

Three-Pronged Approach

I. Parent Interview Questions

Related to Vision and Hearing Concerns

Introduce these questions during first conversations to help alert you to look more carefully at a child's vision and hearing. A health coordinator, parent educator, or other team member may conduct the parent interview.

1. *When was your baby's last "well baby" check up?*

2. *How would you describe (child's name) birth?*

3. *Did your baby have newborn hearing screening done in the hospital?
Did he/she pass? [If not, what happened next?]*

4. *Has (child's name) had any ear infections that you know of?*

5. *Has (child's name) hearing or vision ever been tested by a doctor? [If
yes, when was that and who did the evaluation? What were the results?]*

6. *Do you have any concerns about the way (child's name) looks at you (or
at books, or how he/she watches TV)?*

7. *Do you have any concerns about the way (child's name) responds when
you talk to him/her? Or how (child's name) is learning to talk?*

8. *Does anyone in your family (immediate family or uncles, grandparents,
etc.) have a hearing loss or a visual impairment?*



High Risk Factors ~ Medical/Family History Review

This supplemental reference page is for use by early childhood team members who have access to a child's medical reports. It includes factors that indicate a need to look carefully at a child's hearing and vision. Items marked with an asterisk are high-risk factors associated with late-onset hearing loss as outlined in the 2007 *Joint Committee on Infant Hearing Position Statement*, and are included on the Washington State Dept. of Health's Newborn Screening (EHDDI) "Rescreen Card."

Family History:

- ⑨ Family history of vision impairment or permanent childhood sensorineural hearing loss.*

Prenatal History:

- ⑨ In-utero infections with cytomegalovirus, herpes, toxoplasmosis, rubella, or syphilis.*
- ⑨ Child was exposed to alcohol or drugs (e.g., cocaine, medications) prenatally.

Perinatal History:

- ⑨ Child's birth weight was less than 1500 grams (3.3 pounds).
- ⑨ Child had Apgar score of 0-4 at 1 minute or 0-6 at 5 minutes.
- ⑨ Child was premature and exposed to oxygen in the hospital.
- ⑨ NICU stay of more than 5 days including any of the following regardless of length of stay: ECMO, assisted ventilation, exposure to ototoxic medications or loop diuretics, and hyperbilirubinemia that required exchange transfusion.*
- ⑨ Craniofacial anomalies, including those with abnormalities of the eyes, pinna (external ear) and the ear canal.*

Postnatal History:

- ⑨ Child had bacterial meningitis or other infection (e.g., encephalitis, Group B strep, E. coli).
- ⑨ Child sustained head trauma associated with loss of consciousness or skull fracture (including "shaken baby syndrome").
- ⑨ Child has neurological disorders, such as seizures.
- ⑨ Syndrome known to include a sensorineural and/or conductive hearing loss* and/or visual impairment (e.g., Alport, CHARGE, Down syndrome, Fetal Alcohol Syndrome, Goldenhar, Hurler, Jervell Lange-Nielson, Norrie, Pendred, Refsum, Trisomy 13, Usher, Waardenburg).
- ⑨ Child has cerebral palsy.
- ⑨ Child has hydrocephaly.
- ⑨ Child had an excessive fever for a prolonged period of time.
- ⑨ Child was given "mycin" drugs or other known ototoxic medications (e.g., chemotherapeutic agents or aminoglycosides).

Child's Name: _____

Date of Birth: _____

Three-Pronged Approach
II. Developmental Skills Checklist

Related to Seeing and Hearing in Young Children

SEEING: Does the Child...	Y √	N √
BIRTH TO 3 MONTHS OLD:		
• Look at your face? (briefly looking by 1 month old)		
• Imitate your smile? (2 mo.)		

HEARING: Does the Child...	Y √	N √
BIRTH TO 3 MONTHS OLD:		
• Startle or jump when there is a sudden loud sound?		
• Stir or awaken from sleep, or cry, when someone talks or makes a loud noise?		
• Recognize and get comforted by a familiar voice?		

BY 3 TO 6 MONTHS OLD:		
• Smile at others?		
• Look at own hands?		
• Watch you as you enter or cross the room? (from 6 feet away)		
• Reach out and bat at objects?		

