

# Washington State EHDDI On The Road: The Adventure of Implementing Hospital Site Visits

Debra Lochner Doyle<sup>1</sup> MS, LCGC, Elysia Gonzales<sup>1</sup> RN, MPH, Karin Neidt<sup>1</sup> MPH, Marcie Rider<sup>1</sup> AuD, Laura Steinmetz<sup>2</sup> AuD

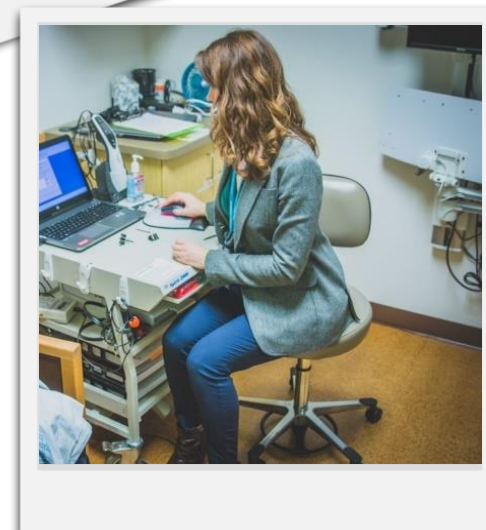


## Background

The Washington State Department of Health Early Hearing-loss Detection, Diagnosis, and Intervention (EHDDI) program implemented EHDDI Site Visits in 2011 to help our hospital-based newborn hearing screening programs with quality improvement and to improve communication between newborn hearing screening programs and the EHDDI program.

### EHDDI Site Visit Participants

- EHDDI Program staff
- Seattle Children's Hospital Contract Audiologist
- Program Coordinator at the hospital
- Staff performing newborn hearing screening
- Guide by Your Side® Parent Guide



## Process

### Pre-visit Key Informant Interview

EHDDI staff interviewed the Program Coordinator of the hospital over the phone prior to the scheduled EHDDI Site Visit. The Pre-visit Key Informant Interview included 23 questions that:

- Obtained program details such as number of staff, type of equipment used and protocols
- Identified concerns with screening and follow-up protocols to address during the EHDDI Site Visit
- Assessed the program's need for resources

### Each visit varied depending on the program's needs and challenges. During most EHDDI Site Visit participants:

- Shared data used to evaluate the quality of the program
- Identified and encouraged strategies for program improvement
- Reviewed best practice protocols for newborn hearing screening
- Provided technical assistance for hearing screening equipment
- Demonstrated and/or observed newborn hearing screening
- Addressed issues with reporting results to the EHDDI program
- Provided resources such as training materials, handouts, and scripts for sharing results with families

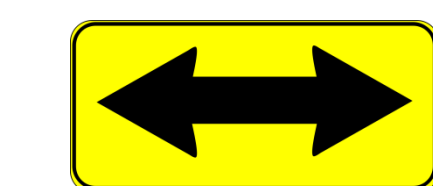
### Post-visit Survey

EHDDI staff sent an electronic Post-visit Survey to the Program Coordinator of the hospital following an EHDDI Site Visit. The Post-visit Survey included 11 questions that:

- Determined changes made to programs following the EHDDI Site Visit
- Obtained feedback for future site visits
- Evaluated the use of strategies suggested during hospital site visits including:
  - Sharing results with families both verbally and in writing
  - Using scripts for sharing results with families
  - Implementing annual competencies for newborn hearing screening staff



