

From: [Craig Boothe](#)
To: [Dinardo, Molly \(SBOH\)](#)
Subject: RE: Otoacoustic emission screening (OAE) - Change in Rule WAC 246-760-030
Date: Wednesday, July 26, 2023 8:49:55 AM

External Email

Hi Molly, Thanks again for taking my call this morning, I learn a lot from our chat. Please consider this email back to you is a formal request for petition for rule change for WAC-246-760-030.

Have a great day and thanks again for your help.

Craig

Craig Boothe
President Lake Chelan Lions Club
Sight and Hearing Chairman
www.lakechelanlions.org
www.lakechelanlionsclubfoundation.org
craigb47@hotmail.com
425-241-1401

From: [Dinardo, Molly \(SBOH\)](#)
Sent: Wednesday, July 26, 2023 8:27 AM
To: [Craig Boothe](#)
Subject: RE: Otoacoustic emission screening (OAE) - Change in Rule WAC 246-760-030

Hi Craig,

Thanks for sending this information along. Are you still available to connect around 8:30 am this morning? If yes I can give you a call then.

Best,

[Molly Dinardo, MPH \(she/her\)](#)
Health Policy Advisor
Washington State Board of Health

Molly.Dinardo@sboh.wa.gov

564-669-3455

[Website](#), [Facebook](#), [Twitter](#)

From: Craig Boothe <craigb47@hotmail.com>

Sent: Wednesday, July 26, 2023 8:20 AM

To: Dinardo, Molly (SBOH) <Molly.Dinardo@sboh.wa.gov>

Subject: Otoacoustic emission screening (OAE) - Change in Rule WAC 246-760-030

External Email

Molly here is what was sent to Bill Lundin by Ric Giles to review with suggested new language for the OAE screening in schools, the language in italic underline are not yet approved by the department of Health.

Craig

The full ASHA text can be found here https://www.asha.org/Practice-Portal/Professional-Issues/Childhood-Hearing-Screening/#collapse_1

WAC 246-760-030

What are the auditory acuity screening standards for screening equipment and procedures?

(1) Schools shall use auditory screening equipment providing tonal stimuli at frequencies at one thousand, two thousand, and four thousand hertz (Hz) at hearing levels of twenty decibels (dB), as measured at the earphones, in reference to American National Standards Institute (ANSI) 1996 standards.

(2) Qualified persons will check the calibration of frequencies and intensity at least every twelve months, at the earphones, using equipment designed for audiometer calibration.

(3) Or Otoacoustic emission screening (OAE) equipment may be used for initial screening with auditory screening equipment for any student that has a "Fail/Refer" result.

WAC 246-760-040

What are the procedures for auditory acuity screening?

(1) Schools shall screen all children referenced in WAC [246-760-020](#) on an individual basis *by using*

(a) Otoacoustic emission (OAE) screening and, or

(b) Auditory screening equipment at one thousand, two thousand, and four thousand Hz.

(2) The screener shall:

(a) Follow manufacturer guidelines for OAE screening. Children who receive "Fail/Refer" results with OAE shall be screened

using auditory screening equipment. Present each of the tonal stimuli at a hearing level of twenty dB based on the ANSI 1996 standards;

(b) Conduct screenings in an environment free of extraneous noise;

(c) If at all possible, complete screening within the first semester of each school year;

(d) Place the results of screenings, any referrals, and referral results in each student's health and/or school record; and

(e) Forward the results to the student's new school if the student transfers.

Reason for OAE screening be included in any rule change;

- OAE's can screen school age children much more rapidly than using pure tones, saving more time for class room instruction and allowing screeners to complete the auditory screening requirements much quicker.
- OAE requires no active participation from the students.
- Instructions on how to respond to a faint sound are not needed or misunderstood.
- Students who respond or don't respond to pure tones because they watch others doing so is avoided, reducing false positive or false negative screening results.
- Parents notified that their child failed a hearing screening due to false "fail" pure tone screening are reduced.
- Incidence of false "fail/refer" screening results are still possible due to ear canal blockage or transient middle ear issue.
- Incidence of false "pass" are not, only normal hearing can produce a "pass" screening result.
- Any child who receive a "fail/refer" screening should then be screened using traditional pure tone screening.
- OAE screening is required to quickly screen newborn infants before release from the hospital it just makes sense to use them to screen school age children as well.

