



Guam Early Hearing Detection and Intervention



*Project Riko'hi:
Reducing Loss to Follow-Up after
Failure to Pass Newborn Hearing
Screening and at All Levels of the
Hearing Continuum*

Quarterly Meeting, December 14, 2015



Welcome and
Thank You for Coming



Agenda



- Sign In & Welcoming
- Call Meeting to Order
- Introduction of Members
- Approval of Minutes
- Progress update to the Aims and Sub-aims
- Open Discussion
- Announcements and Next Meeting



Outcomes



After this meeting, Advisory members will provide input and recommendations to the following:

- **Progress updates** to the Aims and Sub-Aims;
- Provide **feedback and recommendations**



AIM 1



By March 31, 2017, Project Rikohi with participating birth site screeners will utilize specifically targeted and measurable interventions that are culturally and linguistically competent such as quality improvement methodologies in reducing the number of infants LTF/D who have not passed a newborn hearing screening examination prior to discharge from a birthing site to 1% or less



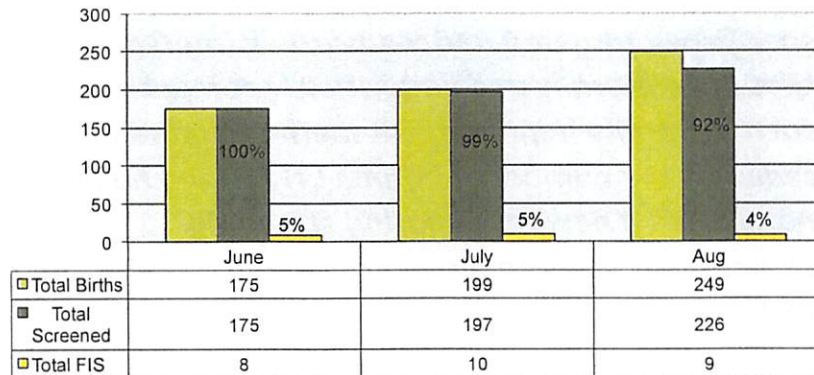
AIM 1



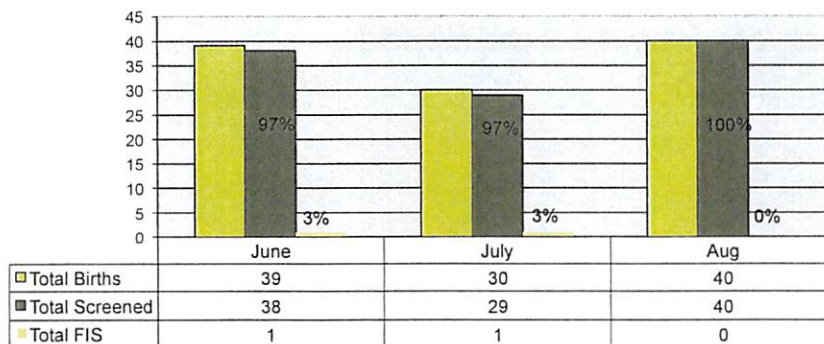
By March 31, 2017, Project Rikohi will reduce the number of infants LTF/D at initial screening to 1% or less. (about 2-3 per month)



