DAVID Y. IGE GOVERNOR OF HAWAI



ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of H.B. 987 H.D. 1 RELATING TO HEARING AND VISION PROGRAM

SENATOR JARRETT KEOHOKALOLE, CHAIR SENATE COMMITTEE ON HEALTH Hearing Date: 3/17/2021 Room Number: Via Videoconference

1 **Fiscal Implications:** There are no fiscal implications to the Department of Health (DOH).

Department Testimony: The Department strongly supports this measure, which is part of the
Governor's Administrative Package, to amend Hawaii Revised Statutes (HRS) §321-101 to
establish recommended standards for hearing and vision screening and follow-up, screener
training, and data collection and reporting.

The DOH recognizes that the early identification of hearing and vision loss, with appropriate
follow-up services, is essential for the development of children's language and communication
skills needed for learning in school.

9 HRS §321-101 mandates a hearing and vision program for school children to be conducted by
10 the DOH. This program was discontinued in 1995 due to budget reductions and with the
11 assumption that primary care providers will do the hearing and vision screening. The DOH does
12 not have the funding or staff resources to reinstate this program. Currently, a DOH audiologist
13 provides training and consultation to community organizations on hearing and vision screening
14 protocols and tools.

Improvement in hearing and vision screening for children is needed. Providers and community
 programs vary in their protocols and training for screenings and follow-up. Screeners vary in

17 their training and skills for conducting screenings. Hawaii data from the National Survey of

18 Children's Health show that, compared with other states, Hawaii ranks low in rate of vision

- 1 screening of 61.6% (35th of 50 states for all ages of children). Although newborns receive
- 2 hearing screening, there is a need to identify children who develop hearing loss after the newborn
- 3 period due to late onset or progressive hearing loss.
- 4 The proposed amendment to HRS §321-101 will allow the Department to set recommended
- 5 standards based on national guidelines and best practices for hearing and vision screening and
- 6 follow-up, screener training, and data collection for quality improvement. A statewide screening
- 7 protocol will ensure that all organizations performing screening are using tools, screening
- 8 procedures, and referral criteria based on evidence and best practice.
- 9 The DOH will use existing staff to support the proposed Hearing and Vision Program. The DOH
- 10 will convene an advisory committee with professional, state, and community members to assist
- 11 the DOH in developing recommended protocols for hearing and vision screening and follow-up,
- 12 screener training, and data collection and reporting. Training will be provided at no cost to the
- 13 community organizations.
- 14 Thank you for the opportunity to testify on this bill.

HB-987-HD-1

Submitted on: 3/15/2021 10:24:01 AM Testimony for HTH on 3/17/2021 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Nikki Kepoo	Individual	Support	No

Comments:

Aloha,

I am a hearing mother of a deaf child. I can 100% confirm that no diagnosis already limits your ability to provide adequate care for your child. My son was diagnosed within his first year because of the screening performed at Kapiolani Medical Center. That allowed me to enter into services with individuals who become key contributors to his path.

A path I wanted to be successful and allow for all the opportunities he should have early on. It gives all parents the first look into their childs development and for those of us, like me, who were completely clueless, it gave us tools by identifying him early.

We are in desperate need of improving our system and it starts with screening our babies to know what we need to prepare for. Not just for the emotional support, but also the practical support for them.

I support this bill and hope you will unanimously agree to approve it.

Mahalo,



DISABILITY AND COMMUNICATION ACCESS BOARD

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813 Ph. (808) 586-8121 (V) • Fax (808) 586-8129 • TTY (808) 586-8162

March 17, 2021

TESTIMONY TO THE SENATE COMMITTEE ON HEALTH

House Bill 987, HD1 – Relating to Hearing and Vision Program

The Disability and Communication Access Board (DCAB) supports House Bill 987, HD1, which amends the hearing and vision program statute to increase the early identification of children with hearing or vision loss by establishing consistent protocols for hearing and vision screening and follow up, screener training, and data collection for quality improvement.

The sooner a parent is aware that their child has been identified as blind, deaf, deafblind, or hard of hearing, the more advantageous it is for the child. The period from birth to age 2 is a critical time for all children to acquire language and cognition. During this period, blind, deaf, deaf-blind, or hard of hearing children are often deprived of processes that promote healthy language development. Early identification presents opportunities for the family and professionals serving that family to ensure appropriate cultural and linguistic support for the child's development. This bill will increase the early identification of children with hearing or vision loss by establishing consistent protocols for hearing and vision screening and follow-up, screener training, and data collection and reporting.

