yours sincerely,

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[Minnesota EHDl website \(www.health.mn.gov/improveEhdi\)](http://www.health.mn.gov/improveEhdi)

## Questions and Answers about the Early Hearing Detection and Intervention (EHDI) Program

Why does MDH gather information about children identified with a hearing loss?

- Permanent childhood hearing loss (hearing thresholds in the slight, mild, moderate, severe, or profound range) is identified for about 150 infants born in Minnesota each year, with about 100 additional young children identified after the newborn period each year. It is important to identify children who are deaf or hard of hearing early to avoid delays in language development and learning. MDH is responsible for seeing how well systems work for children who are deaf or hard of hearing (EHDI Act of 2010; Minnesota Statute 144.966). We collect information about children’s demographics, hearing, and development over time to help us do this. We also use this information to help families access services they may need, monitor trends, and measure the effectiveness of services. This includes medical, audiology, and early intervention services. This will help us continue to improve our system. MDH also uses this information for Minnesota’s EHDI Goals. The goals are based on national standards from the Centers for Disease Control and Prevention (CDC). MDH uses them to help improve the outcomes of children who are deaf or hard of hearing in Minnesota.

How does MDH get information about my child’s hearing?

- When an audiologist or medical provider diagnoses a child with hearing loss, they report it to MDH [Minnesota Statute 144.966, subdivision 4(c)]. MDH works with health systems and education partners to learn about and help improve outcomes for children over time.

What information does MDH keep about my child related to his/her hearing?

- MDH collects data about demographics, hearing screening and diagnosis, and interventions during childhood.
- For more detailed information on the information MDH collects, please contact us at 1-800-728-5420.

Who has access to the information related to my child?

- MDH takes your privacy very seriously. Strict laws on data privacy protect this information (Minnesota Statutes, Chapter 13). Only MDH EHDI staff and contractors have access to it. These staff and contractors have all completed data privacy training. The information in the database is carefully protected. It is not public. We only report information as “aggregate data.” This means that all numbers are shown as a group, not individuals. For example, we could report the percentage of babies born with hearing loss in Minnesota.