

MINUTES
STATE ADVISORY COUNCIL FOR EARLY IDENTIFICATION OF HEARING IMPAIRED
INFANTS

Quarterly Council Meeting
Thursday, May 28, 2015
Bienville Building, Room 173, 628 North 4th Street
Baton Rouge, LA 70802

COUNCIL MEMBERS PRESENT: Thiravat Choojitarom, Gina Easterly, Juan Gershanik (by phone), Barbara Gordon-Wendt, Jill Guidry, Nancy Hicks (by phone), Patti Moss, Cynthia Suire, Alla Tarasyuk, Staci Sullivan

COUNCIL MEMBERS ABSENT: Naomi DeDual, Linda Frantz, Penny Hakim, Anita Jeyakumar

GUESTS PRESENT: Melinda Peat, Terri Ibieta, Jeanette Webb, Mary Jo Smith, Susannah Boudreaux, Andrea Wesner, Wendy Jumonville

The meeting was called to order by Dr. Choojitarom at 10:00 am. The minutes from the February 26, 2015 meeting were adjusted and approved with a unanimous vote of attending Council members. Council member attendees and guests introduced themselves.

Old Business:

LA EHDI Database Report: Terri Ibieta reports that database bugs to this point have been fixed. Training stage now with 5 trainings, 26 hospital supervisors trained (some supervise more than one hospital). There are 51 birthing facilities plus military. Peleton will be supervising 12 of our hospitals. The goal is to have them self-monitor. Training is mandatory for each facility. Trained 41 audiologists who are not hospital supervisors. They can view data, see all records and who was seen, can input Followup Services Report instead of faxing. Next phase will be physicians who provide/input followup. Many of those followups will be how to monitor. Dr. Choojitarom requested input as to where to put info out as to trainings available. Webb advises there are levels of training, based on what the needs of the users are. Dr. Gershanik queried how target trainings, pre, post, and suggested perhaps survey monkey so physicians have input on questions. After the training, users are 'live' in database with contact info provided for after training for support. Requested spot on agenda for next council meeting for database. Barbara Gordon-Wendt and council offer accolades for job well done.

LTF/LTD Follow up Report: Jeanette Webb provided an update on LTF/LTD. The LFT rate for 2014 first three quarters is 37% overall. Prior year 2013 was 28%. LTD went from 14% in 2013 to 25% in 2014. In analyzing this, much of the followup time has been spent on database, etc. with less time addressing in process. With the database, EHDl team wants to build in self-monitoring and sustainability. Example shared of a hospital in Louisiana with 89 referred babies that leave hospital with a followup appointment scheduled, only 7 came back. It's not a lost to documentation problem, it's not reporting. Brainstorming ideas to encourage reporting and thereby decrease LTD – incentives, emails, reports. Quarter 4 looks a little better with just 31% LTF. Training was done at end of October on referenced hospital, and stats are looking better for the last quarter. EHDl is hopeful for hospitals to use database as a tool for to self-monitor. EHDl can send messages on their dashboard, generate emails, reminders. In process (family has had one appointment with inconclusive results) with the database came down from 8% to 1.9%. They are 'lost', but not in the LTF stats. Wendy Jumonville asked Council on behalf of EHDl regarding audiologists who do not report, what is next step? Suggestions – faxes, auto emails, dashboard messages (except they are not logging in). Barbara Gordon-Wendt says that 'nagging' emails are helpful, so perhaps maybe auto emails once a certain level is reached. Webb and Jumonville suggested perhaps at some point a standard letter sent to offenders from council. Dr. Choojitarom suggested possibly tying to job description to the effect if they are providing services for this hospital that they supervise, then these are their responsibilities.

Dr. Barbara Gordon-Wendt reports she is seeing a lot of 0-3 years of age children as part of grant through Head Start. Terri Ibieta reports to pull that child up on the database and if they are a fail, then report that on the database whatever your results are. However, the EHDl database is only from October 2014. Terri also suggested even a list or however you keep your data, and then send the list and the epidemiologist can do a data match.

Unilateral hearing loss -- Wendy Jumonville reports that EHDl through its monthly email blasts to audiologists called LA EHDl Hot Topics featured unilateral hearing loss this past month. MailChimp is used to distribute. Links are in the email – Journal of Pediatrics article for providers to be aware.

