



Guam Early Hearing Detection and Intervention Project

Guam Center for Excellence in
Developmental Disabilities Education, Research, and Service
University of Guam • *Unibetsedåt Guahan*
Office of Academic & Student Affairs
Dean Circle House 22/23 • UOG Station • Mangilao, Guam 96923
(671) 735-2466 (V) • (671) 734-6531 (TTY) • (671) 734-5709 (Fax)
Website: www.guamehdi.com E-mail: nenehearing@guamehdi.com

Guam EHD 2nd Quarterly Advisory Meeting Phase IV, Year I December 3, 2012 Westin Resort and Spa

Members Present

Mrs. Bridgette Flores-Lobo
Dr. Maria Andrea Alano
Dr. LeeAnn Barcinas
Mrs. Joyce Flores
Ms. Ruth Sabangan
Mrs. Pat Mantanona
Mrs. Ann Marie Cruz
Mr. David Zieber via Toni Taitano
Ms. Lina Leon Guerrero via Anne Fox
Mrs. Ma. Victoria Guiao (Marvic)
Mrs. Avelina Opena (Bing)
Ms. Margarita Gay
Ms. Sherry Cruz

Members Absent

Ms. Trisha Suzuki
Mrs. Francine Camacho
Dr. Robert Leon Guerrero
Mr. Edmund Cruz
Mrs. Christina San Nicolas
Ms. Jovita Fe Monforte
Mrs. Kim Aeillo
Mrs. Cathy Tydingco
Ms. Glenda Leon Guerrero
Mrs. Lorrha Santos
Mr. Joseph Mendiola (Joe)
Dr. Dennis Triolo

Guam EHD Staff Members Present

Mrs. Elaine Eclavea
Dr. Margaret Blaz
Ms. Jessica Chaco
Dr. Velma Sablan
Ms. Jay-lynn Mendiola
Ms. Ruth Leon Guerrero
Mr. Joseph J. Mendiola (JJ)
Mrs. Vicky Ritter
Mr. Sean Lizama

Guests

Mrs. Mariles Benavente,
CEDDERS, EHD COL
Ms. Nora Pangelinan, CNMI
Special Education, Data
Mrs. Robin Palacios, CNMI Interim
Coordinator, Part C

Meeting Notes

Meeting was called to order by Ms. Margarita Gay at 12:06 p.m.

1. There were not enough members present to represent a quorum. The review and approval of the minutes for the last three Advisory Committee meetings held on June 2, 2011, September 17, 2011, December 14, 2011 and September 10, 2012 were tabled for the next meeting due to the lack of a quorum.
2. Mrs. Eclavea reviewed the Project Rikohi goals. **Goal 1:** To reduce loss to follow-up (LFU) at 1, 3, and 6 months of age by 50% or better of the current rates.
 - *Objective at Initial Screening: To maintain initial hearing screening at 99% benchmark or better prior to discharge or 1 month of age as mandated in local Guam law P.L. 27-150 and maintain LFU for initial screening prior to discharge, at less than 1%.*

- Mrs. Avelina Opena reported on Guam Memorial Hospital Authority's (GMHA) initial hearing screening data, from August to October 2013, screening an average of 97% of their infants, with a 2% average FIS rate.
 - Ms. Anne Fox reported on Sagua Managu Birthing Center's (SMBC) for the same time frame, screening an average of 99% of their newborns with a 2% FIS rate. One parent refused hearing screening during this time period.
 - The combined total screening rate for GMHA and SMBC is 98%, and a FIS rate of 2%.
 - If infants from Naval Hospital were included in the initial screening rate, the rate would be about 80%, due to the lack of any screening data from Naval Hospital.
- *Objective at Outpatient Rescreen: At outpatient rescreen, reduce LFU rates from an average of 13% to 6.5% or less.*
 - Mrs. Pat Mantanona reported that there were no infants discharged from GMHA that are Lost to Follow-up (LFU) for Rescreen from August to October 2013. This is an unprecedented achievement of 100% return rate for outpatient rescreen! Mrs. Mantanona requested that Guam Early Intervention System's name be included on this slide for future meetings.
 - Ms. Fox reported that SMBC also had no infants Lost to Follow-up (LFU) for Rescreen from August to October 2013!
 - *Objective at Diagnostic Audiological Evaluation (DAE): To reduce the LFU for DAE by 3 months of age, from 6% to less than 1%.*
 - Of the babies that were born from January to March 2011, 9 babies completed DAE via teleaudiology, 5 were found with hearing loss, 2 families relocated, 2 babies are pending completion of DAE (1 child presently ill).
 - The teleaudiology pilot will continue until 25 babies have been tested via teleaudiology, to have a decent sampling for evaluation of the project, anticipated to be June 2013.
 - Mrs. Elaine Eclavea commented that our "brothers and sisters" in the region are waiting to see how the teleaudiology pilot project works out.
 - Issues regarding teleaudiology:
 - a). May not be as "parent-friendly" as a face-to-face DAE, but is a good compromise to make up for the lack of services from a pediatric audiologist.
 - b). One family questioned the presence of an audiologist and why he couldn't provide the service.
 - c). One family was not sure who was on the other end performing teleaudiology through the internet.
 - d). what happens after the pilot project is completed? Discussions with GEIS will continue regarding timelines, a Request for Proposal for teleaudiology services and the required specifications that must be met for teleaudiology to be successful.
 - *Objective at Early Intervention: To continue to monitor enrollment of infants with hearing loss to ensure early intervention services by 6 months of age and to continue to maintain LFU for early intervention at less than 1%.*

