

Hearing Health

Hearing Red Flags

If a child shows any of the following, refer to doctor. These children need immediate referrals for diagnostic audiology, speech pathology and paediatrician assessment

3-6 months: not communicating by vocalizing or eye gaze; not starting to babble

9 months: poor feeding or oral coordination; no gestures (pointing, showing, waving); no two-part babble (eg gaga)

12 months: not babbling; no babbled phrases that sound like talking

18 months: no clear words; not following simple instructions

2 years: using <50 words, not following simple requests; not putting words together; most of what is said is not easily understood

2.5 years: no two-word combinations

3 years: speech difficult to understand; no simple sentences

4 years: speech difficult to understand; not following directions involving two steps

5 years: difficulty telling parent what is wrong; cannot answer questions in a simple conversation

Identifying Hearing Loss

Suspect hearing loss in children with otitis media

- If ear problems continue for more than 3 months, organize diagnostic audiometry
- Ask caregivers questions to identify hearing loss early (see Hearing Questionnaire below)

Hearing Questionnaire

Always ask

Are you worried about the baby or child's hearing?

Newborn to 3 months

Do sudden, loud noises wake the baby?

Does the baby cry at very loud noises?

Does an awake baby jump at sudden, loud noises like a door slamming or a dog barking nearby?

3 to 4 months

Does the baby sometimes turn its eyes or start to turn its head to see where a noise comes from?

Is the baby distracted from feeding by moderately loud noises close by?

4 to 7 months

Does the baby frequently turn straight to sounds?

Does the baby make a variety of babbling sounds?

Does the baby enjoy playing with noisy toys or objects?

Can you soothe the baby with your voice?

7 to 9 months

Does the baby turn to find things heard but not seen?

Does the baby gurgle, coo or babble to unseen sources of voices or other sounds?

9 to 24 months

Does the baby respond when you call from another room?

Does the baby show pleasure when hearing sounds like the bath running, food being prepared or kids?

At 12 months, does the baby copy sounds and noises?

At 15 months, does the child use some single words?

At 2 years, does the child put two words together?

24 months to 5 years

Does the child talk like most other kids his or her age?

Does the child act like he or she is not paying attention, ignoring you or is acting naughty?

Does the child seem to have difficulty understanding what you have said?

Does the child turn up the TV loudly?

Does the child frequently ask "What?" or ask for you to repeat what you have said?

Supporting Children with Hearing Loss

Encourage children with hearing aids to wear them at all times and ensure they are working

Children 0-5 years old – advice for caregivers

When otitis media and associated hearing loss is present in early childhood, caregivers can help ensure their child's listening, language and communication skills continue to develop by creating a language-rich environment.

- Tell families and caregivers they are the most important teachers of language & communication skills
- Talk, talk, talk! Provide as much verbal input to the child as possible face to face at their level
- Tell oral stories, read or talk about books with children
- Repeat, rephrase, simplify information & use visual cues
- Treat otitis media promptly & ensure follow up (see Ear Problems in Children protocol)

School-Aged Children – advice for education staff

Use of sound field amplification systems in the classroom is important for all children

Hearing Health

Identifying hearing loss

- Children with hearing loss and children who misbehave often demonstrate similar behaviours - arrange hearing tests if there is teacher or parental concern
- In school, teachers can use the "Blind Man Simon Says" game every day, and accommodate any child that displays difficulty with hearing (i.e. sit at front of class)
- Inform clinic or parent if child complains of sore ears

Communication Strategies

- Speak clearly, slowly and in short sentences
- Speak face to face at the child's level
- Do not cover your mouth when talking
- Speak clearly, slowly and in short sentences
- Rephrase messages if they do not understand
- Use gestures and visual cues to support your message
- Reduce background noise

Rehabilitative Audiology

Referrals for hearing aid consultation are most often made after diagnostic audiology. Earlier hearing aid fitting may be associated with better language outcomes (the critical period for this is in the first three years of life).

Support children with hearing aids & their families by:

- Providing emotional and practical support to the family as they incorporate hearing aids into their child's daily routine
- Provide helpful strategies if toddlers or young children are resisting hearing aid use (see this advice from [Hearing Australia](#))

Resources

Menzies Otitis Media Guidelines 2017:

<http://www.otitismediaguidelines.com/>

WACHS Ear Health Coordinators

West Kimberley: Joe Ghandour

(Joseph.Ghandour@health.wa.gov.au)

East Kimberley: Margie O'Neill

(Margie.O'Neill2@health.wa.gov.au)

KAMS Ear Health Regional Facilitator

hearinghealthrf@kamsc.org.au

Rehabilitative Audiology

Hearing Australia: (08) 9226 7108 (WA Outreach Coordinator)

KAHPF Ear Problems in Children Protocol

For the management of otitis media and other ear problems in children