DAVID Y. IGE GOVERNOR OF HAWAII



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 S.B. 1141 S.D. 1 RELATING TO HEARING AND VISION PROGRAM

SENATOR KARL RHOADS, CHAIR SENATE COMMITTEE ON JUDICIARY Hearing Date: 1/27/2022 Room Number: Via Videoconfence

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

Department Testimony: The Department strongly supports this measure 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.

HRS §321-101 mandates a hearing and vision program for school children to be conducted by
the DOH. This program was discontinued in 1995 due to budget reductions and with the
assumption that primary care providers will do the hearing and vision screening. The DOH does
not have the funding or staff resources to reinstate this program. Currently, an audiologist in the
DOH provides training and consultation to community organizations on hearing and vision
screening 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 their training and skills for conducting screenings. Hawaii data from the National Survey of Children's Health show that, compared with other states, Hawaii ranks low in rate of vision screening of 61.6% (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 due to late onset or progressive hearing loss.

3 The proposed amendment to HRS §321-101 will allow the Department to set recommended

4 standards based on national guidelines and best practices for hearing and vision screening and

5 follow-up, screener training, and data collection for quality improvement. A statewide screening

6 protocol will ensure that all organizations performing screening are using tools, screening

7 procedures, and referral criteria based on evidence and best practice.

8 The DOH will use existing staff to support the proposed Hearing and Vision Program. The DOH 9 will convene an advisory committee with professional, state, and community members to assist 10 the DOH in developing recommended protocols for hearing and vision screening and follow-up, 11 screener training, and data collection and reporting. Training will be provided at no cost to the 12 community organizations.

13 Offered Amendments: None

14 Thank you for the opportunity to testify on this measure.



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

January 25, 2022

- TO: Senator Karl Rhoads, Chair Senator Jarrett Keohokalole, Vice Chair Senate Committee on Judiciary
- **FROM:** Coleen Momohara, Interim Director Executive Office on Early Learning
- SUBJECT: Measure: S.B. No. 1141 SD 1 RELATING TO HEARING AND VISION PROGRAM Hearing Date: Thursday January 27, 2022 Time: 9:30 a.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. (SD1.)

EXECUTIVE OFFICE ON EARLY LEARNING'S POSITION: Support

Good afternoon. I am Coleen Momohara, Interim Director of the Executive Office on Early Learning (EOEL). EOEL supports S.B. No. 1141 S.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.

In Hawaii, 4 per 1000 infants are born with a permanent hearing loss, which has been consistently the highest in the nation. The National Survey of Children's Health demonstrates that Hawaii ranks low in rate and vision screening compared to other states (43rd 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.

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 KAMÅMALU BUILDING 1010 RICHARDS STREET, Room 122 HONOLULU, HAWAI'I 96813 TELEPHONE (808) 586-8100 FAX (808) 586-7543 January 27, 2022

The Honorable Senator Karl Rhoads, Chair Senate Committee on Judiciary The Thirty-First Legislature State Capitol State of Hawai'i Honolulu, Hawai'i 96813

Dear Senator Rhoads and Committee Members:

SUBJECT: SB1141 SD1 Relating to Hearing and Vision Program

The State Council on Developmental Disabilities **STRONGLY SUPPORTS SB1141 SD1** 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 SB1141 SD1.

Sincerely, Hew

Daintry Bartoldus Executive Administrator



Date: January 25, 2022

To: Senate Committee on the Judiciary The Honorable Karl Rhoads, Chair The Honorable Jarrett Keohokalole, Vice Chair And members of the Committee

From: Early Childhood Action Strategy

Re: Support for SB1141 SD1, Relating to Hearing and Vision Screening

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 SB1141 SD1. This bill will increase the early identification of children in schools with hearing or vision loss by establishing consistent protocols for hearing and vision screening and follow-up, screener training, and data collection and reporting. As a result, the measure will help children who may need hearing or vision screening by developing protocols based on national guidelines and best practices. The protocols will include:

- Ages and grades of children to be screened
- Screening tools and instruments
- Passing and referral criteria
- Training and certification to ensure that screeners are qualified
- Data collection and reporting of screening results, referrals, and follow up

The DOH will convene an advisory committee to develop protocols for evidence-based and ageappropriate hearing and vision screening based on national guidelines and best practices.

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

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

<u>SB-1141-SD-1</u> Submitted on: 1/21/2022 5:54:28 PM Testimony for JDC on 1/27/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Mike Golojuch, Sr.	Testifying for Rainbow Family 808	Support	No

Comments:

We support SB 1141.

Mike Golojuch, Sr., Secretary/Board Member, Rainbow Family 808

<u>SB-1141-SD-1</u>

Submitted on: 1/21/2022 6:35:49 PM Testimony for JDC on 1/27/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Victoria Anderson	Individual	Support	No

Comments:

Please pass this important bill. Children are often too young to communicate that they are having hearing or vision problems, and may not even realize they have problems. My sister just thought that was the way the world was -- fuzzy-- until she got her vision tested and got glasses at age 6. Finding this out turned her learning and development around. I also have several friends who didn't know their children had hearing problems until they was finally tested at 3 or 4 years old, and this caused much developmental delay.





Testimony of John M. Kirimitsu Legal and Government Relations Consultant

Before: Senate Committee on Judiciary The Honorable Karl Rhoads, Chair The Honorable Jarrett Keohokalole, Vice Chair

> January 27, 2022 9:30 am Via Videoconference

SB 1141, SD1, Relating to Hearing and Vision Program

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on this measure amending the hearing and vision program statute to increase the early identification of children with hearing or vision loss.

Kaiser Permanente Hawaii supports this measure.

Early childhood development can be negatively affected by poor eyesight or poor hearing. The single most important reason for early detection of hearing and vision loss is that it allows parents to determine if their child has a learning disability. Early detection of a potential problem is crucial and that is why a thorough screening is recommended by the American Academy of Pediatrics. The U.S. Department of Health & Human Services reports that two to three out of every 1,000 children in the U.S. are born with a hearing problem or are deaf. This also includes individuals who lose more of their hearing as they get older. The U.S. Centers for Disease Control and Prevention also note that nearly two-thirds of children who have a vision impairment will have at least one type of developmental disability. This could be intellectual disabilities, hearing loss, epilepsy, or cerebral palsy.

Kaiser supports increasing the early detection of hearing or vision loss in children by establishing consistent protocols for hearing and vision screening and follow-up, screener training, and data collection for quality improvement.

Thank you for your consideration.

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