



Breaking Silos, Building Bridges: Uniting EHDl and Part C in North Dakota

1

North Dakota Part C

- Lead State Agency: North Dakota Department of Health and Human Services
- Regional Human Service Centers
 - Service Coordinators
 - Early Intervention Agencies

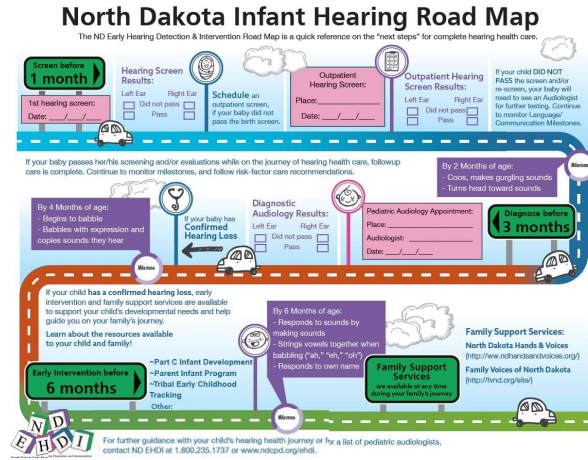
A baby with light skin and hair is sitting on a white blanket, playing with a colorful stacking toy. The baby is wearing a light blue long-sleeved shirt. The background is a bright, out-of-focus indoor space, likely a playroom or classroom.

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2

North Dakota EHDI

- Location: ND EHDI program at Minot State University (MSU)/North Dakota Center for Persons with Disabilities (NDCPD) and is Bona fide agent for North Dakota Department of Health and Human Services
- HRSA and CDC funding to support activities
- All collaborative efforts are voluntary



3



4

Building Bridges in North Dakota

- Department of Health and Human Services-Newborn Bloodspot Screening Program and Part C EI
- Parent-Infant Program for Deaf and Hard of Hearing Children and their Families
- ND Early Hearing Detection and Intervention



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5

The Focus of our Efforts

In 2023, Supplemental funding focusing on Language Acquisition.

- Strengthening collaboration-engage local and state early childhood providers
- Build state EHD system capacity to track and assess language acquisition
- Develop a plan to analyze data and respond to identified disparities

In 2024, EHD Innovation Project-ND focused on using Peer learning collaboratives (7 ECHO sessions)

- Need to improve statewide education
- Improve understanding of the EHD system, language acquisition, and increase collaboration from ND EHD stakeholders
- Develop and document statewide policies and procedures for language acquisition.



6

North Dakota Strengths

- Small state with a small population
- Community-centered, family-focused approach to services
- Commitment to rural and frontier communities!
- Strong partnerships amongst state partners
- Established relationships with audiologists, NICUs, and medical providers
- Alignment within ND Health and Human Services supporting system-level coordination



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7

North Dakota Challenges

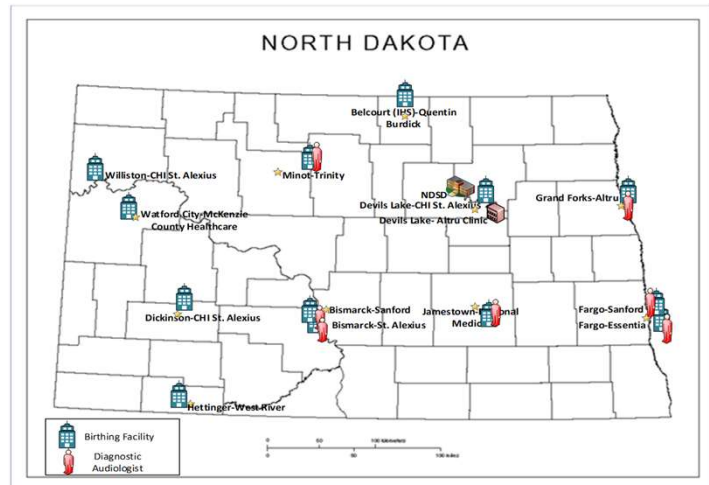
- Rural state and very spread apart.
- Equity in services.
- Workforce shortages across health, education, and human services.
- Recruitment and retention of specialized providers.
- Long travel distances impacting service delivery efficiency.
- Data-sharing and cross-system coordination complexities
- Ensuring consistency in practice across regions.
- Not everyone has access to the same care across the state.



8

Challenge for 3 Month Marker

- Blue Buildings- Hospitals
- Red People- Where auditory brainstem response testing (ABR) is located.
- Families in the Western part of the state must travel 2 or more hours for diagnostic audiology appointments, as well as other areas in the state.