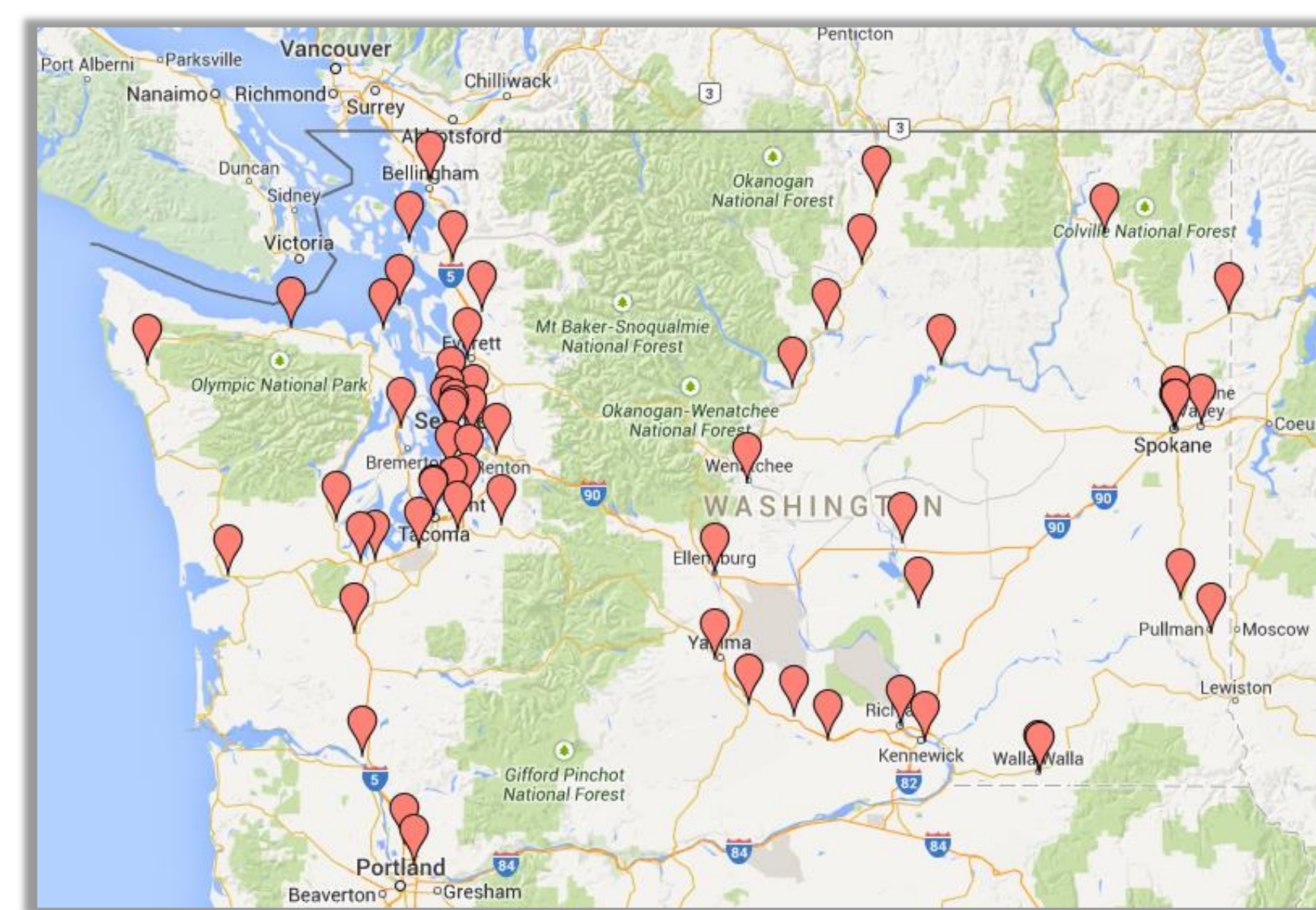
## Results



	Total Number of Hospitals
Received an EHDDI Site Visit	62*
Completed Pre-visit Key Informant Interview	59
Completed Post-visit Survey	47
<b>Completed Pre-visit Key Informant Interview and Post-visit Survey</b>	<b>45</b>

\*There are 63 birthing hospitals in Washington.