We strongly urge passage of this bill.

Respectfully submitted,

KIRBY L. SHAW Executive Director



STATE OF HAWAI'I Executive Office on Early Learning 2759 South King Street HONOLULU, HAWAI'I 96826

March 15, 2021

- TO: Senator Jarrett Keohokalole, Chair Senator Rosalyn H. Baker, Vice Chair Senate Committee on Health
- **FROM:** Lauren Moriguchi, Director Executive Office on Early Learning
- SUBJECT: Measure: H.B. No. 987 H.D. 1 RELATING TO VISION AND HEARING SCREENING Hearing Date: Wednesday March 17, 2021 Time: 1:00 p.m. Location: Videoconference

Bill Description: Amends the hearing and vision program statute to increase the early identification of children with hearing or vision loss, by establishing consistent protocls for hearing and vision screening and follow-up, screener training, and data collection for quality improvement. Effective 7/1/2060.

EXECUTIVE OFFICE ON EARLY LEARNING'S POSITION: Support

Good afternoon. I am Lauren Moriguchi, Director of the Executive Office on Early Learning (EOEL). EOEL supports H.B. 987 H.D. 1 and defers to DOH as it relates to vision and hearing screening.

EOEL is statutorily responsible for the development of the State's early childhood system that shall ensure a spectrum of high-quality development and learning opportunities for children throughout the State, from prenatal care until the time they enter kindergarten, with priority given to underserved or at-risk children.

Early identification of hearing and vision loss, coupled with appropriate follow-up services, provides the resources and support needed for families of children experiencing vision and hearing issues. These supports are essential for children's language and communication development, and learning throughout childhood and beyond.

The National Survey of Children's Health demonstrates that Hawaii ranks low in rate and vision screening compared to other states (35th of 50 states for all ages of children.) Although newborns receive hearing screening, there is a need to identify children who develop hearing loss after the newborn period.

This bill will allow the Department of Health to set recommended standards based on national guidelines and best practices for hearing and vision screening and follow-up, screener training, and data collection for quality improvement.

As we work to increase access to quality early learning opportunities for our keiki, early identification and treatment of vision and hearing problems support children in their readiness for learning, school performance, and academic achievement. Timely and consistent screening will allow program staff to identify and provide the necessary support to families of infants who may be impacted by vision and/or hearing concerns.

Thank you for the opportunity to provide testimony on this bill.



Date: March 15, 2021

To: Senate Committee on Health The Honorable Jarrett Keohokalole, Chair The Honorable Rosalyn H. Baker, Vice Chair And members of the committee

From: Early Childhood Action Strategy

Re: Support for HB987, Relating to the Hearing and Vision Program

Early Childhood Action Strategy (ECAS) is a statewide cross-sector partnership designed to improve the system of care for Hawai'i's youngest children and their families. ECAS partners are working to align priorities for children prenatal to age eight, streamline services, maximize resources, and improve programs to support our youngest keiki.

ECAS supports passage of HB 987, which amends the hearing and vision program statute to increase the early identification of children with hearing or vision loss, by establishing consistent protocols for hearing and vision screening and follow-up, increased screener training, and enhanced data collection for quality improvement.

ECAS supports this measure because of the evidence that:

- Data from the National Survey of Children's Health shows that, compared with other states, Hawaii ranks low in rate of vision screening (35th of 50 states for all ages of children).
- Children with vision loss are likely to fall behind their peers in reading.
- Timely reporting of diagnostic information helps to identify deaf or hard of hearing infants early
- Early identification and referral for intervention services is important to ensure deaf/hard of hearing children can reach developmental milestones and be language ready for school
- The reporting of audiologic evaluation results helps to meet the national 1-3-6 screening, diagnostic and early intervention goals for newborn hearing screening.

Thank you for this opportunity to provide testimony in support of this important measure.

Early Childhood Action Strategy is a project under Collaborative Support Services, INC.



March 16, 2021

To: Senator Jarret Keohokalole, Chair Senator Rosalyn H. Baker, Vice Chair

From: Kristina Fuentes, President Hawai'i Speech-Language-Hearing Association P.O. Box 235888, Honolulu, HI 96823-3516 (808) 528-4742 hsha808@gmail.com

Re: Testimony in SUPPORT of HB987: Relating to Hearing and Vision Program

The Hawai'i Speech-Language Hearing Association (HSHA) is a professional, non-profit organization of speech-language pathologists and audiologists that is nationally recognized by the American Speech-Language-Hearing Association. Our mission is to promote excellence in speech-language pathology and audiology through professional development, advocacy, and leadership to provide education and quality services that embrace the diversity of those we serve. We **STRONGLY SUPPORT** HB 987 to amend the hearing and vision screening program statue to increase early identification of children with hearing or vision loss.