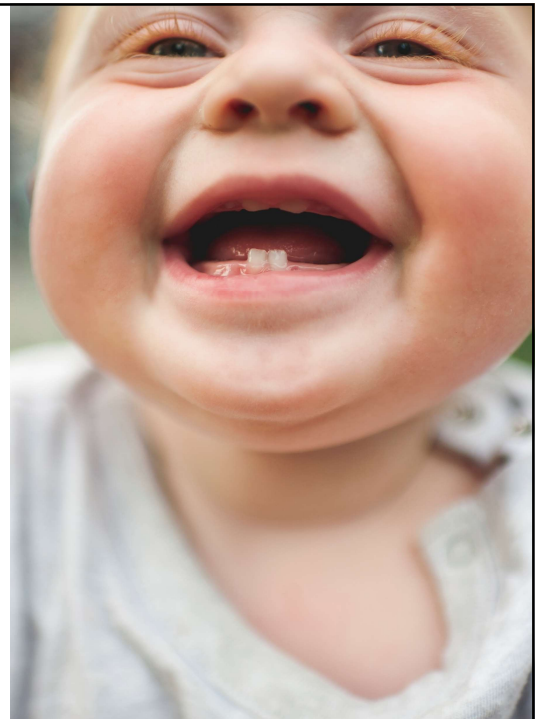


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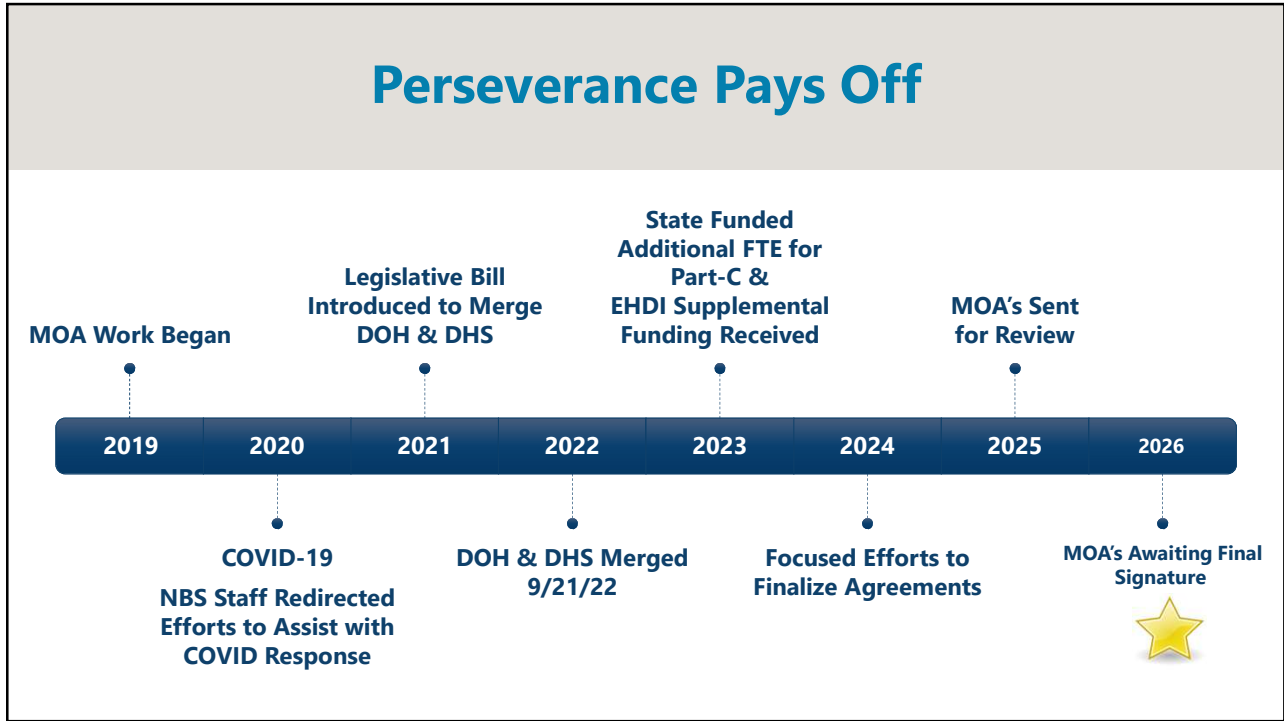
9

Memorandum of Agreement

- MOA began in 2019
- Purpose: Outlines the points of agreement within the defined scope of services between the listed parties to ensure timely identification and support for infants with hearing loss.
 - Assure:
 - Early Hearing Detection & Intervention (EHDI) Benchmarks
 - Screening by 1 month of age
 - Diagnostic evaluation by 3 months for infants who do not pass screening
 - Enrollment in Early Intervention by 6 months for infants identified with hearing loss
 - Data Sharing Commitment
 - Cross-agency data sharing is essential to:
 - Monitor and evaluate program effectiveness
 - Inform policy and program improvements
 - Strengthen coordination across systems
 - Streamline services for families
 - Support optimal health, language, and communication development