### Hospitals participating in EHDDI Site Visits



### Several programs shared improvements they made following the EHDDI Site Visit:

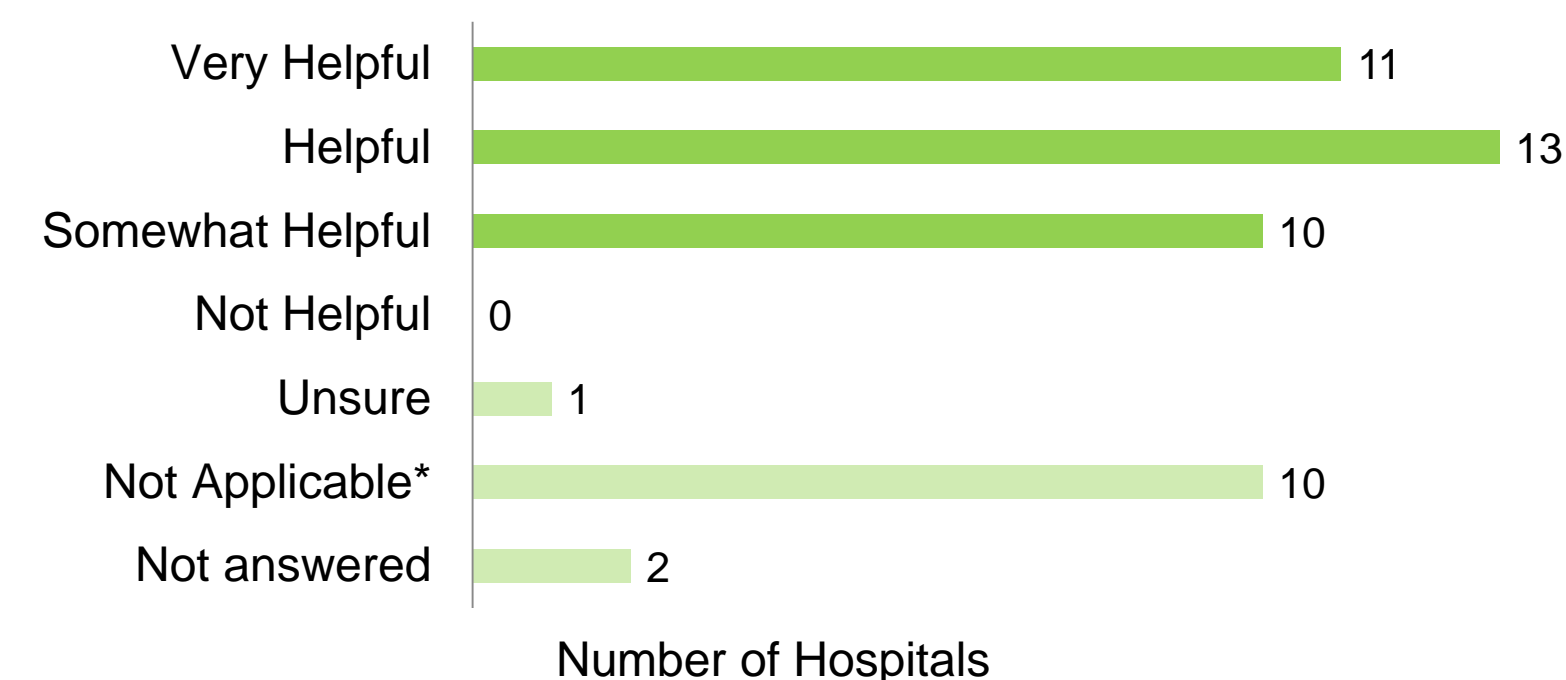
"We have implemented new procedures for handling refers and follow-up appointments to decrease missed and refer results."

"We began using new ABR equipment and are working on implementing two-stage screening."

"We now have an ABR to use in the NICU."

"New staff are trained with the NCHAM tutorials and are referred to NCHAM scripts."

