

Training Format & Competency Assessment

Guidelines for conducting training activities and assessing competencies are listed in the following table:

<p>Theory - Clinical information and Screening Equipment Function and Operation</p>	<p>A variety of processes can be used:</p> <ul style="list-style-type: none"> ○ Lecture ○ Demonstration and practice on model ○ e-Learning HELM <p>Question and answer session/s</p>
<p>Practical Screening - Initial</p>	<p>Participants perform screens in pairs (or as determined by trainer) and are observed by trainer</p> <ul style="list-style-type: none"> ○ One trainee performs screen and one records data ○ Feedback should be provided immediately following screen (i.e. not with parent/s present unless necessary for successful completion of screen) <p>At least 2 screenings per trainee should be undertaken under these conditions</p>
<p>Practical Screening - Independent</p>	<p>Screener performs screens alone – with direct or indirect supervision (to be determined by trainer).</p> <p>5 screenings to be successfully performed under these conditions</p> <p>Competencies formally assessed by local/area Healthy Hearing Coordinator via:</p> <ul style="list-style-type: none"> ○ Observation of at least 2 complete screens ○ Screener can complete HELM assessment online to generate a competency certificate which can be signed off by team leader <p>Feedback/Review process with trainer/ co-ordinator.</p>

Annual mandatory competencies, will consist of one practical screening assessment and the completion of the online e-Learning module HELM http://www.elearn.com.au/qh_hearing/



**HEALTHY HEARING
NEWBORN HEARING SCREENING PROGRAM**

_____ Hospital  Queensland Government

Skills Assessment for Screening with the ALGO 3/3i Newborn Hearing Screener

NAME: _____ ID: _____ Assessor Name: _____ ID: _____

Tick Applicable Box: Assessment after 2 screens Assessment after 5 screens Annual assessment

Procedure	Newborn Hearing Screen Skills to be evaluated	Rating Scale			
		C	D	S	
Screen offer	Clear and accurate information given to parents / carer <ul style="list-style-type: none"> ▪ Brochure in appropriate language provided &/or interpreter used ▪ Reason / aim of screening program explained ▪ Procedure described ▪ Possible screening outcomes explained 				
	Consent obtained using form &/or interpreter in appropriate language				
	Opportunities provided for parents / carer to ask questions				
Baby selection	Baby selected was eligible to screen and in an appropriate state				
Data collection	Healthy Hearing Screening & Referral form completed correctly <ul style="list-style-type: none"> ▪ Patient demographics ▪ Hearing loss "high risk indicators" identified <ul style="list-style-type: none"> → Information obtained from medical record → Clarification with parent as required 				
	Correct patient data/ information entered into Algo3 / 3i				
	Confirmed that baby was in a quiet, settled state before proceeding				
Procedure	Skin evaluated and prepared correctly				
	Sensors placed correctly				
	Ear couplers applied correctly				
	Progress of screen observed and monitored <ul style="list-style-type: none"> ▪ Ensured minimal ambient noise, impedance and myogenic levels ▪ Progress bars monitored ▪ Troubleshooting and intervention undertaken as required 				
	Screen outcome / result explained to parents				
	Ongoing language milestone monitoring and Otitis Media risk discussed				
Post screen	Parents / carer encouraged to ask questions and further information provided as required				
	Appropriate follow-up process /action undertaken as required <ul style="list-style-type: none"> ▪ AABR2 arrangements ▪ Referral for diagnostic Audiology appointment within 2 to 6 week time frame ▪ Referral to Family Support Service ▪ Referral for Surveillance Audiology before 1st Birthday 				
	Written record / documentation process completed				
	Communicated as appropriate with other care providers eg nursing/audiology/FSF/medical				
	Disposed of used equipment and completed infection control measures correctly				
	Demonstrated appropriate equipment care & storage of cables				
	Housekeeping	Performed Impedance, Artifact & Acoustic checks correctly			
		Demonstrated knowledge of processes for faults, monthly checks & annual ATA calibration			
Downloaded patient screening data via USB or Infrared mode (if applicable)					

C = Competent
D = Needs Development
S = Requires Supervision

Competency: Achieved Interim (reassessment required) Not Achieved Date: / /

Comments/Recommendation:

Assessor Signature: / /
EM / RN / EN

Screener Signature: / /
EM / RN / EN

Sample Training Program Agenda



HEALTHY HEARING PROGRAM Universal Newborn Hearing Screening

Healthy Hearing Nurse Screener Training Program

Day 1 - (insert date)

Venue: (insert)

Hospital: (insert)

0900-0915	<ul style="list-style-type: none"> • Introductions and Housekeeping • Program Outline for the Healthy Hearing Training Program • Aims of training day 	
0915-1030	<ul style="list-style-type: none"> • Overview of the Healthy Hearing Program • Why Screen - The Importance • AABR screening protocol • Hearing Screening Targets and Timeframes 	
1030-1045	Morning Tea	
1045 – 1130	Documentation and Resources <ul style="list-style-type: none"> • Informed consent • Screening and Referral Form • Standard Letters • Personal Health Record Book • Individual Hospital Policy • Established Policy and Procedure • Skills assessment and Aims of Training 	
1130-1230	<ul style="list-style-type: none"> • Target Surveillance and Risk Factors • Referral pathways & flowchart 	
1230 – 1315	Lunch	
1315-1445	Algo3 / 3i education session Lead application and maintenance <ul style="list-style-type: none"> • Troubleshooting • Monthly recharge • Annual calibration 	
1445 – 1500	Afternoon Tea	
1500-1630	Screening Demonstration <ul style="list-style-type: none"> • Revision of the Screener script • Application of theory 	
1630-1700	Discussion	

Day 2 – (inset date)

PRACTICAL SCREENING

Time: 0800-1500

Venue : (insert details)

0830-1000	<ul style="list-style-type: none">• Question Time• Practical preparation for screening• Obtaining consent• Completing Screening & Referral Forms	
1000-1630	<ul style="list-style-type: none">• Practical hearing screening of babies• Skills assessment / feedback	