

Project Title: **Guam Early Hearing Detection and Intervention: Project Rikohi**  
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**ABSTRACT:** The **Guam Early Hearing Detection and Intervention (EHDI): Project Rikohi** will continue to ensure all infants have access to hearing screening prior to discharge from a birthing facility, and if needed, return for a rescreen, diagnostic audiological evaluation, and enrolled in the early intervention program. This sequence of hearing services is consistent with the Universal Newborn Hearing Screening (UNHS) process or the 1-3-6 levels of the hearing continuum. Project Rikohi will continue to track quality improvement (QI) methodologies in efforts to reduce the Loss to Follow-up/Documentation (LTF/D) and continue to ensure infants receive culturally and linguistically appropriate and timely follow-up. **PROBLEM:** Guam continues to see LTF/D rates ranging from 3% to 8% for infants needing and not receiving an outpatient rescreen by 1 month of age. Of those infants referred for diagnostic audiological evaluation (DAE), 16% (or 20 infants) are LTF/D with an additional 17% (or 21 infants) refusing a DAE. Timely delivery of DAE services continues to be a challenge due to the limited access to pediatric audiological expertise on Guam. The need to continue to ensure that public awareness and cultural and linguistically competent (CLC) processes are embedded at each level of the hearing continuum is essential for follow-up services. Progressive or late-onset hearing loss continues to be a challenge due to the emergence of children with hearing loss who passed the initial hearing screening and were later identified with hearing loss. Lastly, there is a need to formalize the continued collaboration and commitment with primary care physicians/clinics and early intervention programs in the implementation of the quality improvement methodologies to ensure that high risk infants receive a hearing screening by 6 months of age.

**METHODOLOGY:** Since 2006, Project Rikohi adopted and implemented the “Model for Improvement” based on the *Breakthrough Series Collaborative* framework used to enhance existing systems. This framework assures children with hearing loss are offered enrollment into early intervention and are connected to early supports and services. The QI Teams will implement the “PLAN-DO-STUDY-ACT” cycles and monitor and track the success of intervention strategies recommended to reduce LTF/D rates. **COORDINATION:** Project Rikohi will continue to coordinate with appropriate national, regional, and local health and early intervention agencies, organizations, and advisory groups to ensure a coordinated system for the care of infants with hearing loss. **EVALUATION:** The project evaluation will include the monitoring of ongoing processes and progress toward all AIMS statements and follow the evaluation framework. The EHDI Advisory Committee will review the outcomes and progress. **ANNOTATION:** Project Rikohi will address the needs reflected in 5 major AIMS, Sub-Aims, and targeted activities.