The Use of Telepractice As a Method of Service **Delivery For Children With Hearing Loss**

The Problem

Approximately 1.7 per 1000 babies screened in the United States are born with hearing loss (CDC, 2020). IDEA (2004) mandates that services needed to improve the educational outcomes for these children be provided as appropriate. Universal newborn hearing screening programs, early identification, and early intervention services have been found to have a positive impact on outcomes for children with hearing loss. Although more and more families of children with hearing loss have access to these services, barriers still exist to accessing timely and appropriate care. Some of these barriers include geographic distance and availability of qualified professionals.

Results

- Telepractice services are comparable to in-person services. Measured outcomes from telepractice services were found to be similar to and in some cases better than in-person services.
- Telepractice services can be more accessible than in-person services. Barriers such as geographic location and access to qualified personnel may not have as great a negative impact on telepractice services as on in-person services.
- Telepractice services have the potential to reduce the cost of services. Depending on the amount of service required and the amount of travel required for service, cost savings can be significant.
- Telepractice services have no significant negative impact on service time.
- Caregivers and providers are generally satisfied with telepractice services. Caregivers and providers felt comfortable in the telepractice environment, appreciated the convenience that telepractice services affords, and would use telepractice services if made available to them. Difficulties reported with telepractice services include internet connectivity and some participants initially had difficulty with equipment usage.

Due to great advances in technology, telepractice as a method of service delivery has become increasing common and widespread. With the increase in telepractice services in the field of education and other related services, it is important that research be conducted to determine the efficacy of its use. The purpose of this study was to examine the use and efficacy of telepractice as a method of service delivery for children with hearing loss. It seeks to answer the question, "How do services provided to children with hearing loss delivered via telepractice compare with traditional in-person services?"

Purpose of the Study

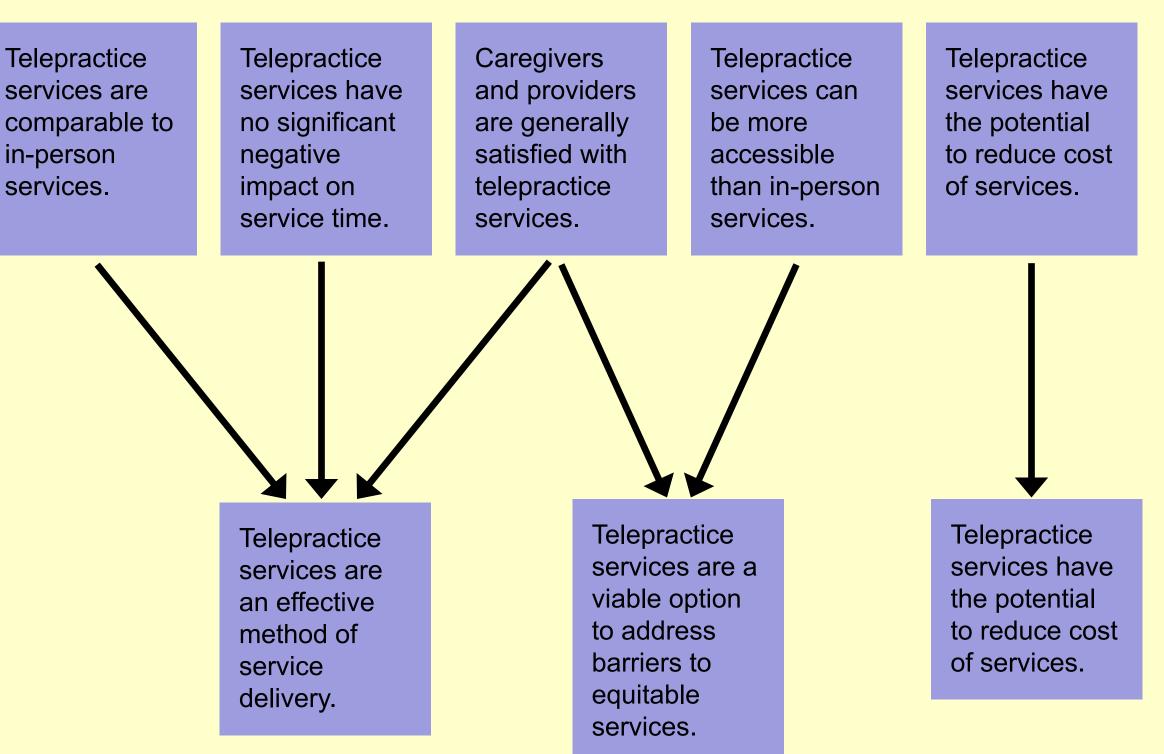
Three themes were derived from the findings of the study:

1. Telepractice services are an effective method of service delivery.

2. Telepractice services are a viable option to address barriers to equitable services.

3. Telepractice services have the potential to reduce cost of services.

The relationship of the findings to themes are depicted in the graphic below.



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Methodology

The methodology of this study used a qualitative research method to examine current research related to the use of telepractice as a method of service delivery for children with hearing loss. An extended literature review was conducted to synthesize, analyze and interpret research outcomes. Data collection for the study was performed with searches using EBSCO Information Services through the Pearson Library at California Lutheran University. Keyword phrases included the following: telepractice, telemedicine, teletherapy, telehealth, deaf or hard of hearing, hearing impaired, d/hh, audiology, audiometry, speech therapy, speech pathology, speech language pathology. 12 studies were selected based on the following criteria: were peer-reviewed articles of empirical research studies; research was conducted from the year 2000 to the time of this study; and researchers investigated the use of telepractice services with children with hearing loss.

Implications

- Local educational agencies and/or school districts should investigate the use of telepractice services in providing services to children with hearing loss, particularly if they are having difficulty employing qualified DHH educators.
- Teacher preparation programs should include pedagogy in the area of telepractice. Not only would this be to address shortages of qualified professionals and other barriers to services, but unlike when Covid-19 first hit our nation, to be better prepared to deal with emergency situations in the future.
- Further research needs to be conducted. There is a lack of sufficient research in the use of telepractice services with children with hearing loss. In the field of deaf education, a few studies were found in early intervention services, however no studies were found in the use of telepractice services with children in K-12 education.