Edited Recommendations taken from the ASHA website, for background information only;

Otoacoustic Emissions (OAE)

Otoacoustic emissions (OAEs)—either transient-evoked OAEs (TEOAEs) or distortion product OAEs (DPOAEs)—are measured using a sensitive probe microphone inserted into the ear canal. OAEs are a direct measure of outer hair cell and cochlear function in response to acoustic stimulation and yield an indirect estimate of peripheral hearing sensitivity. OAEs do not technically test an individual's hearing, but rather OAE results reflect the performance of the inner ear mechanics.

Factors to Consider

- With OAE protocols taking less time than pure tone protocols, more children may be screened on a given day (Kreisman, Bevilacqua, Day, Kreisman, & Hall, 2013).
- Personnel may include an audiologist, SLP, nurse, or other trained volunteer screener. Equipment can be automatic with no decision making required regarding equipment parameters or pass/fail criteria.
- Screening in quiet environments typically reduces the amount of time needed to complete an OAE hearing screening. A reasonable amount of noise may be present without interrupting the OAE screening process. OAE equipment may indicate when the screening environment is too noisy.
- OAEs will usually be absent when there is outer or middle ear dysfunction.
- OAEs may miss some cases of educationally significant mild and mild-moderate hearing loss or ANSD (AAA, 2011).
- The use of OAE technology may be appropriate for screening children who are difficult to test using pure-tone audiometry (those who cannot respond to traditional pure tone or conditioned play techniques; Stephenson, 2007)

OAE Screening Procedure

- Place small probe in the ear canal to deliver the sound stimuli.
- Read results. Automated OAE screening units will analyze the emission and provide a result of either "pass" or "fail/refer." Screeners other than audiologists should not independently change the parameters of the test equipment or provide interpretation of findings.

TEOAEs: Clicks or tone bursts are used as the stimuli at one level—for example, 80 dB SPL. Normal distributions for this condition for normal hearing are documented in the literature (Hussain, Gorga, Neely, Keefe, & Peters, 1998).

DPOAEs: Pure tones are used as the stimuli. Normal distributions for this condition for normal hearing are documented in the literature (Gorga et al., 1997).

OAE Screening Results

Screening programs that use OAE equipment often use the manufacturer's pre-set stimulus and pass/fail parameters, which will vary. This allows for participation by screeners who do not have the background or knowledge to adjust or interpret result parameters. When automated equipment is used, findings will be recorded as either "pass" or "fail/refer." For children who could not complete screening due to lack of cooperation, internal or external noise, or other

reasons, the findings are recorded as "could not scree

Craig Boothe

President Lake Chelan Lions Club

Sight and Hearing Chairman

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craigb47@hotmail.com

425-241-1401

From: [Dinardo, Molly \(SBOH\)](#)
To: craigb47@hotmail.com; [Davis, Michelle \(SBOH\)](#)
Bcc: [Steele, Mike \(LEG\)](#); [Steele, Mike \(LEG\)](#)
Subject: RE: WAC on hearing tests in Schools
Date: Tuesday, July 25, 2023 12:15:00 PM
Importance: High

Hi Brenda,

Thanks so much for connecting us. Moving you to bcc to avoid further cluttering your inbox.

Hi Craig,

It's nice to meet you virtually.

Please let me know if you would like to submit your inquiry to Rep Steele's office below as a petition for rulemaking, or if you would like to submit a separate request and any additional supporting information directly to the Board for consideration. I spoke with someone from the NW Lion's Foundation back in March regarding a similar inquiry, but never heard back. Below is the information that I provided them with (note the dates were based on the timeframe we received their voicemail). If you have any questions about the information below or about your request, do let me know.

Best,

Molly Dinardo, MPH (she/her)
Health Policy Advisor
Washington State Board of Health
Molly.Dinardo@sboh.wa.gov
564-669-3455
[Website](#), [Facebook](#), [Twitter](#)

Hello,

Thanks for reaching out to our team at the State Board of Health and for expressing your interest in updating the school hearing tests listed in [Chapter 246-760 WAC](#).

