Mike DeWine, Governor Jon Husted, Lt. Governor

Bruce Vanderhoff, MD, Director

Sunset Review Committee Written Testimony Lisa Griffin, Director of Government Affairs **Ohio Department of Health** July 30, 2024

Chair Wilkin, Vice Chair Hillyer, and Members of the Sunset Review Committee,

The Ohio Department of Health (ODH) respectfully requests that the following entities be sunset in the Ohio Revised Code:

- Director of Health's Advisory Group on Violent Deaths
- Infant Hearing Screening Subcommittee

Director of Health's Advisory Group on Violent Deaths

While ODH is asking that the Director of Health's Advisory Group on Violent Deaths be sunset in Ohio Revised Code, an advisory committee, through this formally recognized in law capacity or informal capacity, is a requirement of our federal National Violent Death Reporting System (NVDRS). ODH will continue to utilize an informal advisory committee of partners that work to address violence and implement prevention measures. There is no federal requirement for this advisory committee to be recognized in Ohio law.

As background, ODH established the Ohio Violent Death Reporting System (OH-VDRS) in 2009. This system collects information from multiple sources to better understand the circumstances surrounding violent deaths. The data collection began with violent deaths occurring as of January 1, 2010. The Centers for Disease Control and Prevention (CDC) considers a violent death to include deaths related to suicide, homicide, legal intervention, unintentional firearm, terrorism, and undetermined intent. The OH-VDRS work is funded through a cooperative agreement with the CDC and is part of the National Violent Death Reporting System (NVDRS).

OH-VDRS links information from data sources, such as death certificates, coroner and medical examiner reports, and law enforcement reports, to create a comprehensive record of the incident. The database can be used to study violence trends, identify risk factors associated with violence, and develop intervention and prevention strategies.

The Director of Health's Advisory Group does not have funds allocated to it for the planning and organization of meetings and is part of the cooperative agreement work through the CDC.

Infant Hearing Screening Subcommittee (IHSS)

ODH respectfully requests that the Infant Hearing Screening Subcommittee (IHSS) be sunset. The board contains at least twenty-two members appointed by the Children and Youth with Special Health Care Needs Medical Advisory Council (previously named the Medically Handicapped Children's Medical Advisory Council). The twenty-two or more members include various medical professionals, audiologists, speech-language pathologist, nurses from neonatal nurseries, representatives of the organizations for persons who are deaf or hearing impaired, the health insurance industry, and representatives from the Ohio Department of Health, Department of Education and Workforce, and Department of Medicaid.

The IHSS has struggled to reach a quorum of members for in-person meetings. Since August 2022, only two of the last eight scheduled meetings were able to achieve quorum and meet.

The ODH Infant Hearing Program is responsible for implementing the Infant Hearing Screening Subcommittee. The Infant Hearing Screening Subcommittee (IHSS) in law is tasked with consulting with the director of health regarding the administration of code sections involving newborn and infant hearing screening; advising and making recommendations regarding proposed rules; consulting with the director of health and advise and make recommendations regarding program development and implementation for identifying newborn and infant hearing impairment, identification of locations where hearing evaluations may be conducted, recommendations for methods and techniques of hearing screening and evaluation, and referral and procedures to encourage follow-up hearing care who do not pass the hearing screening.

Since the inception of Universal Newborn Hearing Screening and the IHSS was enacted in the state of Ohio, the practices, procedures, and requirements have remained unchanged. The IHSS was established to implement sections 3071.503-3701.509 of the Revised Code. At present, the Infant Hearing Program has been operating for 20 years with very few changes to the ORC referenced under the IHSS.

Recently, the ODH Infant Hearing Program hired a Parent Consultant to help ensure the needs of parents were being met and to bridge the gap present in parent involvement with the IHSS unable to meet regularly.

During the COVID-19 pandemic, an audiology workgroup known as COACH (Coalition of Ohio Audiologists and Children's Hospitals) was established and served as a work group to help implement emergency triage procedures to help execute the functions for the Infant Hearing Program, along with several other procedures and documented resources. The stakeholder support surrounding the Infant Hearing Program is abundant and is best served in workgroup environments to accomplish quality improvement initiatives.

The Infant Hearing Program is able to informally bring together stakeholders continually for feedback and support in meeting program requirements and providing technical assistance and support. Additionally, the Infant Hearing Program staff remains actively involved in several stakeholder groups to ensure program advancement and needs are being met.

Lastly, the Infant Hearing Program receives HRSA funding to meet programmatic goals for Universal Newborn Screening and Follow-up. Part of the federal grant deliverables requires an annual (at minimum) stakeholder meeting. If the Infant Hearing Screening Subcommittee is sunset, ODH would convene at least one informal stakeholder meeting to meet the requirements of the federal grant to complete proposed quality improvement initiatives.

The sunsetting of the Infant Hearing Screening Subcommittee will allow the program more flexibility to include stakeholders in different and meaningful ways and settings to continue the important work of ODH. The ODH Infant Hearing Program will continue to achieve successes and improve infant hearing screening to better serve Ohio families.

Chair Wilkin and Members of the Sunset Review Committee, thank you for your review of the above sunset requests. Thank you for your partnership.