10



11



12

Parent Infant Program and Part C Training Data



Before training:

60% reported low or no awareness
 Only 20% reported high understanding
 Clear need for structured cross-system training
 Indicates gaps in referral knowledge and collaboration



After training:

95% reported high understanding after training
 No participants reported low understanding
 No participants were unaware of EHDI-PIP services
 Significant shift from baseline knowledge levels

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13

EHDI and Part C Referral Pathways

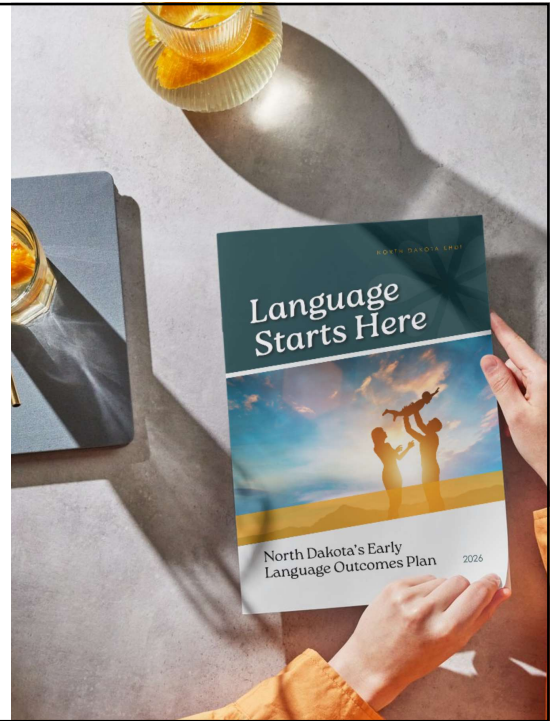
- OZ Training through EHDI
 - Reaching out to individual regions right now
 - Goal: Train each service coordination unit and EI agency
- Meet weekly to talk through cases.
- EI and EHDI going through OZ cases for loss to follow up.



14

North Dakota's Early Language Outcomes Plan

- **The Gap:** Most EHDI systems track screening, diagnosis, & enrollment. Very few track language outcomes.
- **The Solution:** A statewide framework connecting ND EHDI, Part C, & NDSD through clear roles, shared data, & systematic language monitoring.
- **The Result:** A system that doesn't just identify kids. It follows them all the way to language outcomes.



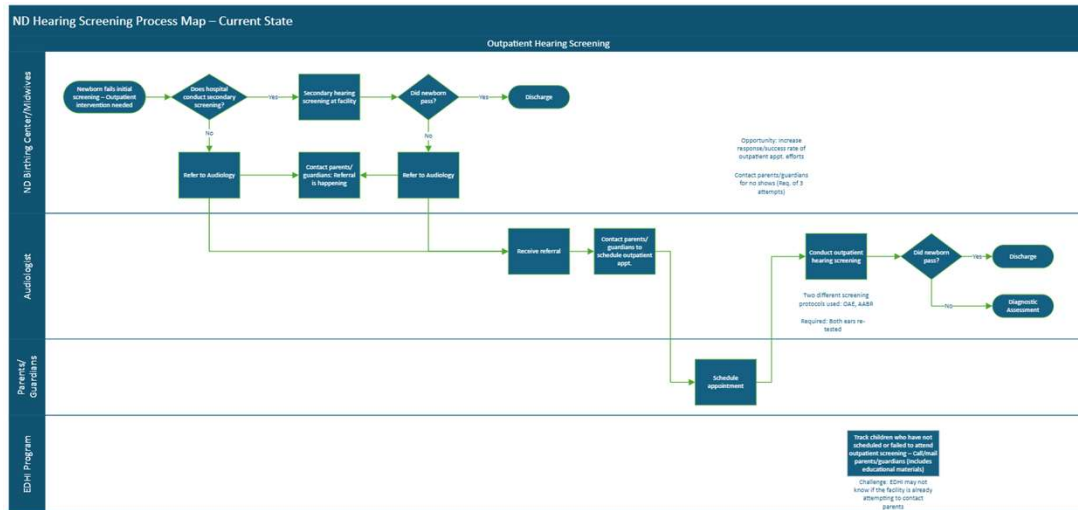
15

EHDI, Part C Collaboration & Newborn Screening



16

Newborn Hearing Screening Process Map



17

Newborn Hearing Screening Process Map Outcome

Challenges

- Limited Prenatal Education
- Parents unaware of screening or results and may not follow-up if child refers
- Staff not well trained
- No flags to notify PCP if patient refers
- Limited audiologists trained in bone conduction ABR

Opportunities

- Standardized prenatal education
- Provider education
- Midwife education/collaboration
- Outpatient hearing screening – improve facility follow-up
- Provide screening and refer data to hospitals

18

Prenatal & Newborn Screening Brochure

What to Expect: Health Screenings for You and Your Baby

Before Pregnancy

- **Carrier Screening:** A blood or saliva test for parents-to-be that checks their risk of having a child with specific genetic conditions.

