

**[DOH ADMINISTRATIVE ORDER NO. 2010-0020,
June 28, 2010]**

**RULES AND REGULATIONS IMPLEMENTING REPUBLIC ACT (R.A.)
NO. 9709 OTHERWISE KNOWN AS THE "UNIVERSAL NEWBORN
HEARING SCREENING ACT OF 2009"**

The following rules and regulations are hereby promulgated to implement Republic Act (R.A.) No. 9709, otherwise known as the Universal Newborn Hearing Screening and Intervention Act of 2009, an act establishing a Universal Newborn Hearing Screening (UNHSP) Program for the prevention, early diagnosis, and intervention of hearing loss.

**RULE 1
POLICY AND APPLICATIONS**

SECTION 1. *Purpose* – These Implementing Rules and Regulations shall provide the concerned national government agencies, local government units, non-governmental organizations, people's organizations, other public and private institutions with guidelines for the implementation of a UNHSP to institutionalize measures for the prevention and early diagnosis of congenital hearing loss among newborns, the provision of referral, follow--up, recall, and early intervention services to infants with hearing loss, and counseling and other support services for families of newborns with hearing loss, to afford them all the opportunities to be productive members of the community.

SECTION 2. *Declaration of Policy* – It is the policy of the State to protect and promote the right to health of the people, including the rights of children to survival, full and healthy development as individuals, and a better quality of life. Recognizing the fact that newborns and children who are deaf or hard of hearing have unique language, learning and communication needs, the State shall formulate a comprehensive program for the prevention, early detection, and diagnosis of congenital hearing loss among newborns and infants based on applied research and consultations with the sectors concerned.

SECTION 3. *Universal Newborn Hearing Screening Program* – There is hereby established a Universal Newborn Hearing Screening Program (UNHSP) to institutionalize measures for the prevention and early diagnosis of congenital hearing loss among newborns, the provision of referral, follow up, recall and early intervention services to infants with hearing loss and counseling and other support services for families of newborns with hearing loss, to afford them all the opportunities to be productive members of the community.

The UNHSP shall refer to a program that includes but is not limited to the following:

- a. Educating relevant stakeholders about the significance of Newborn Hearing Screening (NHS);

- b. Conducting hearing loss screening on infants born in the country;
- c. Tracking patients with congenital hearing loss for further evaluation;
- d. Providing medical intervention to patients before the age of seven years, and
- e. Monitoring and evaluating the UNHSP.

SECTION 4. *The objectives of the UNHSP are:*

- a. To ensure that newborns have access to hearing loss screening and diagnostic services such as clinical, audiologic, radiologic, or other methods which have been shown effective through scientific studies;
- b. To promote and establish a UNHSP in the country through a nationwide network of government and non-government agencies and other stakeholders who shall commit to the effective and efficient implementation of the program through appropriate policies, cost-effective procedures, regular monitoring and evaluation;
- c. To provide continuing capacity building which includes training for healthcare practitioners, conducting applied research and other related activities to aid in the effective implementation of a universal newborn hearing screening program;

Specifically the following shall be done to attain this objective:

- c. 1. To provide teaching, training, educational, and capacity building activities to healthcare practitioners to increase awareness and enhance their capabilities in diagnosing and screening and providing counseling, and the necessary interventions for the hearing impaired newborn, and
 - c.2. To initiate, implement, monitor, and evaluate research activities related to the diagnosis and management of newborn hearing impairment and to disseminate the results of research activities that will aid in the effective implementation of the program.
- d. To promote, integrate, and coordinate research activities related to newborn hearing screening and intervention;
- e. To establish and maintain a newborn hearing screening database which can serve as the foundation for decision-making and regulatory policies of health institutions and other national health policy-making bodies;
- f. To develop public policy in early hearing detection diagnosis and intervention that is based on research and recognition that infants, toddlers and children who are deaf or hard-of-hearing have unique language, learning and communication needs. Consultation with pertinent public and private sector is encouraged;
- g. To establish linkages and referral systems with a nationwide network of Newborn Hearing Screening Centers (NHSC) which are committed to providing appropriate screening to newborns, delivering appropriate and early intervention and counseling, implementing recall and follow-up programs for infants with hearing loss, giving other support services to

infants with hearing loss, and contributing to the Newborn Hearing Screening database at the NHSRCs at the National Institutes of Health;

h. To formulate and implement quality standards to ensure effective and efficient implementation of the UNHSP, and

i. To promote, discover, develop, and recommend alternative methods, procedures or instruments for newborn hearing screening and intervention that may be used in areas where technologically-dependent instruments and procedures are not available or accessible. It shall provide a system to validate the results of the alternative hearing screening procedures and initiate early intervention measures.