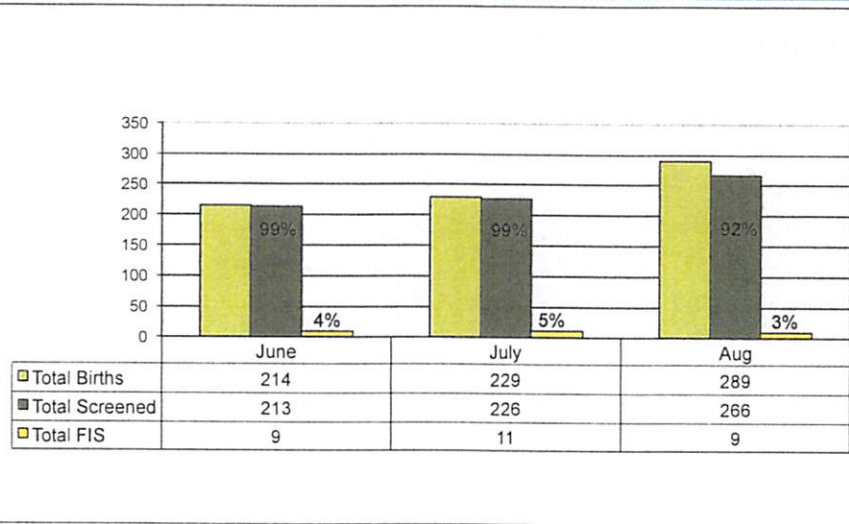
GMHA Initial Screening Results



SMBC Initial Screening Results



GMHA & SMBC Total

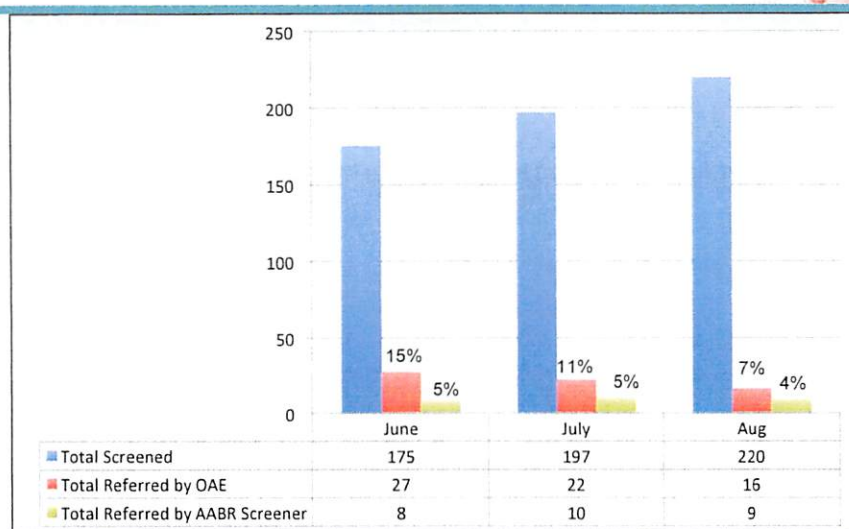


Sub AIMs

1. Increase accuracy of family contact information by 10%.
2. Decrease the number of refer of OAE by 10%.



- Initial Screen (GMHA) – PDSA Worksheet
Cycle 1





- Initial Screen (GMHA) – PDSA Worksheet
Cycle 2



Discussion and Input



AIM 2



By March 31, 2017, Project Rikohi with participating birth site screeners and early intervention staff will utilize specifically targeted and measurable interventions that are culturally and linguistically competent such as quality improvement methodologies in reducing the number of infants LTF/D currently at 6% who did not pass the outpatient hearing screening by one month of age to 4% or less.



