

ABSTRACT

Promotion of Early Pediatric Hearing Detection Through Patient Navigation

Congenital hearing loss is the most common sensory disorder affecting 3 per 1000 infants. The consequences of delayed diagnosis of hearing loss include significant delays in language, cognitive, and social development with profound effects on education and employment. Universal standards dictate that infants are screened at birth and abnormal screening is followed with definitive testing no later than three months of age. Obtaining diagnostic testing can be complicated by poor care coordination. There is no established method to coordinate care following failed newborn hearing screening. Patient navigation, which uses lay healthcare workers to facilitate adherence, is an evidence-based approach that improves timely access to care but has not been studied in infant hearing. The objective of this thesis is to assess the role of patient navigation in supporting delivery of care to patients facing hearing healthcare inequities and to implement patient navigation into a statewide hearing program. This thesis contains 3 main parts: 1. Patient Navigation in the Medically Underserved: A Systematic Review: The purpose of this research is to systematically assess the efficacy of patient navigation and similar programs to improve diagnosis and treatment of diseases affecting medically underserved populations. 2. Promotion of Early Pediatric Hearing Detection Through Patient Navigation: A Randomized Controlled Clinical Trial: The aim of this research is to assess the role of a patient navigator intervention to decrease infant non-adherence to obtain audiological testing following failed hearing screening, compared to those receiving the standard of care. 3. The HIGHeR (Helping Infants Get Hearing Resources) Navigation Program: This program aims to perform a hybrid effectiveness/implementation study on patient navigation within the state-funded early hearing detection and intervention system to assess 1) effectiveness of the navigation program to decrease statewide hearing testing non-adherence, 2) implementation factors, and 3) cost-effectiveness and sustainability of navigation within a state-supported system.