SECTION 5. *Definition of terms* – Under this Act, following terms shall mean the following:

a. **Alternative methods, instruments, and procedures** – shall refer to non-traditional, indigenous substitutes recommended technology-based and or evidence-based methods, instruments or procedures;

b. **Audiologic diagnostic evaluation** – shall refer to a service related to diagnosis of hearing loss administered by professionals or by NHSCs;

c. **Certification** – shall refer to a formal certification/accreditation issued by the Department of Health to newborn hearing screening centers;

d. **Congenital hearing loss** – shall refer to hearing impairment already present at birth;

e. **DOH** – refers to the Department of Health;

f. **Follow--up** – shall refer to the monitoring of an infant with possible hearing loss for the purpose of ensuring that the infant receives necessary diagnostic services and intervention or treatment;

g. **Healthcare practitioner** – shall refer to physicians, audiologists, nurses, midwives, nursing aides, traditional birth attendants, occupational therapists, speech therapists, and rehabilitation personnel;

h. **Health institutions** – shall refer to hospitals and other health facilities such as but not limited to, health centers, lying--in centers or puericulture centers with obstetrical and pediatric services, whether public or private;

i. **Infant** – refers to babies less than 12 months old;

j. **Intervention** – shall refer to any service rendered to an infant diagnosed with hearing loss ranging from counseling, diagnosis, and providing hearing aids as well as medical procedures for the correction of hearing loss;

k. **IRR** – refers to Implementing Rules and Regulation of R.A. 9709;

l. **Newborn hearing screening database** – shall refer to an organized body of information related to newborn hearing screening;

- m. **Newborn** – shall refer to a baby from the time of complete delivery to twenty--eight days (28) old;
- n. **Newborn hearing screening (NHS)** – shall refer to an objective, screening procedure performed on a newborn for the purpose of determining if the newborn has hearing impairment;
- o. **Newborn Hearing Screening Reference Center (NHSRC)** – shall refer to the central facility at the National Institutes of Health that defines testing and follow--up protocols, maintains an external laboratory proficiency testing program, oversees the national testing database and case registries, assists in training activities in all aspects of the program, and oversees content of educational materials;
- p. **Newborn Hearing Screening Center (NHSC)** – shall refer to a facility equipped with newborn hearing screening equipment that complies with the standards established by the NHSRC as recognized by the DOH. These centers also implement recall and follow--up programs for newborns that fail the initial screening;
- q. **NIH** – shall refer to the National Institutes of Health;
- r. **Recall** – shall refer to a procedure of locating an infant with a possible hearing loss for purposes of diagnosis, intervention, and/or treatment;
- s. **Refer** – shall indicate a newborn hearing screening result that the ear being tested did not pass the newborn hearing screening;
- t. **Referral** – shall refer to an act of **sending** a patient to another service provider within the network for continuation of care;
- u. **Universal Newborn Hearing Screening Program (UNHSP)** – shall refer to the program developed to carry out hearing screening for all newborns in the Philippines and to provide adequate interventions for infants with congenital hearing loss;

RULE II

IMPLEMENTING MECHANISMS

SECTION 6. *Obligation to inform* – Any health practitioner who delivers or assists in the delivery of a newborn in the Philippines shall inform the parents or legal guardian of the newborn of the availability, nature, and benefits of newborn hearing screening among infants three months old and below which should be done during the prenatal period or prior to delivery.

The parent or guardian of newborns who, after undergoing newborn hearing screening, are suspected to have hearing loss or with “refer” results shall be informed of the availability, nature, and benefits of further evaluation, intervention, treatment, and counseling.

The DOH shall, in coordination with the NHSRC and other stakeholders, undertake the preparation, production and dissemination of informational educational and communication materials on the nature, benefits and available medical interventions for hearing loss.

SECTION 7. *Performance of NHS*

- a. All infants born in hospitals in the Philippines shall be made to undergo NHS before discharge, unless the parents or legal guardians of the newborn object to the procedure subject to Section 11 of this Implementing Rules and Regulations.
- b. Infants not screened prior to discharge because of unavailability of instruments may seek hearing screening within the first three months after birth in the nearest facility doing hearing screening. In cases where the newborn is born at home, or outside birthing facilities, the healthcare practitioner attending the birth of the newborn or the health worker assigned in the community where the newborn is residing shall refer the newborn to the nearest hearing screening center.
- c. In areas where these facilities are not accessible, the healthcare practitioner shall perform an alternative hearing screening procedure and thereafter encourage parents to seek validation of the test results within three months after birth in NHSCs whenever the results indicate a possible hearing loss.
- d. NHS shall be performed by duly trained healthcare providers
- e. Validation or confirmation of the NHS test shall only be performed by DOH certified NHSCs.

SECTION 8. *Obligation to Perform NHS and Audiologic Evaluation*

- a. Compliance to NHS shall be the joint responsibility of the parent(s)/legal guardian, health practitioner, or any other individual attending to the newborn.
- b. An appropriate informational brochure, prepared by the DOH and NHSRC shall be made available and distributed to all healthcare facilities.

SECTION 9. *Recall* – Any infant who has a “refer” result in the screening shall be recalled immediately for further evaluation to confirm hearing loss and, as appropriate, to provide intervention. Parents of the affected child shall be informed of the availability, nature, and benefits of evaluation and treatment.

The local government units through their provincial/municipal/city health offices, district health offices and barangay health centers shall be actively involved in the recall process.

- a. The NHSC shall immediately notify the participating health institutions about the results of the patient.
- b. Participating health institutions shall locate and recall patients for immediate referral and management. To ensure that all newborns who fail screening are recalled, the institution should designate a person, section, or department in the health facility responsible for the recall.
- c. The attending health practitioner shall also actively participate in