BY 3 TO 6 MONTHS OLD:		
• Turn his or her eyes to look for an interesting sound?		
• Respond to mother's or other caregiver's voice?		
• Turn eyes forward when his or her name is called?		

BY 6 TO 12 MONTHS OLD:		
• Try to reach out and grasp at toys or other objects? (6 mos.)		
• Notice something small (Ex: raisin) when 12 inches from him? (6 mos.)		
• Try to move toward an object that is at least 5 feet away? (7 mos.)		
• Pick up or attempt to pick up a cheerio, raisin, or lint? (8 mos.)		
• Imitate movements or actions of another person on a toy? (9 mos.)		
• Stare at or try to grab your jewelry or glasses? (9 mos.)		
• Look for dropped toy? (9 mos.)		
• React to facial expressions of others (Ex. frowns, smiles, funny faces)? (10-12 mo.)		

BY 6 TO 12 MONTHS OLD:		
• Turn toward an interesting sound or toward caregiver when his or her name is called from behind?		
• Search or look around when new sounds are present?		
• Understand "no," "mommy," "bye bye," and similar common words?		
• Participate in vocal play with parents; experiment with different speech and non-speech sounds? (9 mos.)		
• Babble in speech-like strings of single syllables? (Ex. "da da da," "ga ga") (10 mos.)		

BY 12 - 24 MONTHS OLD:		
• Show an interest in picture books? (12 mos.)		
• Imitate scribbling? (8-15 mos.)		
• Reach into a container and pull objects out easily? (12-18 mos.)		

BY 12 - 24 MONTHS OLD:		
• Say one or more real, recognizable words? (12 mos.)		
• Put words together? (Ex: mommy shoe, big boat) (18 mos.)		
• Use at least 50 words? (24 mos.)		

SEEING: Does the Child...	Y √	N √
BY 24 - 36 MONTHS OLD:		
• Imitate crayon stroke? (24-30 mos.)		
• Copy circle made by another person?		
Color Identification:		
• Match two items that are the same color? (24-32 mos.)		
• Sort items by color? (36 mos.)		
• Point to a color when asked? (36-42 mos.)		
Object to Picture Matching and Picture Identification:		
• Identify one picture of a familiar item? (18-24 mos.)		
• Identify two or more pictures? (24-32 mos.)		
• Match objects with pictures of objects? (24-36 mos.)		
Does your child say. . . ?		
• "My eyes are itchy."		
• "My eyes hurt."		
• "Things look blurry."		

The "seeing" developmental skills on this page are from Dr. Tanni Anthony's doctoral work (2005) on visual skills for *Transdisciplinary Play-Based Assessment*.

The "hearing" developmental skills are adapted from the *Hawaii Early Learning Profile Language Scale*.



Initial Screening Date: _____	_____
(date)	(initials)
Annual Screening Dates:(1) _____	_____
(2) _____	_____
(3) _____	_____

HEARING: Does the Child...	Y √	N √
BY 24 - 30 MONTHS OLD:		
• Follow two requests combined? (Ex. "Get the ball and put it on the table") (24 mos.)		
• Understand conversation easily?		
• Hear when you call from another room?		
• Point to objects in a book when they are named?		
• Say the following sounds clearly: P, B, M, K, G, W, H, N, T, D?		
• Use three-word sentences?		
• Use past tense verbs? (Ex. walked, batted, fished, ran)		
• Name five pictures?		
• Answer questions?		
• Use 1-2 prepositions (in, on, under)?		
• Use sentences with real words instead of using nonsense-sounding "word" strings?		

BY 30 - 36 MONTHS OLD:		
• Hear TV or radio at same loudness level as other family members?		
• Notice sounds--dogs barking, phones ringing?		
• Can make most sounds correctly at start of words? (Ex. Says the "th" sound in "think," but says "baff" instead of "bath.")		
• Use 1-2 prepositions (in, on, under)?		
• Use plurals? (Ex: dogs, cookies)		
• Refer to self using a pronoun (I, me)?		
• Use 200+ words? (300+ by age 3?)		
• Give full name when asked?		
• Help tell stories?		
• Ask questions beginning with "what," "where," or "when"?		
• Use speech that can be understood by others most of the time?		