As I mentioned, our next regularly scheduled [Board meeting](#) will be **Wednesday April 12th**. This will be a hybrid meeting, with both virtual and in-person options for attendance. Our next Board meeting after April is scheduled for June 14th and will also be hybrid.

If you'd like to file a formal petition to the Board requesting to amend Chapter 246-760 WAC, you can do so by following the process outlined on the Board's website [here](#). Note that any member of the public may petition a state agency to adopt, repeal, or amend a rule within its authority. Once

you send your petition to the Board, the Board has 60 days to respond to the petition, and may take one of the following actions at its meeting where the petition is on the agenda:

- Deny the request and explain why the request was denied
- Describe alternative steps the Board will take
- Initiate rulemaking

I encourage you to review [the Board's petition policy](#) to learn more about the petitioning, response, and appeal process. You can also find information on the Board's rulemaking process under the [Agency Overview](#) section of our website.

To submit a petition for rulemaking, [please download and complete the petition form](#) from the Office of Financial Management's (OFM) website. Please let me know if you have any questions about completing the form. Once you complete the form, you can either email your petition to wsboh@sboh.wa.gov or you may email it to me directly. You may also include any supplemental materials that you'd like to include with the petition form for the Board's review. Any materials you submit will be included in the Board meeting packet materials and posted to the Board's website.

The deadline for the Board to post its draft meeting agenda is next week, Wednesday March 29th.

You may also [sign up for public comment](#) at our upcoming Board meeting to share more about your request. Note that the Board does not take testimony on petitions, but you can speak to your petition during the public comment section of the meeting. The information to register for virtual participation will become available on Wednesday March 29th with the draft meeting agenda.

From: Glenn, Brenda <Brenda.Glenn@leg.wa.gov> **On Behalf Of** Steele, Rep. Mike
Sent: Tuesday, July 25, 2023 12:04 PM
To: craigb47@hotmail.com; Dinardo, Molly (SBOH) <Molly.Dinardo@sboh.wa.gov>
Cc: Steele, Mike (LEG) <mike.steele@leg.wa.gov>
Subject: FW: WAC on hearing tests in Schools
Importance: High

External Email

Molly and Craig,

This email serves as a way to introduce you to each other.

Craig Boothe
President Lake Chelan Lions Club

Sight and Hearing Chairman
www.lakechelanlions.org
www.lakechelanlionsclubfoundation.org
craigb47@hotmail.com
425-241-1401

Molly Dinardo, MPH (she/her)
Health Policy Advisor
Washington State Board of Health
Molly.Dinardo@sboh.wa.gov
564-669-3455
[Website](#), [Facebook](#), [Twitter](#)

Craig will work with you Molly on this or let you know who will be contacting you from the Lions to work with you on this issue.

Molly, Rep. Steele and I really appreciate your follow through on this issue!

Brenda Glenn, Sr. Executive Legislative Assistant
For Deputy Minority Leader Rep. Mike Steele
360-786-7832

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From: Dinardo, Molly (SBOH) <Molly.Dinardo@sboh.wa.gov>

Sent: Tuesday, July 25, 2023 11:33 AM

To: Glenn, Brenda <Brenda.Glenn@leg.wa.gov>

Cc: Davis, Michelle (SBOH) <Michelle.Davis@sboh.wa.gov>; Steele, Rep. Mike <Mike.Steele@leg.wa.gov>

Subject: RE: WAC on hearing tests in Schools

Importance: High

CAUTION: External email.

Good Afternoon Brenda,

I hope that you are well.

My name is Molly Dinardo, and I'm a Health Policy Advisor for the Washington State Board of Health. In my role, I support the Board's policy and rulemaking work related to vision and hearing screening in schools. I'm writing to follow up on the email correspondence below. Has Rep Steele's office received a response or additional follow-up from the constituent regarding interest in using otoacoustic emission screening (OAE) equipment for hearing screenings in schools?