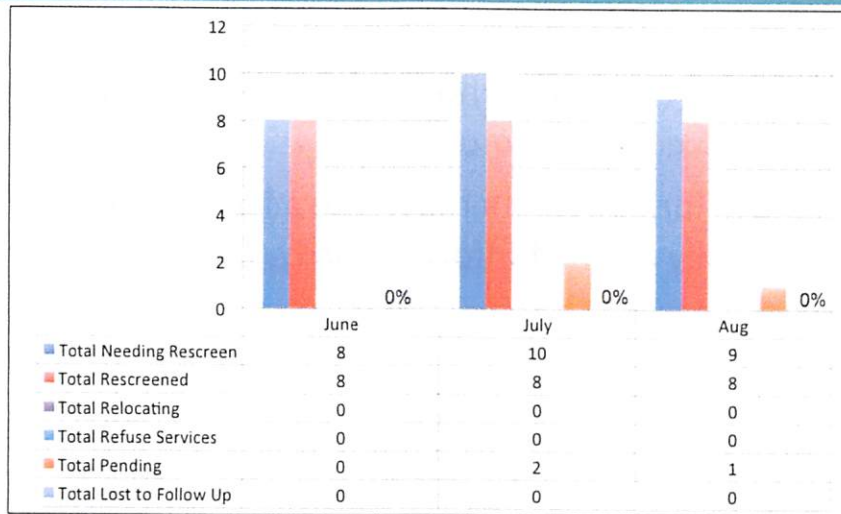
AIM 2



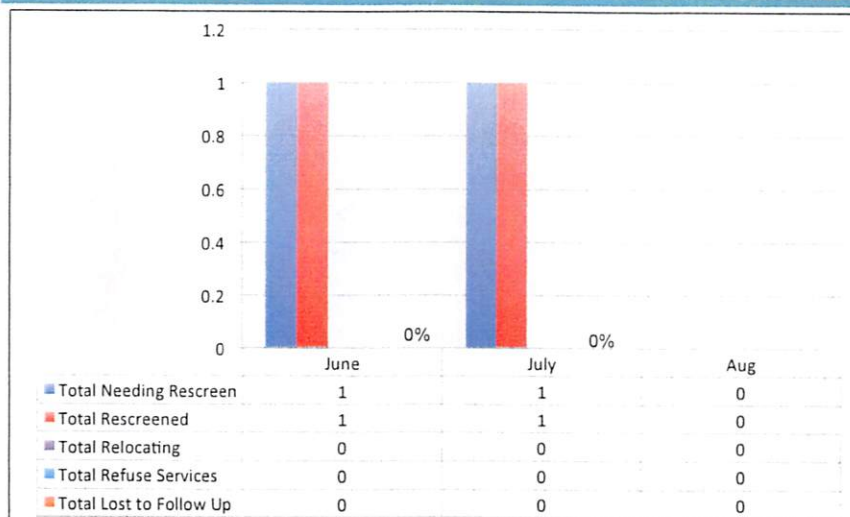
By March 31, 2017, Project Rikohi will reduce the number of infants LTF/D currently at outpatient rescreen to 4% or less. (about 1-2 per month)



Outpatient Rescreen Totals (Infants referred from GMH and screened by GEIS)



Outpatient Rescreen Totals (SMBC)

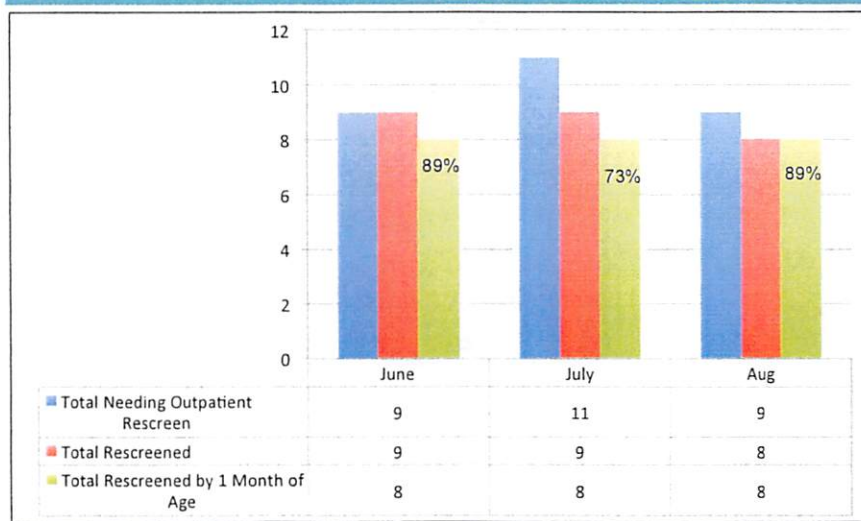


Sub AIMs



1. By April 2016, increase the number of children by 5% who receive the outpatient rescreens by 1 month.
2. By April 2016, increase the accuracy of family contact information by 5%

