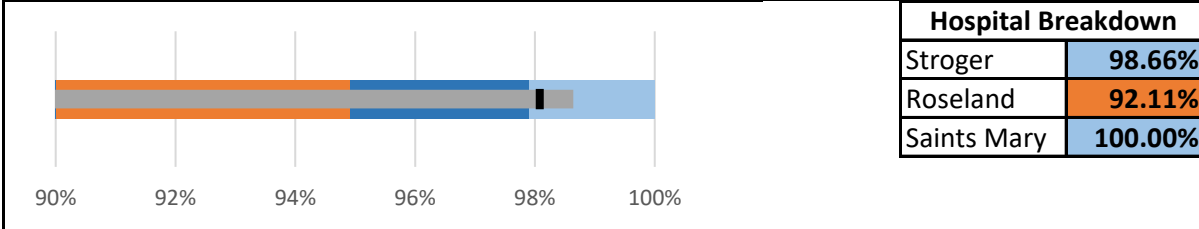


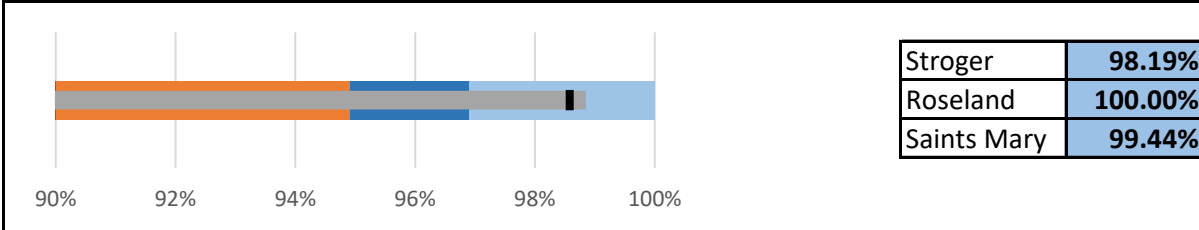
Newborn Hearing Screening Program 2021 Quarter 4 Performance Report

Key		If out of compliance, seek assistance from the IDPH EHD staff at (217) 782-4733 or dph.newbornhearing@illinois.gov .
Meets Standards	State Average	
Below Standards	Perinatal Network #2	
Out of Compliance		

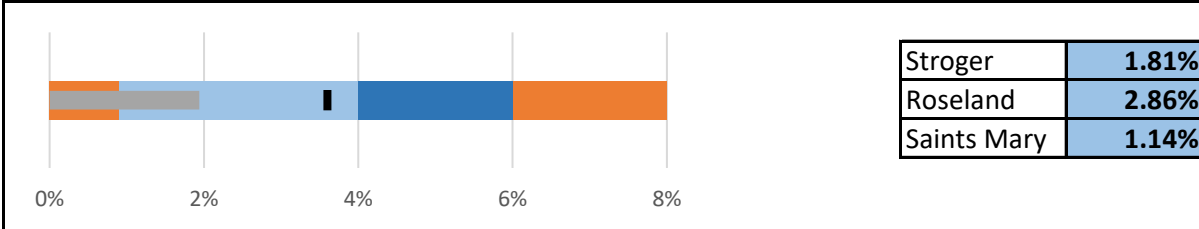
Screening Rate



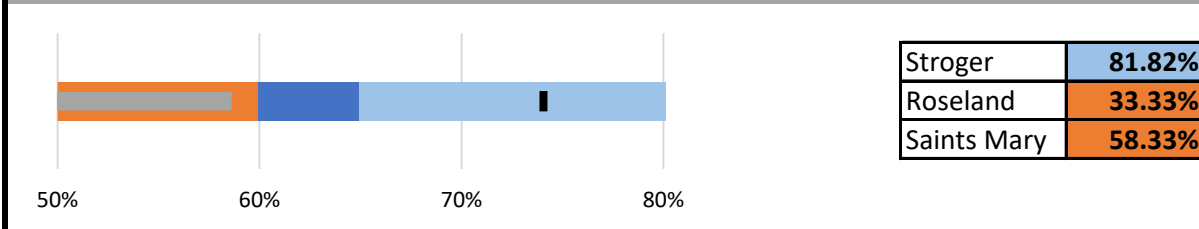
Screened No Later than 1 Month of Age



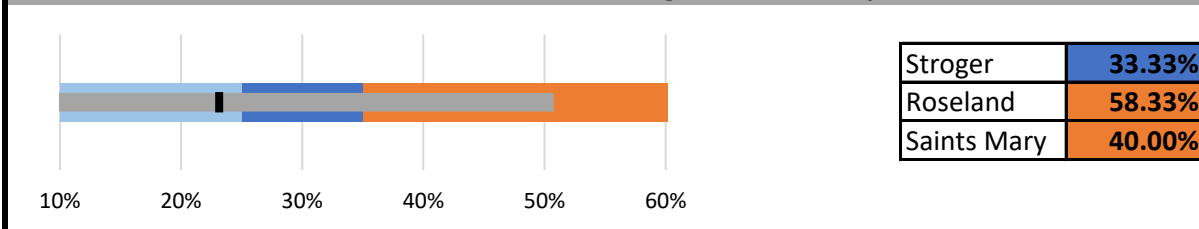
Inpatient Refer Rate



2019 Diagnosed No Later than 3 Months of Age



2019 Lost to Diagnostic Follow-Up



2019 data was used for the diagnosed no later than 3 months and lost to diagnostic follow-up measures. EHD data can take one year to normalize due to scheduling and receipt time of reports. This data has been submitted to the CDC and is considered complete. If you would like updated individual hospital rates for these measures, please contact us.

Perinatal networks as a whole and individual hospitals that are out of compliance for certain measures should contact IDPH for remediation plans.

There are remediation plans for each measure. A multitude of procedures and protocols impact each measure. Therefore, procedures and protocols will be analyzed to determine if best practices are being followed. We look forward to working together to improve our state performance.

These performance measures are to add transparency to our newborn hearing screening program across the state. The bullet charts on the left show our colored baselines and your network's performance compared to the state average. The hospital breakdown in the highlight table on the right shows what figures make up your perinatal network gray bar in the chart.

Screening Rate= Total documented as screened/ (Total Occurrent Births-Not screened infant died-Not screened non-resident-Not screened unable due to medical reasons)

Screened No Later than 1 Month of Age= (Total Pass before 1 month of age + No pass before 1 month of age)/Total Documented as Screened

Refer Rate= Total Referred/ Total Screened

2019 Diagnosed No Later than 3 Months=(No Hearing Loss Before 3 Months + Permanent Hearing Loss ID Before 3 Months)/(Total with No Hearing Loss (initial diagnosis) + Total with Permanenet Hearing Loss (initial diagnosis)

2019 Lost to Diagnostic Follow-Up= Lost to follow-up/ Total Not Pass

Outpatient Refer Rate= Percentage of infants who received an outpatient screening and referred

Outpatient Refer Rate	
Stroger	80.00%
Roseland	none
Saints Mary	0.00%