

Meeting Minutes: Newborn Hearing Screening Advisory Committee

February 18, 2026

Minutes prepared by: Sara Lammert

Location: Zoom

Attendance

Present: Ingrid Aasan, Anne Barlow, Joan Boddicker, Kirsten Coverstone, Darcia Dierking, Kathleen Geraghty, Danelle Gournaris, Hannah Herd, Tina Huang, Calla Kevan, Joscelyn Martin, Abby Meyer, Jess Moen, Gloria Nathanson, Jessica (Jesi) Novak, Sara Oberg, Garrett Petrie, Emily Smith-Lundberg, Cat Tamminga Flores, Colleen Vitzthum, Katie Warne, Terry Wilding, Jay Wyant

Absent: Elizabeth Pai

Minutes

Welcome and announcements

- Jay Wyant called the meeting to order. Roll call was conducted.
- Cat Tamminga Flores made a motion to approve the minutes from the November 2025 meeting. Tina Huang seconded; Committee voted to approve.

Part C education updates – Cat Tamminga Flores

- Cat Tamminga Flores from Minnesota Department of Children, Youth, and Families (DCYF) shared about statewide federal Part C reporting. Part C is the beginning of the education system in Minnesota for many families. She shared the number of Help Me Grow referral connections between 2019 and 2025. She also shared links to information about graduation rates.
- Cat shared the timeline of the process for federal Part C reporting. Federal reporting requires three plans to receive federal funding for Part C:
 - SPR: State Performance Plan – What are we doing across the state?
 - APR: Annual Performance Plan – How are we doing it?
 - SSIP: State Systemic Improvement Plan - How are we going to continue doing better?
- Cat discussed the 12 indicators (compliance based and results based) in the report with 6-year targets. Links to report and district indicators were included.
- She shared the definitions of slippage and determination:
 - Determination: (What level of support do we need as a state for doing Part C well?)

- 4 categories (Meets Requirements – Minnesota’s current status; needs assistance; needs intervention; needs substantial intervention).
- Slippage: We did not meet the target for a specific indicator and we did not meet the target by even more than the previous year by a certain percentage (= lower percentage).

Compliance Indicators

- Cat described the monitoring process: discovery, engagement, and close-out. She shared resources for the monitoring process.
- Cat shared information on the Child Outcomes Summary (COS), an assessment that is conducted when a child enters and exits Part C services. The COS looks at positive social relationships, acquiring and using knowledge and skills, and appropriate action to meet their needs. She shared 2024 – 2025 school year state data included status of meeting targets and slippage.
- She also shared information on Family Outcomes, a requirement for Part C programs to report on the percentage of families participating who report that early intervention services have helped their family know their rights; effectively communication their child’s needs; and help their children develop/learn.
 - Showed 2024 – 2025 School year data including target status and slippage status.
 - Every child exiting Part C services who has received at least six months of service receives the survey. For federal fiscal year 24, the return rate was 13%.
 - To improve rates, a new survey was developed with Wilder Foundation in a paper and electronic form. Cat described the new survey design including translations in multiple languages. She shared family outcomes resources links including a link to the survey.

Committee experience survey discussion – Advisory committee members

- Darcia Dierking shared information about the committee experience survey that was conducted in January 2025. The majority of committee members responded. Members rated meetings and opportunities for participation highly; liked the meeting locations when in person; liked the length of meetings (in-person and virtual); and the meeting format works for majority of members. Opportunities for improvement and factors preventing attendance at meetings were reported.
- Committee members’ discussion: Some members liked the consistent, predictable schedule of the meetings. Some members appreciate the work done by the committee, for example the recent committee workgroups to update the guidelines for providers.

EHDI family story – Isaiah and Hannah

- Isaiah and Hannah shared their family’s journey with their son who was identified as deaf at 13 months old, after passing his newborn hearing screen. They tried hearing aids for a few months and chose cochlear implants. They wanted him to have access to both spoken language and American Sign Language (ASL) and they felt cochlear implants were the best option to achieve this. They enrolled in ASL classes at St. Paul College to learn ASL. They discussed their connection with their local school district’s early intervention program and their transition to the Minnesota State Academy for the Deaf (MSAD) where he began to thrive. They highlighted the culture, community and support of MSAD and the services provided at the school. Their son primarily uses ASL.
- They also discussed how they faced challenges such as complicated early intervention services, COVID and new medical diagnoses. They discussed how MSAD and connection to the deaf community,

choosing to embrace total communication, AAC and visual aids helped their family on their journey. For future families, they would suggest improvements to early intervention, not viewing hearing devices as a “fix” to being deaf, but another available path for the child to thrive.

Services in schools for children with congenital cytomegalovirus (CMV) – Jess Moen, Dr. Mallory Salmon, Stephanie Alexander

- Jess Moen discussed educational opportunities that have been provided for educators, including webinars, a Congenital CMV 101 Packet, a *Remedies for Sorrow* book study, ongoing discussions and topics and topics at meetings and included eligibility for MN special education services.
- Jess also discussed ongoing follow-up (hearing screenings); early intervention services for children with congenital CMV (for both children who are symptomatic and asymptomatic), and the Communication Opportunities brochure available from Minnesota Low Incidence Projects.
- Dr. Mallory Salmon, AuD shared about on-going hearing screening follow-up within the school district where she works. Asymptomatic children are being screened for hearing monitoring at school if they are unable to go to their clinical audiology appointments at their scheduled time. For those who go to their regularly scheduled appointment, they haven’t been doing screenings.
- Stephanie Alexander shared how her district is supporting children with congenital CMV, especially those who are asymptomatic. Asymptomatic children referred to Help Me Grow are assigned a case manager and connect with Stephanie and an audiologist. She shared that they are a support for the child and help monitor and recognize signs in child’s hearing, using a “lighter touch” with services one time per month. She shared that the district provides more intensive services if a child is symptomatic, including access to more team members. She emphasized that interventions and supports should be practical and fit within their family routines. She also shared which referrals to local and statewide resources and supports they share with families.

Closure/adjournment

- Jay adjourned the meeting.

Next Meeting

Date: May 20, 2026

Time: 1 - 4pm

Location: Lutheran Social Service (1605 Eustis St, Saint Paul, MN 55108)

Agenda items: submit proposed agenda items to ehdi@state.mn.us.

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