Outpatient Rescreen





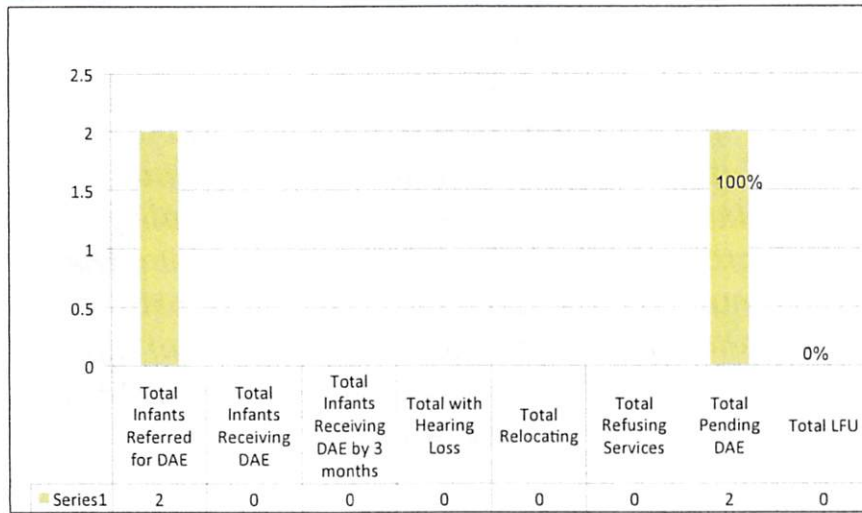
By March 31, 2017, Project Rikohi with early intervention staff will continue to utilize specifically targeted and measurable interventions that are culturally and linguistically competent such as quality improvement methodologies in reducing the number of infants LTF/D for diagnostic audiological evaluation by 3 months of age from the aggregate 16% from 2011 to 2014 to 8% or less



By March 31, 2017, Project Rikohi will reduce the number of infants LTF/D for DAE to 8% or less. (about 1 per month)



Total Infants Referred for DAE (June- August 2015)



AIM 5



By March 31, 2017, Project Rikohi with early intervention staff will continue to identify and utilize specifically targeted interventions such as CLC QI methodologies to ensure Individualized Family Service Plan (IFSP) are in place by six months of age for 100% of infant's identified with persistent and permanent hearing loss



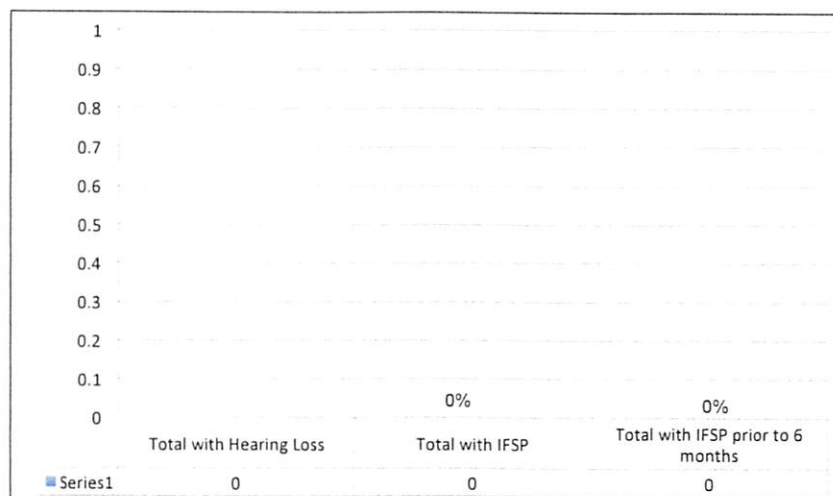


AIM 5

By March 31, 2017, Project Rikohi will ensure Individualized Family Service Plan (IFSP) are in place by six months of age all infant's identified with hearing loss



Percent of Infants with HL receiving IFSP prior to 6 Months of Age





1. By December 2015, increase by 100% the monitoring services provided by GEIS to all infants pending a DAE.
2. By October 30, 2015, complete DAEs for 80% of all infants needing a DAE that were born from November 2014 – April 2015.