First Trimester (Weeks 1-13)

- **Non-Invasive Prenatal Screening:** A blood test that checks for certain genetic conditions.
- **Routine Blood Work:** Tests your blood type, iron, sugar and checks for infections.

Second Trimester (Weeks 14-27)

- **Triple or Quad Screen:** A blood test that can find certain birth conditions.
- **Ultrasound:** A scan to check your baby's growth and development.
- **Glucose Screening:** A test to check for diabetes during pregnancy.

Third Trimester (Weeks 28-40)

- **Group B Strep Test (Weeks 35-37):** A swab test to check for a common bacteria that could harm your baby during birth.

After Birth (First 48 hours)

- **Newborn Screenings:** Includes a blood spot, hearing and heart screening to check for conditions that can harm your baby.

Well Baby Visit (2 days-1 week after birth)

- A check of your baby's health and growth.
- Ask about your baby's screening results.

Fourth Trimester (First weeks after birth)

- Watch your baby to make sure they are healthy and growing.
- Go to your own checkups. Taking care of yourself is important too.




LEARN MORE
Scan the QR code or visit the Newborn Screening and Expectant Parent webpage to learn more about these important tests.

hhs.nd.gov/newborn-screening/parents/expectant

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A Guide to Prenatal and Newborn Screening

Everything you need to know about you and your baby's first tests.



Why does my baby need newborn screening?

A baby can have a condition even if they look and act healthy at birth. There is often no family history of these conditions and babies must be identified early and treated quickly to prevent serious health problems, disability and even death.

"When I first heard my son's newborn blood spot screen came back positive, it was hard to believe because he looked so healthy and he was just perfect! It was not easy to come to terms with the fact that he would live with the diagnosis of Phenylketonuria (PKU) for the rest of his life; however, without newborn screening, my son could have developed serious health problems that led to intellectual disabilities, behavior issues and brain damage. Because of newborn screening, he has an amazing quality of life and reminds us on a daily basis of what a miracle he is."

- Abbi, Mother of a son with PKU

Be sure to ask for your baby's newborn screening results at their first newborn visit!

Newborn Screening is a simple step toward a healthy start for your baby!

When will my baby have newborn screening?

All three newborn screening tests are best performed 24 hours after birth. This timing helps to ensure testing is accurate and affected babies are found early.

What conditions will my baby be screened for?

State law requires newborn blood spot and heart screening for babies born in North Dakota; however, parents may refuse the testing. For a complete list of health conditions, scan the QR code or visit the Newborn Screening website located on the back of this brochure.

When can I expect results?


Results for the hearing and heart screening will be available on the same day the screening occurs and should be shared with you right away.

Blood spot screening results will be available within the first week of life and will be shared with your baby's health care provider.


If your baby has a result that requires follow-up, your baby's health care provider will contact you for further testing.

"We're so grateful for the newborn hearing screen—it gave us answers we didn't even know we needed. The screening did not create a diagnosis, it simply helped to discover our son's diagnosis of hearing loss sooner. Because of early identification, we were able to pursue hearing aids and begin learning sign language as a family and eventually decided to move forward with cochlear implants - all during a crucial window for language development. Today, we have a happy, curious toddler who babbles, giggles, and is learning new words every day in both speech and sign! Early detection gave him (and us) the tools to support his development from the very beginning."

- Marly, Mother of a son with Bilateral Sensorineural Hearing Loss



Newborn Screening Brochure



Upcoming Events

SAVE THE DATE

North Dakota Midwife Collaborative
 April 7, 2026 - 9:00am-4:00pm
 Magic City Discovery Center, Minot, ND

The North Dakota Newborn Screening Program is excited to invite you to a one-day learning collaborative, filled with opportunities for sharing, learning and community building. Come ready to share your wisdom with others and learn from them as well. We look forward to seeing you there!

Newborn Screening Conference

Save the Date - April 22, 2026

8:00 a.m. - 4:30 p.m. | Bismarck State College

21

EHDI, Newborn Screening, and Part C Collaboration

Newborn Screening Advisory Committee

- Early Intervention presentation at upcoming meeting

22

Other Collaboration Efforts

- Inclusion in Organization Meetings
 - Part C Meetings
 - Parent Infant Program Meetings
 - EHDI Meetings
 - Newborn Screening Advisory Meetings
- Set steady meetings for all of us to meet.
- Set reachable goals for ourselves.
- If there is a problem. We solve it!
Communication is key.



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23



24

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