- Mrs. Sherry Cruz requested that if any DAE is attempted but not completed, that a short report be prepared that would state what tests were attempted or completed.
 - *Objective at High Risk: To reduce the LFU for infants with high-risk factors from an average of 32% to 16% or less.*
 - Mrs. Mantanona reported that for this same time period, the average LFU rate for infants returning for 6-month follow-up is 21%!
3. **Goal 2:** Using the National Initiative on Child Health Quality (NICHQ) Learning Collaboratives, identify within the Guam EHD system where infants and families are getting “lost” and to implement any culturally appropriate programmatic changes, small or large, that will prevent LFU from happening.
- Mrs. Eclavea reviewed the Model for Improvement (MFI) strategy for reducing LFU at all levels of the hearing continuum. Strategies are evaluated to see if a reduction in the LFU is noted, through the Plan, Do, Study, Act (PDSA) process. Trainings with GEIS staff are scheduled to begin in January 2013 to reduce refusal of GEIS services.
4. **Goal 3:** To continue to develop and implement cultural competency at all levels of the hearing continuum ensuring principles of equal access and nondiscriminatory practices in service delivery.
- Mrs. Eclavea reported that 6 interpreters received training this morning sponsored by the Guam EHD: Community of Learners (COL) grant, to establish a list of properly trained interpreters that may be used by Guam EHD. More interpreters are needed and will be compensated for their services, and parents were encouraged to join this group.
 - Mrs. Mariles Benavente added that language assistance services are generally a very weak component that needs to be addressed in reducing LFU.
 - Mrs. Eclavea reviewed the ethnicity data demonstrating the most prevalent ethnicities that were LFU at all levels of the hearing continuum:
 - Outpatient rescreen: Chuukese families
 - High risk rescreen: Chamorro families
 - DAE evaluations: Chamorro families, with Filipino families a close second
 - Pending DAE: Chamorro and Chuukese families
 - Dr. Alano questioned why families would refuse free services. Members answered that it could be because they are illegal aliens and don’t want to be found out. Mrs. Robin Palacios added that in the Commonwealth of the Northern Marianas, many families are worried about being discovered that they are illegal aliens, so families are told their Visa status would not be affected because they do not report on the immigration status, thus they could still receive early intervention services.
 - Mrs. Benavente stated that the immigrant population notoriously has higher LFU issues.
 - Ms. Margaret Blaz added that the appointment time may be an actual threat to their livelihood as it may affect the financial provider’s ability to provide for the family. Alternate dates/times for screening or evaluations should be made available to families.
 - Mrs. Bridgette Flores-Lobo commented that some parents, when their child told has hearing problems, respond by saying, “But when I call him he responds!” Teaching families to understand the need for

screening, evaluation or follow-up is critical in interactions with families. She also added that using technology, like Facebook, may help find families that could not otherwise be contacted.

5. **Goal 4:** To develop, implement and track those planned or systematic measures necessary to provide confidence that Guam EHD services satisfy requirements for high quality assurances.

- Dr. Velma Sablan informed the committee that she would like to give kudos to Mrs. Eclavea on her publication in the Volta Review, as this is a prestigious accomplishment. The committee applauded Mrs. Eclavea in her achievement.
- Dr. Sablan reported that the Quality Assurance Reports: Guam EHD Comprehensive Program Evaluation is in draft form. Data will be gathered from February to April 2013 to get preliminary data and make decisions on actions based on that data. Parents, health providers and GEIS will be surveyed, and on-site observations will be conducted.
- Mrs. Avelina Opena and Mrs. Margarita Gay posed a question about mothers that do not speak, understand, or read English.
- Dr. Sablan commented that translators will have to be used to read/interpret the questions to the parents, and parents may need assistance filling out forms.
- Discussion followed from various members about what is needed and what is available for families that do not understand or read English.
- Mrs. Opena commented that GMHA uses family members for translation/interpretation, or they call "Helping Hands", which is a phone interpreting service. Their last resort is calling on GMHA employees to interpret for the family. Certification of interpreters is in progress Mrs. Opena questioned if the trained interpreters could be used for their interpreting needs. Members answered that it was a possibility, but last minute requests might not be feasible because many of the interpreters have jobs, but it would be worth a try.

6. **Goal 5:** To increase the number of infants with a medical home and collaborate with others in using the BSC Model for Improvement process and document the success level of tested strategies in order to reduce the number of infants at risk on Guam who lack a medical home from the average of 37% to 20% or better.

- Mrs. Eclavea requested suggestions from members to help meet this goal.
7. Mr. Sean Lizama reported on media development. The updated Guam EHD video is in progress, the redesign of the Guam EHD website has begun, Guam EHD is on Facebook and Twitter, and a new advertisement is being developed for Sagua Managu magazine.
8. Mrs. Vicky Ritter reported on training, hearing screening and outreach events for this reporting period.

Meeting was adjourned at 1:30 p.m.