

Recommendations for Performing Hearing Screening Safely During COVID-19

The purpose of this tip sheet is to provide guidance to help minimize the risk of COVID-19 transmission when performing hearing screening in Head Start programs. This information is based on current knowledge and guidelines from professional associations and may change as we learn more about COVID-19.

Hearing screening is an important part of a child's regular health care. It supports children's learning and school success. We know many young children may have missed their hearing screenings during the COVID-19 pandemic. Because children may not be receiving routine health care, Head Start programs can help families complete screenings safely. Programs may continue to conduct in-person hearing screening in a Head Start or Early Head Start center during the COVID-19 pandemic if they determine it is feasible, reasonable, and safe to do so. Be sure to engage with families before and after the screening so you can answer any questions they have about the process or the results.

Otoacoustic emissions (OAE) and pure tone audiometry (PTA) are the two evidence-based methods that screen young children's hearing. For more information about these methods, refer to the [Hearing Screening Fact Sheet](#). There are no evidence-based methods for virtually conducting hearing screenings with children.

1. Screen for Symptoms of or Exposure to COVID-19

- Follow your program's protocols to screen for illness.
- Do not admit anyone to your facility who is ill or reports exposure to COVID-19.
- Consult local health authorities to determine if it is safe to work with hearing screeners from outside your program based on local rates of community transmission.
- If you plan to work with community-based hearing screeners, inform them about your program's protocols and confirm they agree to follow these requirements.

2. Identify a Suitable Space to Conduct Your Hearing Screening

- Choose a space away from other activities to limit the amount of unnecessary noise.
 - Ensure indoor areas are well-ventilated, moving indoor air outside and bringing fresh air inside the room. You may want to consult a licensed heating, ventilation, and air conditioning (HVAC) expert.
 - Check that all items and furnishings in this area are made of nonporous materials that can be easily cleaned and disinfected.
 - It is optimal to pick an area with, or close to, a hand-washing sink.
 - If possible, select a space with separate entrance and exit doors.
- Screening outdoors with OAE equipment is a reasonable option, weather permitting and depending on the air quality.
 - Avoid any areas that are dirty or where sand may get on the equipment.
 - Each device is unique in terms of its sensitivity to external noise, including wind, but most should work fine outside.
 - Contact the manufacturer with questions or concerns about your device.



3. Use Masks and Other Protective Equipment

- All adults and children over the age of 2 should wear masks.
- For proper fit, masks should fit securely so they cover the mouth and nose without gaps.
- For additional protection, screeners may also wear a face shield or goggles in addition to, but not instead of, a mask.

4. Maintain Physical Distance

- Limit the number of adults and children in the screening area to only those essential to the screening.
- Maintain six feet of distance between people except when closer contact is essential to the screening.
- It is preferable to limit screening time to 15 minutes or less.

5. Enforce Hand Hygiene

- Everyone should wash their hands before and after each screening.
- If soap and water are not available, use a hand sanitizer with at least 60% ethyl alcohol (ethanol).

Whenever staff and families suspect a hearing problem, refer a child to their health care provider. The American Academy of Pediatrics, Office of Head Start, and Centers for Disease Control and Prevention strongly encourage families to schedule and keep regular well-child visits as the best way to promote good overall health.



6. Clean and Disinfect the Screening Space

- Clean and disinfect at the beginning and end of the day.
- Clean and disinfect after screening each child.
- Clean and disinfect screening equipment, including wiping the outside of the machine and cord.
- Use an Environmental Protection Agency-registered disinfectant recommended for use against COVID-19. Refer to [List N: Disinfectants for Coronavirus \(COVID-19\)](#) to find products.
- If administering OAE:
 - Always use new probe tips for each child screened.
 - Do not clean and reuse probes.
 - Use non-touch distractors if possible.
- If administering PTA:
 - Wipe the earphones using an alcohol-free antiseptic solution such as a hydrogen peroxide-based cleaner, or use disposable earphone covers for each child.
 - Try eliminating the possibility of transmission through toys with one of these options:
- Ask the child to clap when they hear the beep (if age appropriate).
- Use single-use toys.
- Increase the inventory of toys to have enough for each child.
 - Use only toys with hard plastic surfaces for ease of cleaning.
 - Designate a “used toy” bucket to store high-touch objects for cleaning.

When using PTA, consider placing yourself behind the child’s chair to avoid facing the child.

7. Maintain Records

- Maintain a record of each child and adult entering the screening area by date and time.

For more information:

- National Hearing Conservation Association [COVID-19 Resource Page](#)
- American Speech-Language-Hearing Association [Infection Control Resources for Audiologists and Speech-Language Pathologists](#)
- American Academy of Audiology [COVID-19: Moving Toward Full Audiology Services?](#)



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