Children with hearing loss fall behind their peers in speech, language, social and cognitive skills. Early identification of hearing loss is critical to prevent future academic and social challenges. Children with vision loss are likely to fall behind their peers in reading. Early identification is necessary to implement interventions as early as possible.

Research shows that early identification of hearing loss in the first 6 months of life leads to better speech, language, and social development compared to children whose hearing loss was identified between 7-30 months (Yoghinaga 2003). Please join us in support of our keiki with the passage of HB987. We, the members of HSHA, thank you for the opportunity to testify and share our support for the passage of HB987.

Sincerely,

Kristina Fuentes, MS CCC-SLP HSHA President 2020-2021

*Yoshinaga-Itano C (2003) From screening to early identification and intervention: Discovering predictors to successful outcomes for children with significant hearing loss. J Deaf Stud Deaf Educ 8: 11-30.

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DAVID Y. IGE GOVERNOR OF HAWAII



ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH

STATE OF HAWAI'I STATE COUNCIL ON DEVELOPMENTAL DISABILITIES PRINCESS VICTORIA KAMĀMALU BUILDING 1010 RICHARDS STREET, Room 122 HONOLULU, HAWAI'I 96813 TELEPHONE: (808) 586-8100 FAX: (808) 586-7543 March 17, 2021

The Honorable Senator Jarrett Keohokalole, Chair Senate Committee on Health The Thirty-First Legislature Regular Session of 2021 State Capitol State of Hawai'i Honolulu, Hawai'i 96813

Dear Senator Keohokalole and Members of the Committee:

SUBJECT: HB0987 HD1 – Relating to Hearing and Vision Program

The State Council on Developmental Disabilities **STRONGLY SUPPORTS HB0987 HD1** which amends the hearing and vision program statute to increase the early identification of children with hearing or vision loss, by establishing consistent protocols for hearing and vision screening and follow-up, screener training, and data collection for quality improvement.

Early identification of hearing and vision loss is imperative in order to provide appropriate follow-up services to a child for the development of the child's language and communication skills. These skills are essential for the child to learn in school.

The Department of Health would have to amend Hawaii Revised Statutes (HRS) §321- 101 in order to establish the recommended standards based on national guidelines and best practices for hearing and vision screening and follow-up, screener training, and data collection for quality improvement. A statewide screening protocol will ensure that all organizations performing screening are using tools, screening procedures, and referral criteria based on evidence and best practice. As such, the Council respectively defers to the Department of Health for further guidance.

Thank you for the opportunity to submit testimony in strong support of HB0987 HD1.

Sincerely,

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Daintry Bartoldus Executive Administrator

HB-987-HD-1

Submitted on: 3/15/2021 10:32:56 AM Testimony for HTH on 3/17/2021 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Darci L Singlehurst	Individual	Support	No

Comments:

I urge you to pass this measure as it greatly impacts the lifelong communication and education of children born with hearing loss. Early identification and intervention are crucial to giving a baby born with hearing loss an opportunity to be on a level playing field with their peers. If young children fall through the cracks of identification and tracking, causing them to miss out on vital early intervention support, it will be so much tougher, if not impossible for them to regain the ground they've lost in their ability to communicate, learn language and access education.

HB-987-HD-1

Submitted on: 3/16/2021 8:20:02 AM Testimony for HTH on 3/17/2021 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Stephen Laracuente	Individual	Support	No

Comments:

Aloha!

I support HB 987 relating to amending the hearing and vision program statute to increase the early identification of children with hearing or vision loss, by establishing consistent protocols for hearing and vision screening and follow-up, screener training, and data collection for quality improvement. As a retired Vice Principal from the Hawaii School for the Deaf and the Blind, especially for the Deaf, Hard of Hearing and Deaf-Blind students, early identification and early language exposure as soon as possible after birth has been proven by researchers to be the most effective way to ensure a student's success later in life. This means early exposure to English through amplified means (hearing aids or cochlear implants) and/or American Sign Language (ASL). The earlier, the better. Late exposure to language, especially after the age 3-5 years, the so-called "window of learning language" leads to difficulties in educating the child when the child enters school that can last for several years or more, requiring Special Education during that time.

Mahalo for your time and consideration,

Steve Laracuente