III. Observations: What to Look For

Things that May Mean a Vision or Hearing Problem in Young Children

Associated with Seeing	Associated with Hearing
<p>Differences in How Eyes Look:</p> <ul style="list-style-type: none"> ⑥ Drooping eyelid ⑥ One eye slightly higher or lower than the other eye ⑥ Obvious differences in the shape or structure of the eyes ⑥ Pupil of the eye is not round, clear, black ⑥ White of the eye is red and sore looking ⑥ Eyes are watery even when baby is not crying  <p>Unusual Eye Movements:</p> <ul style="list-style-type: none"> ⑥ Eyes move in jerky way back and forth, or up and down ⑥ Eyes do not move together ⑥ Eye turns inward or outward after 4-6 mos. old <p>Unusual Gaze or Head Positions</p> <ul style="list-style-type: none"> ⑥ Tilts or turns head in certain way when looking at an object ⑥ Holds object close to eyes ⑥ Seems to be looking beside, under, or above the person or object ⑥ Baby is very sensitive to bright light and squints, closes eyes, or turns away from it ⑥ Gazes directly into bright light. <p>Absence of Visual Behaviors</p> <ul style="list-style-type: none"> ⑥ No face-to-face eye contact by 3 months ⑥ Does not blink when touched at bridge of nose ⑥ Does not look at objects, or follow moving objects, by 3 months 	<p>Differences in How Face or Ears Look:</p> <ul style="list-style-type: none"> ⑥ Cleft lip and palate ⑥ Head or neck have malformations ⑥ Ears are malformed, or there may be no opening at ear canal; pits, skin tags near ear ⑥ Frequent earaches or ear infections ⑥ Discharge from the ears  <p>Unusual Listening Behaviors:</p> <ul style="list-style-type: none"> ⑥ Few or inconsistent responses to sounds ⑥ Does not seem to listen ⑥ Does not turn when name is called ⑥ Notices certain types of sounds more than others <p>Unusual Vocal Development</p> <ul style="list-style-type: none"> ⑥ Does not make a lot of different sounds ⑥ Voice sounds different; can't make certain speech sounds ⑥ Is behind in talking (no spoken words at 15 months; fewer than 50 words at 24 months) <p>Other Behaviors</p> <ul style="list-style-type: none"> ⑥ Pulls on ears or puts hands over ears ⑥ Breathes through mouth ⑥ Cocks head to one side <p><i>(Sources: Calvello, 1990; Chen, 1998, 1990; Fewell, 1983; Gatty, 1996; Joint Committee on Infant Hearing, 2007; Roman-Lantzy, 2013; Teplin, 1995.)</i></p>

Three-Pronged Approach – EARLY HEAD START
Summary Form: Addressing Vision and Hearing Concerns

Child's Name: _____

Birthdate: _____

Parent/Caregiver: _____

Phone: _____

FRC/Service Provider: _____

Primary Care Physician: _____

I. PARENT/CAREGIVER INTERVIEW

A. The parent/caregiver has concerns about the child's vision and/or hearing at this time: No Yes

If yes, the concern is related to the child's:

Vision Hearing Speech/Language (rule out hearing loss)

B. Describe the concerns regarding the child's hearing or vision skills development:

FAMILY & MEDICAL HISTORY REVIEW: Please note any factors in child's family and/or medical history that might indicate higher risk for hearing/ vision impairments:

II. DEVELOPMENTAL SKILLS CHECKLIST

(Describe any skills of concern for child's age)

A. Vision Related

B. Hearing Related

III. OBSERVATIONS

(Describe observations that might indicate higher risk for vision/hearing problems)

Results of InfantSEE evaluation (if applicable):

Pass Comments:

Results of OAE Hearing Screening (if applicable):

Pass Rescreen Refer

SUMMARY:

We have no concerns regarding the child's vision or hearing at this time, based on parent interview with family/medical history review, developmental skills related to vision or hearing, and our joint observations.

We have identified high risk factors, signs, and/or observations, as noted above, for:

Vision Hearing Note: These concerns and a follow-up plan will be addressed in the Family Partnership Agreement. Action taken and results will be discussed at the six-month review.

Follow-up option recommended:

Referral to primary care physician (PCP) and then, if appropriate, to a pediatric ophthalmologist or pediatric audiologist.

[Parent/Caregiver] [Date]

[Health Coordinator/Other Provider] [Date]

Copy to: PCP, parent, file