Understanding Early Intervention
Your baby or toddler has been diagnosed with significant hearing loss and qualifies for early intervention services. There is a lot of new information to learn. This guide is intended to help you understand early intervention and the support services offered to families of children with hearing loss.

What is Early Intervention?
Early intervention is a family-centered comprehensive system of programs, services, and resources designed to meet the physical, intellectual, language, speech, and social-emotional needs of children birth to three years. The goal is to help your child meet all of the skills young children typically develop during the first 3 years of life. Early intervention is authorized by law under the Individuals with Disabilities Act (IDEA)- Part C, and is available in every state and territory of the United States.

Why is Early Intervention Important?
Early intervention is important because it increases the opportunities for your child to be successful later in life. Early intervention lays the foundation for developing fundamental language, social, and cognitive skills that provide the framework for later success in school and in society. Evidence has shown that in the United States, children with hearing loss who receive timely and appropriate intervention can develop language, communication, cognitive, and social-emotional skills that are consistent with a child’s cognitive abilities and chronological age.1–3

Do I need a referral for Early Intervention Services?
Yes, your child’s pediatrician, audiologist, or another health care provider can refer you to the early intervention system in your area. Early Hearing Detection and Intervention (EHDI) services are typically provided through state health and educational agencies. You can also contact your state’s public early childhood education system directly.

What types of services will my child receive?
Services will be individualized to meet your child’s needs and may include:
• Audiology services
• Speech and language services
• Counseling and training for families
• Medical services
• Nursing services
• Nutrition services
• Occupational therapy
• Physical therapy
• Psychological services
Who is my main contact within the Early Intervention system?
You will be assigned a service coordinator once you are connected with your community's early intervention program. Your service coordinator will be your primary point of contact and explain the early intervention process. This person will assist your family in gaining access to services, ensure you receive information about your rights, coordinate assessments, facilitate and participate in the development of the Individual Family Service Plan (IFSP), and coordinate and monitor the delivery of services.

Will my child need an evaluation?
Yes, with your consent, an in depth assessment will be conducted to determine your child’s unique needs and the early intervention services appropriate to address those needs. In addition, you and other family members will be interviewed about the daily routines of the household, the challenges your child faces, and your family’s goals for your child’s development. Your family should also communicate any challenges in areas such as child care, transportation, and any guidance that will benefit your family.

What is an Individualized Family Service Plan (IFSP)?
The IFSP is a written document that details the plan for providing early intervention services to your child and family. It is created based on the results of the assessments and information gathered during the evaluation process. Each state has specific guidelines for the IFSP. Your service coordinator will explain what the IFSP guidelines are in your state.

Who is on the team that develops my child’s IFSP?
Below are the individuals who commonly make up an IFSP team, however, each state will have its own guidelines. Your service coordinator will explain what the IFSP guidelines are in your state.
• You and other family members.
• The service coordinator who will be responsible for implementing the IFSP.
• Any person directly involved in conducting the evaluations and assessments of your child and family.
• The professionals who will provide early intervention services to your child or family. This list of professionals may include an audiologist, teacher of the deaf and hard of hearing, speech-language pathologist, individuals with hearing loss, representatives of family-to-family support networks, physical therapists, occupational therapists, psychologists, and educators.

What do I need to know specifically concerning hearing loss and Early Intervention?
You should become familiar with the recommendations for early intervention practices for children with hearing loss that have been made by experts in the field. The Joint Committee on Infant Hearing (JCIH) is an organization whose mission is to address issues important to the early identification, intervention, and follow-up care of infants and young children with hearing loss. The JCIH is comprised of representatives from the American Academy of Pediatrics, the American Academy of Otolaryngology and Head and Neck Surgery, the American Speech Language Hearing Association, the American Academy of Audiology, the Council on Education of the Deaf, and directors of speech and hearing programs in state health and welfare agencies.

The Committee first published a position statement on infants and hearing loss in the early 1970’s and has continued to provide updates concerning the recommended practices in early identification and intervention through the years. Each position statement has become more explicit in its recommendations for detecting and monitoring infants with suspected hearing loss. The position statements provide benchmarks for best practices.
and help form guiding principles that maximize the success of children with hearing loss. Below are some of the key recommendations expressed in JCIH position statements over the years. The points provided are the most important for parents to know and understand to maximize language and literacy development for children who are deaf or hard of hearing.

1. All infants should be screened for hearing loss before 1 month of age.
2. All infants who do not pass the initial hearing screening and the subsequent rescreening should have appropriate audiological and medical evaluations to confirm the presence of hearing loss at no later than 3 months of age.
3. All infants with confirmed permanent hearing loss should receive early intervention services as soon as possible after diagnosis but at no later than 6 months of age.
4. Families should have access to service coordinators who have specialized knowledge and skills related to working with individuals who have hearing loss.
5. Families should be referred to Early Intervention services within 48 hours of confirmation that a child has a hearing loss.
6. IFSPs should be completed within 45 days of referral from confirmation that the child has a hearing loss.
7. The EHDI system should be family centered with infant and family rights and privacy guaranteed through informed choice, shared decision-making, and parental consent in accordance with state and federal guidelines. Families should have access to information about all intervention and treatment options and counseling regarding hearing loss.
8. Families from culturally diverse backgrounds and/or from non–English-speaking homes should have access to culturally competent services with provision of the same quality and quantity of information given to families from the majority culture.
9. Children should have their progress monitored every 6 months from birth to 36 months of age, through a protocol that includes the use of standardized, norm-referenced developmental evaluations, for language (spoken and/or signed), the modality of communication (auditory, visual, and/or augmentative), social-emotional, cognitive, and fine and gross motor skills.
10. All families should have access to other families who have children with hearing loss and who are appropriately trained to provide culturally and linguistically sensitive support, mentorship, and guidance.
11. Individuals with hearing loss should be active participants in the development and implementation of EHDI Systems at the national, state/territory, and local Levels. Their participation will be an expected and integral component of the EHDI Systems.
12. All families should have access to support, mentorship, and guidance from individuals who have hearing loss.
How Can I keep all of the evaluations, reports, and information about my child organized?
Create a large binder divided into sections where you can keep all of your child’s information. It is also a good idea to keep a log sheet where you can note any phone calls and summarize conversations with your child’s various service providers. Many parents choose to take this book to appointments so they have easy access to previous test results, observations, notes on their child’s recent progress, and results from other professionals.

Where can I find more information and support?

Connect to a Mentor
Bionic Ear Association
hear@advancedbionics.com
advancedbionics.com/bea

Hands and Voices
handsandvoices.org

Guide By Your Side
handsandvoices.org/gbys

Family Voices
familyvoices.org

Learn More about EHDI
US Department of Education
Ed.gov

Parents helping Parents
Php.com

Joint Committee on Infant Hearing
jcih.org

References