I ask because the Board has its next full [meeting scheduled](#) for Wednesday, August 9th. Our team is currently in the process of finalizing our draft meeting agenda for posting and distribution. I'm curious if our team should expect to hear from the constituent/if it's a topic that might be brought to the Board at the August meeting. Any additional information that you might be willing to share would be greatly appreciated.

Thank you in advance for your time and consideration, and I look forward to hearing from you.

Best,

Molly Dinardo, MPH (she/her)
Health Policy Advisor
Washington State Board of Health
Molly.Dinardo@sboh.wa.gov
564-669-3455
[Website](#), [Facebook](#), [Twitter](#)

From: Davis, Michelle (SBOH) <Michelle.Davis@sboh.wa.gov>
Sent: Tuesday, July 18, 2023 9:13 PM
To: Steele, Mike (LEG) <mike.steele@leg.wa.gov>
Cc: Dinardo, Molly (SBOH) <Molly.Dinardo@sboh.wa.gov>
Subject: RE: WAC on hearing tests in Schools

Hi Brenda and Representative Steele,

Thank you for your email. I was out of the office last week, please excuse the delay in my response.

The rulemaking for Chapter 246-760 WAC, auditory and visual standards for school districts, falls under the State Board of Health's (Board) authority ([RCW 28A.210.020](#)). Each board of school directors then has the authority to establish procedures to implement the Board's rules.

While the hearing sections of Chapter 246-760 WAC allow for some flexibility in which

screening technologies are used, the rule generally describes behavioral pure tone screening for auditory screening standards and procedures in schools. The constituent's proposed changes to WAC 246-760-030 below wouldn't necessarily require legislation, this proposal could be presented to the Board through a [petition for rulemaking](#) per the Administrative Procedures Act ([RCW 34.05.330](#)). The Board would review the petition within 60 days and determine whether to deny the petition in writing or accept the petition and initiate rulemaking.

In March, the Board received a voicemail from a Northwest Lion's Foundation representative regarding their interest in supplying schools with otoacoustic emission screening (OAE) equipment for hearing screenings. One of our policy advisors followed up with the representative by phone and shared information regarding the Board's petition for rulemaking process, but our team hasn't heard anything since the initial inquiry. If your constituent wants to propose their amendment to the rule, Board staff can process the below request as a petition for rulemaking and bring the proposed changes to the next full Board meeting. Please let us know if you would like to us to submit the inquiry as a petition for rulemaking, or if your constituent would like to submit their request and any additional supporting information directly to the Board.

Warm regards,

From: Glenn, Brenda <Brenda.Glenn@leg.wa.gov> **On Behalf Of** Steele, Rep. Mike

Sent: Tuesday, July 11, 2023 7:54 AM

To: Davis, Michelle (SBOH) <Michelle.Davis@sboh.wa.gov>

Subject: FW: WAC on hearing tests in Schools

External Email

Good morning Michelle,

I sent a constituent's email to the State Board of Education, but going through the WAC I am wondering if this is an area that the State Board of Health handles, (please see email chain below).

The constituent is proposing a Rule change because there is more up to date, better hearing testing equipment available then what is in the WAC. So my questions are: does the rule making for this [WAC \(246-760-030\)](#) fall under the State Board of Health or Education, and can the proposed change be made through rule or would it require legislation?

Thank you,

Brenda Glenn, Sr. Executive Legislative Assistant
For Deputy Minority Leader Rep. Mike Steele
360-786-7832

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From: Glenn, Brenda **On Behalf Of** Steele, Rep. Mike

Sent: Monday, July 10, 2023 1:53 PM

To: randy.spaulding@k12.wa.us

Subject: WAC on hearing tests in Schools

Good afternoon Randy,

I received J. Lee's out of office response with the suggestion to contact you. I know the Lions probably would like to be ready to give hearing tests to students once school starts, so this seems pretty time sensitive to m.

Rep. Steele received the email below from a constituent and he is wondering if the Rule needs to be changed or if a bill needs to be passed so the Lions can use more updated equipment to do hearing tests in the schools?

Brenda Glenn, Sr. Executive Legislative Assistant
For Deputy Minority Leader Rep. Mike Steele
360-786-7832

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CAUTION:External email.