Dr. Choojitarom suggested possibly adding something to the effect that perhaps as a Council, this is what we recommend. If there is any controversy, we want to know best practice. American Academy Audiologists, ASHA,

Wendy Jumonville shared that for amplification of unilateral hearing loss there are many issues to consider: age, developmental levels, speech and language

levels – so really is on a case by case basis. Jumonville will add Hot Topics to Google+ council/EHDI group (either through link or by copy/paste) and add all of Council to email distribution or Hot Topic emails. Dr. Choojitarom will send invitations to all council members for Google+.

Dr. Barbara Gordon Wendt mentioned article that Dr. Jeyakumar referenced that in Europe it is recommended amplification for unilateral hearing loss before one year of age. Perhaps we can review that.

Infants Born Outside of Hospitals:

Dr. Choojitarom asked if we have a legal opinion regarding required newborn screening of infants born outside of hospitals. Melinda Peat is still working with DHH legal for their opinion and will still continue to pursue. Discussions at national EHDI meeting were that some use the approach: 'we're here to help you,' here to provide any assistance using grant monies to purchase equipment. They report they were successful without going the legal route. Suggestions were to maybe loan and rotate unit. Barbara Gordon-Wendt questioned how many birthing centers? Webb reports numbers are increasing (Baton Rouge, New Orleans, Lake Charles, Lafayette). Lafayette does at least tell them to followup. Webb also reports seeing two to three per week as seeing initial screen on followup report. Terri Ibieta suggested possibly having an Advisory Council committee to look into out of hospital births.

Dr. Gershanik requested 'official word' from Council on birth centers being close to facilities for hearing screening (something that is vital to the optimal outcomes for the newborn) to share with the group of neonatologists when they address quality issues.

Council Discussion of New Business

EHDI Meeting:

Consensus is that there is always something new to learn while attending national EHDI meeting. Overall very successful -- Presentations were well received. Had hoped Tri would be here would be to look at some of the data that he presented is to look at somewhat through the same lense like EHDI does PDSA cycles. Webb would like to see data presented at another Council meeting.

Terri Ibieta attended early intervention session. Minnesota used recommendations to create self assessment. First thing they did was gathered all partners. Terri thought it was a great model. They took the JCIH 2013 early intervention goals and did not change anything. Minnesota used that document for coming up with self-assessment. They took those goals and used those to look at where are we with this, strengths and weaknesses. Used as guide for

where are we and where do we need to go. Next meeting we'll start looking at with early intervention committee.

Wendy Jumonville attended social media workshop since she does EHDl webpage. Many states are using Facebook, Pinterest, MailChimp. I think we do need to look at issue of adding more social media. More Facebook page, Pinterest – not just crafts, documents and information out there. Terri said that program could use technology person added to their staff.

Regional Network Liason -- Dr. Choojitarom reports that RNL seems to be a coordinating position. He will coordinate information to chapter champions in Region, TX, LA AR, MS. Should not have much effect on what we have on council except will be one of the first receive information from EHDl on new targets.

SB 58 – Gina Easterly shared that next week bill goes to House. Lots of members provided testimony when in full senate committee. Senators and representatives are intrigued. They all voted yes via sign language. Included not only deaf, but also hard of hearing and deaf blind. Also includes qualified professionals in the schools and also access to adults as mentors, and that it supports all communication modes. Handbook will be prepared for implementation and guidance.

Pediatric Potpourri – will be August 21-23, in New Orleans. Great opportunity to share information briefly about database. Dr. Gershanik will attend Pediatric Potpourri to be lead speaker. Presentation will be brief, basic who we are and what we do. Will not do table this year. Do ten minute presentation and then be available after the meeting for one-on-one.

Louisiana Hands & Voices update – Jill Guidry shared report of activities through 2015 Annual Report and most recent newsletter

Next Advisory Council Meeting:

The next Advisory Council meeting will convene Thursday, July 23, 2015 from 10:00 a.m. to 12:00 p.m. with location to be announced. Dr. Choojitarom suggested the next meeting be in New Orleans to accommodate some council members and also suggests continuing a rotating location since the Baton Rouge location is also quite convenient for many council members.

Adjournment:

A motion to adjourn the meeting was made by Dr. Choojitarom and seconded by Jill Guidry. By unanimous vote the meeting was adjourned at 12:00pm. The meeting was then ended with a call for brief Committee meetings owing to the lateness of the hour.

