

SFHCHS18 - SQA Code HD2C 04

Undertake a newborn hearing screen



Overview

This standard covers undertaking the screening of hearing in new born infants. This screening might take place in a variety of settings, including hospital, the baby's home, a clinic or a Health Visitor's surgery, GP surgery or audiology clinic. It will involve the use of specific equipment, and the liaison with parents, other staff and health professionals. Because of the nature of the investigation this function will only be undertaken by designated individuals who must always work within agreed protocols.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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Performance criteria

- You must be able to:*
- P1 obtain all the necessary information about the mother and baby before approaching the parent/s
 - P2 check the individuals' identity and the confirm the planned activity
 - P3 check whether it is appropriate/convenient to undertake the screen with the appropriate staff, where necessary
 - P4 check that it is convenient to conduct the screen with the parent(s) and establish a rapport with the baby's parents in order to give reassurance and to gain their trust and confidence
 - P5 introduce the newborn hearing screening and check if it is convenient with the parent/s to discuss the screen and try to establish a rapport, establishing your identity
 - P6 provide parent/s with all information, including:
 - P6.1 an explanation of the procedure
 - P6.2 why it is being offered
 - P6.3 steps involved in the screening process
 - P6.4 any potential further action
 - P7 answer any questions about the screen as promptly as possible within your role, knowledge and responsibilities
 - P8 refer all questions outside your responsibility or knowledge, or any concerns you may have in relation to the mother and babies health and wellbeing, to a relevant member of staff immediately
 - P9 obtain valid consent/decline from the parent(s) following agreed protocols:
 - P9.1 for the screening to take place
 - P9.2 for data access and transfer
 - P10 ensure security, privacy and quiet as much as possible when the screen is taking place
 - P11 handle the baby in a comfortable and safe manner at all times
 - P12 ensure the baby's clothing is adjusted as appropriate before and after the screening
 - P13 screen the baby's hearing using the equipment and screen protocols appropriately
 - P14 accurately document all appropriate parent and baby details, including screen outcomes when completed, in the appropriate records, including IT systems where used, maintaining confidentiality at all times
 - P15 inform the parent(s) what is happening throughout the procedure where possible and involve them throughout the procedure as appropriate
 - P16 give appropriate information to parents at the end of the procedure and remind them of the next steps in the process
 - P17 follow the appropriate procedures when you have obtained the results from the screen for:

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P17.1 clear responses from both ears

P17.2 no clear responses from one or both ears

P17.3 follow procedures for follow-up appointments as required

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Knowledge and understanding

You need to know and understand:

- K1 the current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to undertaking a newborn hearing screen
- K2 your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance
- K3 the duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer
- K4 the importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence
- K5 the importance of applying standard precautions and the potential consequences of poor practice
- K6 the following regarding consent:
 - K6.1 the concept of informed choice
 - K6.2 rationale for consent and who can give it
 - K6.3 valid consent and parental responsibility
- K7 your role in the maintenance of a safe environment
- K8 security issues relevant to the newborn hearing screening process and care of the newborn
- K9 the general rationale behind screening programmes
- K10 the typical interventions for children with hearing impairment
- K11 the appropriate use of interpreters
- K12 the structure of the ear and physiology of hearing
- K13 common types and causes of hearing impairment
- K14 what is a family history and how to obtain it
- K15 the value of new born hearing screening for the baby and family
- K16 the roles of others directly involved at the identification and management of a child diagnosed with hearing impairment
- K17 all personnel involved in the general care and support of newborn babies and parent/s
- K18 the Deaf Community in terms of potentially differing expectations and language use
- K19 the equipment required in terms of function and maintenance
- K20 the screening protocols
- K21 the equipment protocols
- K22 what screening is and the limitations of screening
- K23 the newborn hearing screening process
- K24 the possible outcomes of screens and how you will deal with these
- K25 the next stages of the screening, including referral, if no clear responses

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are obtained

K26 why you must document all details, including outcomes

K27 why and how you maintain confidentiality

K28 family-friendly issues

K29 the information provided for the procedure

K30 how and when to use the information

K31 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff

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Additional Information

External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB6 Assessment and treatment planning

The candidate and assessor must only sign below when all Performance Criteria and Knowledge points have been met.

Unit assessed as being complete

Candidate's Name:	
Candidate's Signature:	
Date submitted to assessor as complete:	

Assessor's Name:	
Assessor's Signature:	
Date assessed as complete:	

Internal Verification —

to be completed in accordance with centre's IV strategy

Evidence for this Unit was sampled on the following date/s:	IV's Signature	IV's Name

This Unit has been subject to an admin check in keeping with the centre's IV strategy.

Date of admin check	IV's Signature	IV's Name

Unit completion confirmed

IV's Name:	
IV's Signature:	
Date complete:	