[illegible]

DAE PDSA Worksheet 2



PDSA WORKSHEET

Author: [Name] Date: [Date] Version: [Version]

Problem Statement: [Text]

Plan: [Text]

Do: [Text]

Check: [Text]

Act: [Text]

Notes: [Text]

Reflection: [Text]

Next Steps: [Text]

DAE Data



	Total
Total Children Born Nov 2014 - Apr 2015 pending a DAE	8
Total Receiving a DAE	6

Note: 1 Family Refused services

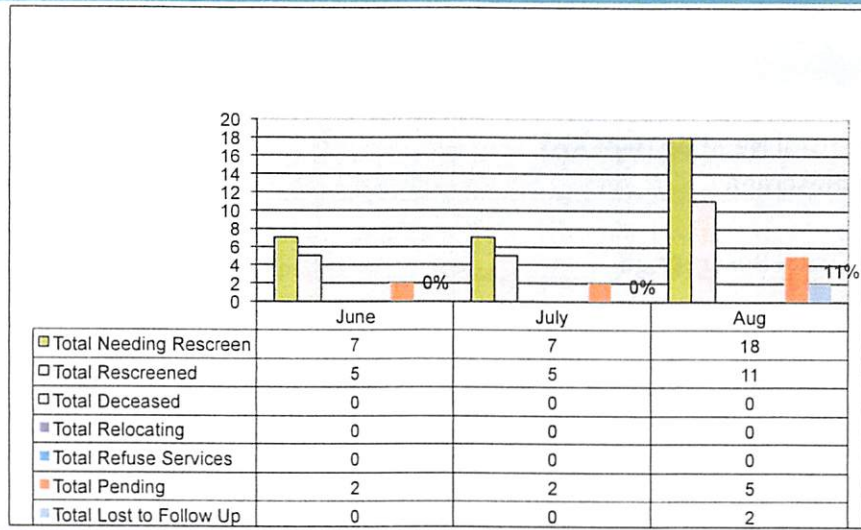


By March 31, 2017, Project Rikohi, with the medical home and early intervention staff, will continue to utilize specifically targeted and measurable interventions that are culturally and linguistically competent in reducing the number of infants LTF/D who have high risk factors for late onset and progressive hearing loss who fail to return for rescreen by six months of age from the current level of 20% to 10% or less



By March 31, 2017, Project Rikohi will reduce the number of infants LTF/D at the high risk rescreen level to 10% or less. (about 1-2 per month)

High Risk Rescreen



Sub AIMs

1. By April 2016, reduce number of no shows for high-risk re-screening appointments by 5%.



High Risk Rescreen Data



	June	July	Aug
Total Needing High Risk Rescreen	7	7	18
Total Rescreened	5	5	11
Average Age at High Risk Rescreen	6.4	5.3	6.55



Training and Activities



EVENT (September 2015-December 2015)	DATES
Prenatal classes GMH & SM	Central DPHSS: 10/9/15 (5); 12/11/15 (5) GMHA: 10/5/15 (4); 12/7/15 (9) Total: 23 participants
Outreach activities	10/2 Head Start 50th Anniversary Outreach Event, 8A-4P , Dededo Sports' Complex 10/17 Healthy Mothers, Healthy Babies Fair, 9A-3P, Micronesia Mall 10/24 Head Start Parent Conference, 8-3, Pacific Star Hotel

Media Development



Guam Regional Medical City



Closing Activities

Open Discussion

Announcements:

Next Meeting:

