

Early Hearing Detection and Intervention Advisory Council Meeting Minutes

4.22.22

Call to Order: Meeting called to order at 10am by Dana Hubbard. A council roll call was completed.

Council members Present: Dana Hubbard, Jana Broussard, Susannah Boudreaux (Proxy for Gina Easterly), Leigh Anne Norman, Marbely Barahona, Cindy Voelker, Theresa Nicholls, John Carter, Charlene Long, Jill Hudson

Council Members Absent: Natalie Delgado, Jill Hudson, Ellis Arjmand, Walker Estes

EHDI Team Members present: Terri Ibieta, Danielle Mercer, and Margaret Berry

Guests Present: Jill Guidry from Louisiana Hands and Voices, and Nicky Gillies from the Louisiana Deaf-Blind project

Ms. Hubbard announced two current vacancies on the council for the seats of the Pediatrician and a representative from the Department of Education.

Review and Acceptance of Minutes: Theresa Nicholls made the first motion to approve the minutes from the last meeting and Leigh Anne Norman made a second motion.

Advisory Council Terms: Ms. Hubbard asked if current council members, who are eligible to serve another term, were interested in continuing to formally serve on the council. Theresa Nicholls: Yes, Dr. Carter: Yes, Dr. Voelker: Yes, Dr. Arjmand: Not present but Ms. Hubbard will follow-up with him, Dana Hubbard: Yes.

Ms. Hubbard reminded council members that the bylaws state that if they are not going to be able to attend a council meeting, they can assign a proxy. The proxy can attend in their seat but does not have voting rights. Council members were encouraged to consider who they might want to attend so the council has full representation at meetings. The council was also reminded that the bylaws state that after two consecutive absences, they could forfeit their seat.

Committee Updates: Leigh Anne Norman gave an update on the Committee for North Louisiana. The committee will meet next week, April 26th. Mollie Webb Speech and Hearing is again looking for an audiologist.

Dana Hubbard and Danielle Mercer provided the update for the CMV Committee: They had two very productive committee meetings since our last advisory council meeting. There are four hospitals now in the state that are piloting targeted CMV screening programs. They are working with them to try to get the data on the babies that test positive for CMV so that they can be tracked. The end goal is for all of these babies to be followed to receive appropriate screenings, in particular vision and hearing screenings. Currently, they are noticing a disparity between the number of cases being reported to EHDI and the actual number of cases that have tested positive. There is talk about a possible data sharing agreement with the hospitals. An audiologist at Ochsner in the New Orleans area and an audiologist at Woman's Hospital in Baton Rouge are starting to generate reports of babies that test positive for CMV so that they can be reported to the EHDI database.

EHDI Program Updates: Terri Ibieta provided updates. Last month, 22 EHDI stakeholders attended the national EHDI conference that was held virtually. 10 of those 22 were parents of deaf and hard of hearing children. The parents' conference fees were covered by Hands and Voices. At the end of March, Hands and Voices hosted a statewide face to face training.

Jill Guidry, the Hands and Voices director, shared information about that training. Presenters from the national chapter of Hands and Voices gave presentations for both Parent Guides and Deaf/Hard of Hearing Guides. A new Spanish-speaking Guide has been added to the New Orleans area, a new Parent Guide in the Monroe area and a new Deaf Guide in the New Orleans area. Families will begin to be seen face to face again.

Terri Ibieta shared information about two family surveys that are currently being conducted by EHDI. These are being conducted via phone, and the responses have been much more detailed. Marbely Barahona provided information about the surveys that are being completed. The first set of surveys targets hospitals identified as having a high census of Spanish-speaking families. Spanish-speaking families are asked about their experiences with access to information in their language. Results will be shared once the surveys are completed, and the information is compiled. Margaret Berry provided information about the second set of surveys she is completing regarding children enrolled in EarlySteps and the Parent Pupil Education program. There are 49 families enrolled in both programs to be contacted, and 16 of them completed the survey. The parents were asked about the timeliness of the initial contact, frequency, and frequency and consistency of services once they were

enrolled. Questions also looked at whether the services were provided in a family-centered manner, and if information was provided in an unbiased way. Parents were provided a gift card for their participation in the survey.

Terri Ibieta shared information about EHDI funding sources. The EHDI program is funded through two federal grants. One is through the CDC, the Centers for Disease Control and Prevention, and the other is through HRSA, the Health Resources and Services Administration. Terri shared information about the HRSA grant and its goals and objectives. At the next council meeting, she will share information about the CDC goals and objectives. The objective of the HRSA grant is to support the development of state programs and systems of care to ensure that children who are deaf or hard of hearing (D/HH) are identified through newborn, infant, and early childhood hearing screening, and receive diagnosis and appropriate intervention to optimize their language, literacy, cognitive, social, and emotional development. The first goal of the HRSA grant is to improve developmental outcomes for children who are D/HH. Two years ago, the EHDI Program began collecting language development scores from the PPEP outreach teachers for the children that they serve. Also, assessment results for children enrolled in EarlySteps will be collected for the first time next quarter. Theresa Nicholls asked whether a consistent measurement of language is being used across programs for this data tracking. She made a motion to reactivate the Advisory Council's language committee with a charge of looking at the language measurement used to assess development and progress of language in those early years. Jill Guidry seconded the motion. Terri informed the council that the second goal of the HRSA grant was to reduce loss to follow-up and ensure 1-3-6 guidelines are being met. Currently, between 88 and 89% of babies in our state who don't pass the newborn hearing screening do receive the needed outpatient follow-up testing. Goal 3 was a new objective added this grant cycle without any additional funding to support expanded capacity to support hearing screening in young children up to 3 years of age. The EHDI program will be meeting with the statewide Early Head Start director to determine how Early Head Start and EHDI can support each other and expand our efforts. In response to questions regarding late-onset hearing testing by Dana Hubbard, Danielle Mercer explained that the current American Academy of Pediatrics follow-up recommendation for children who pass newborn hearing screening without a risk factor for developing hearing loss is 4 years of age. Goal 4 was identified by Terri Ibieta as strengthening the capacity to provide family support and increase engagement between families with children who are D/HH and adults who are D/HH. This goal has been challenging due to COVID restrictions and parents not being able to meet face to face. However, these restrictions have recently been lifted. The 5th goal was identified as facilitating improved coordination of care and services for children who are deaf and hard of hearing and ensuring timely enrollment in early intervention after diagnosis. It was reported that data for babies referred to Non-Part C between January and October, 2021 revealed only 13% were enrolled within 15 days of referral, which is down from the baseline of 28%. Theresa Nicholls inquired about the reason for the decrease in the percentage. Terri deferred the question to the next meeting to Natalie Delgado. Theresa Nicholls also requested additional information about the average timeline for enrollment, stating that 30 days would be more acceptable than 6 months. Ms. Ibieta said that she could provide that data. She will provide a detailed report about the timeliness of services.

Early Intervention Update: Linda Frantz, the director of the Bright School, was not in attendance to deliver this update.

New Business: No new-business topics were submitted for discussion.

Public Comment: None

Adjourn: Dana Hubbard made an announcement that the next meeting will be held in person. Location was to be determined. Terri Ibieta stated that a new Save the Date will be sent out for July 29th. A vote was conducted, and the next meeting will be in the Baton Rouge area. Leigh Anne Norman requested the meeting be conducted later than 10am, maybe noon.

Jill Guidry made a motion to adjourn at 11:16am and Leigh Anne Norman seconded the motion.