Mike,

It is mandated by the state of WA that the schools on a yearly basis, screen all children K-5 and 7 for sight and hearing anomalies. The Lake Chelan Lions in conjunction with the school districts, have been screening children for sight and hearing problems for more than 25 years and have screened over 16,000 students here in the Lake Chelan Valley.

Last fall, the equipment we were using became unavailable to us for further use. Since then we have raised over \$30,000 to replace the equipment. We are now in the process of buying new screening equipment and would like to buy OAE hearing screeners, which are more advanced than the PT screeners now used. Using the more advanced OAE screeners, would be a step forward in screening the +!0000 students we need to test this year.

We are temporarily blocked from using the new type of equipment because WAC 246-760-030 which was written in 2007 prevents us from using it. The suggested language is before the board of education, but may not even looked at.

Here is the suggested new language for the OAE screening in schools, the language in *italics underline* have not yet approved by the department of education, but has been submitted to them for consideration and acceptance.

We would like your help in getting the new language in the rules changed.

Thanks for you help

WAC 246-760-030

What are the auditory acuity screening standards for screening equipment and procedures?

(1) Schools shall use auditory screening equipment providing tonal stimuli at frequencies at one thousand, two thousand, and four thousand hertz (Hz) at hearing levels of twenty decibels (dB), as measured at the earphones, in reference to American National Standards Institute (ANSI) 1996 standards.

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WAC 246-760-040

What are the procedures for auditory acuity screening?

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(a) *Otoacoustic emission (OAE) screening and, or*

(b) *Auditory screening equipment at one thousand, two thousand, and four thousand Hz.*

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(a) *Follow manufacturer guidelines for OAE screening. Children who receive "Fail/Refer" results with OAE shall be screened*

using auditory screening equipment. Present each of the tonal stimuli at a hearing level of twenty dB based on the ANSI 1996 standards;

(b) *Conduct screenings in an environment free of extraneous noise;*

(c) *If at all possible, complete screening within the first semester of each school year;*

(d) *Place the results of screenings, any referrals, and referral results in each student's health and/or school record; and*

(e) *Forward the results to the student's new school if the student transfers.*

Reason for OAE screening, not to be included in any rule change;

1. OAE's can screen school age children much more rapidly than using pure tones, saving more time for class room instruction and allowing screeners to complete the auditory screening requirements much quicker.
2. OAE requires no active participation from the students.
3. Instructions on how to respond to a faint sound are not needed or misunderstood.
4. Students who respond or don't respond to pure tones because they watch others doing so is avoided, reducing false positive or false negative screening results.
5. Parents notified that their child failed a hearing screening due to false "fail" pure tone screening are reduced.
6. Incidence of false "fail/refer" screening results are still possible due to ear canal blockage or transient middle ear issue.
7. Incidence of false "pass" are not, only normal hearing can produce a "pass" screening result.
8. Any child who receive a "fail/refer" screening should

then be screened using traditional pure tone screening.

9. OAE screening is required to quickly screen newborn infants before release from the hospital it just makes sense to use them to screen school age children as well.

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Factors to Consider

1. With OAE protocols taking less time than pure tone protocols, more children may be screened on a given day (Kreisman, Bevilacqua, Day, Kreisman, & Hall, 2013).
2. Personnel may include an audiologist, SLP, nurse, or other trained volunteer screener. Equipment can be automatic with no decision making required regarding equipment parameters or pass/fail criteria.
3. Screening in quiet environments typically reduces the amount of time needed to complete an OAE hearing screening. A reasonable amount of noise may be present without interrupting the OAE screening process. OAE equipment may indicate when the screening environment is too noisy.
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6. The use of OAE technology may be appropriate for screening children who are difficult to test using pure-tone audiometry (those who cannot respond to traditional pure tone or conditioned play techniques; Stephenson, 2007)

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2. Read results. Automated OAE screening units will analyze the emission and provide a result of either "pass" or "fail/refer." Screeners other than audiologists should not independently change the parameters of the test equipment or provide interpretation of findings.

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Brenda Glenn, Sr. Executive Legislative Assistant
For Deputy Minority Leader Rep. Mike Steele
360-786-7832

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