

Guam EHD 4th Quarterly Advisory Meeting
Phase III, Year Three
December 14, 2011
Onward Agana Beach Resort

Members Present

Mrs. Ann Marie Cruz
Mrs. Joyce Flores
Ms. Ruth Sabangan
Mrs. Ma. Victoria Guiao (Marvic)
Mrs. Avelina Opena (Bing)
Ms. Margarita Gay
Mr. Pete Camacho
Ms. Sherry Cruz
Mr. Edmund Cruz
Mr. David Zieber via Bobbie Maguadog/Laurie Soto
Mrs. Pat Mantanona
Mrs. Francine Camacho
Mrs. Cathy Tydingco

Members Absent

Dr. LeeAnn Barcinas
Ms. Glenda Leon Guerrero
Dr. Robert Leon Guerrero
Mrs. Bridgette Flores Lobo
Mr. Joseph Mendiola (Joe)
Dr. Maria Andrea Alano
Dr. Dennis Triolo
Ms. Trisha Suzuki
Mrs. Lorrach Santos
Mrs. Christina San Nicolas
Ms. Jovita Fe Monforte
Mrs. Kim Aeillo
Ms. Lina Leon Guerrero

Guam EHD Staff Members Present

Mrs. Elaine Eclavea
Mrs. Vicky Ritter
Mr. Sean Lizama
Mr. Joseph J. Mendiola (JJ)
Ms. Ruth Leon Guerrero
Mr. Eric Pegarido
Ms. Jay-lynn Mendiola

Guam EHD Staff Member Absent

Dr. Velma Sablan
Mr. Johnathan Castro

Meeting Notes

Meeting was called to order by Mrs. Elaine Eclavea at 12:00 noon.

1. There were not enough members present to represent a quorum. The review and approval of the minutes for the last Advisory Committee meeting held on June 2, 2011 and September 17, 2011 were tabled for the next meeting due to the lack of a quorum.
2. Mrs. Eclavea turned the floor over to Mr. JJ Mendiola to report on hearing screening data. Mr. Mendiola reviewed Goal One (Part 1): Maintain hearing screening rates at 95% benchmark or better for all infants born on Guam. Data on infants that fail initial screening (FIS) from July-September 2011 was reviewed. Guam Memorial Hospital Authority (GMHA) had an

average of 96%, and had a 3% FIS rate, down from 4% from the last reporting period. Sagua Managu Birthing Center (SMBC) screened an average of 93% of their newborns, and had a 2% FIS. Benchmarks have been met for this goal.

3. Mr. JJ Mendiola reviewed yearly data from 2008 through September 2011. In 2010, when the transition to the 2-step process was made, the rate of failure for FIS dropped from 15% in 2009 to 8% in 2010. No data is being received from U.S. Naval Hospital Guam at this time.
4. Data for Loss to Follow-up (LFU) for Rescreen for this quarter: Only 2 babies were LFU in August. Mrs. Mantanona recommended that the LFU reasons be broken down further, because not being able to locate a family is different than a family that can be located but does not respond to appointments or meetings.
5. Data on Yearly Review for Outpatient Rescreen: A drop in infants needing rescreen was noted in 2010, when the 2-step process began. The numbers for refusing and relocating increased in 2010 & 2011. Mrs. Eclavea called for greater collaboration with GEIS to reduce the number of families refusing GEIS services.
6. Reviewed Goal 2: All infants who screen positive will have a full diagnostic audiological evaluation (DAE) before 3 months of age. Guam will reduce the loss to follow-up (LTFU) between outpatient screenings to DAE from an average of 15% to 0%.
7. Mr. Mendiola noted that 4 children were referred for Diagnostic Audiologic Evaluation (DAE) during this time period. The first teleaudiology DAE with Children's Hospital Colorado and in collaboration with the Department of Education Audiology Department and GEIS, was performed in October 2011. 2 children are still pending completion of DAE, and 1 child is LTFU for this quarter. No children were diagnosed with hearing loss in 2011 because no DAE was being done until October 2011. According to research and the national data, Guam should have 3 cases of children with hearing loss per year.
8. Data on Yearly Review of Infants Referred for DAE: The LFU rate for DAE rose from) % in 2008 (private audiologist stopped seeing infants for DAE in late 2008) to 25% in 2011. Teleaudiology DAE began in October of 2011. Infants that are younger than 6 months of age can receive DAE through teleaudiology. But infants 7 months of age and older can be seen for DAE through the private audiologist.
9. Mrs. Mantanona requested that data be verified before each Advisory meeting for the most up-to-date information to be reported. Mr. Mendiola responded that he verified with the GEIS Data Coordinator yesterday. Mrs. Mantanona requested the names of children be given to her that are lacking information.

10. Reviewed Goal 3: All infants identified with a hearing loss will receive appropriate early intervention services before 6 months of age (including medical, audiological, and early intervention). Guam will reduce the loss to follow-up between audiological diagnosis and entry into early intervention, from an average of 23% over the last 4 years to 10% or less.
11. Data on Yearly Review of Infants Receiving Early Intervention (EI) Services before 6 Months of Age: In 2008, 100% of infants identified with hearing loss received EI services before 6 months of age. In 2009 no infant was identified, and 2010, one infant was diagnosed with hearing loss but did not receive EI services by 6 months of age. Mrs. Mantanona added that the private audiologist only has limited slots for Medicaid clients and their schedule fills up quickly. There has been no response to GEIS' Request for Proposal for audiologists. Policies have been developed.
12. Reviewed Goal 4: Improve methods for identifying infants and children with late-onset, progressive or acquired hearing loss through data analyses and possible linkage with Guam Child Find. Reduce the loss to follow-up for infants with high-risk factors from the current average failure rate of 47% to an average of 20% or better. Data of high-risk rescreen for babies that are due for their 6-month high risk follow-up during this same time period indicate an average high-risk LTFU of 30%.
13. The LFU rates for High Risk Rescreen during this time period averaged 21%. The Yearly Review indicates that the LFU rates are dropping for 2011.
14. Reviewed Goal 5: Infants identified with a hearing loss will have a medical home and linked to family support services. Reduce the number of infants without a medical home from a current average of 69% to 20% or better, through an aggressive public awareness campaign to promote the concept of medical home to parents and healthcare providers. Of infants born from September to November 2009, 16% had a verified medical home. Of infants born from June to August 2009, 15% had a verified medical home.
15. Data for this time period showed 76% of infants born have a verified medical home, and improvement from last quarter of 64%. A presentation will be made to the Pediatricians to inform them of their role as the Medical Home for follow-up of risk factors, as a strategy to reduce the number of infants without a medical home.
16. Mrs. Ritter discussed the training and community outreach activities that occurred during this time period.
17. Mr. Sean Lizama gave updates on the media and developed products thus far.

18. A Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis of the Guam EHD project was conducted as a group activity, to be used in improving the project. Groups were formed and the findings were reported.

The meeting was adjourned at 1:45 p.m.