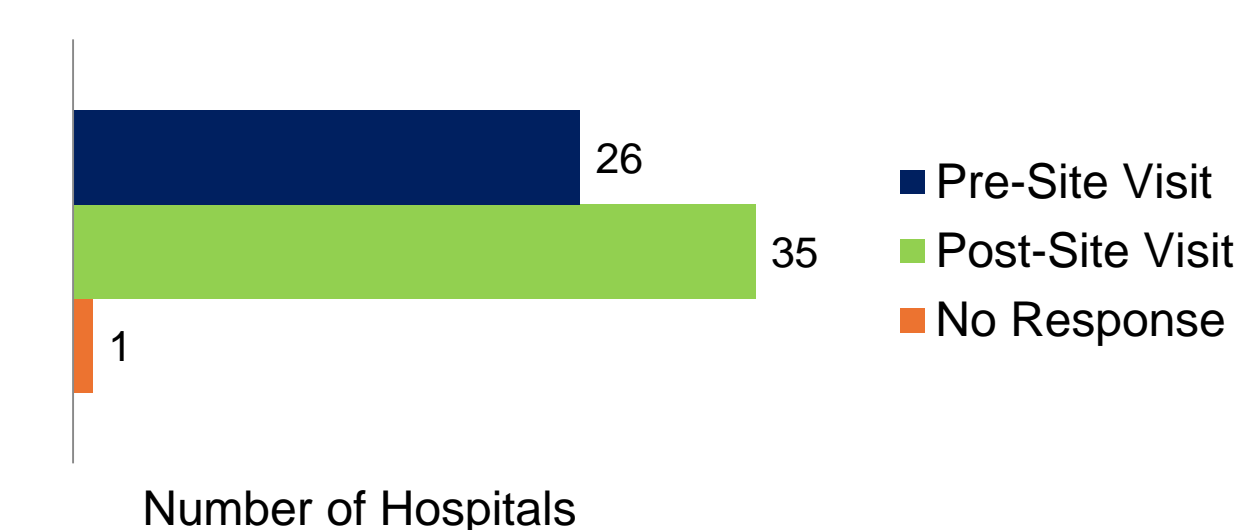
### Helpfulness of EHDDI Site Visit



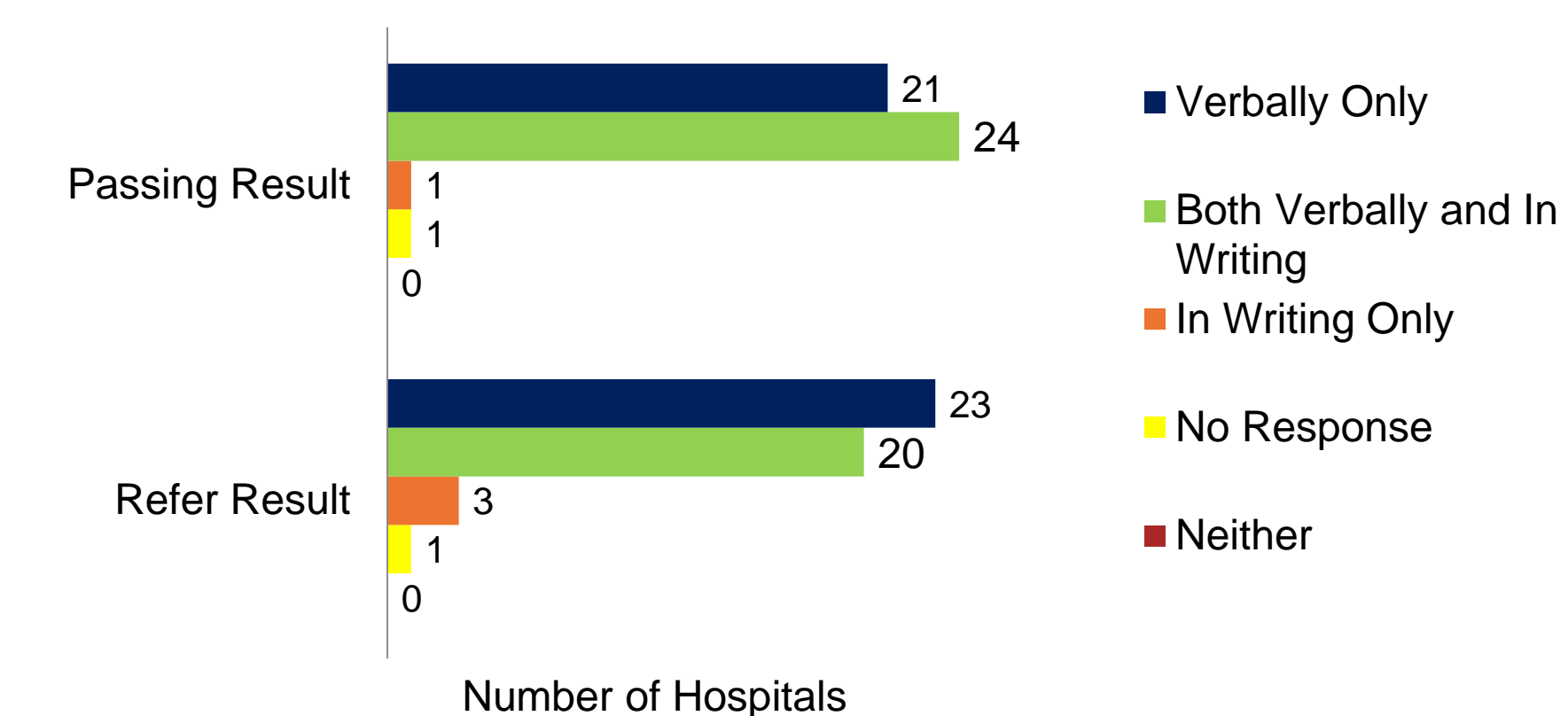
\*Likely due to Program Coordinator not present at last EHDDI Site Visit



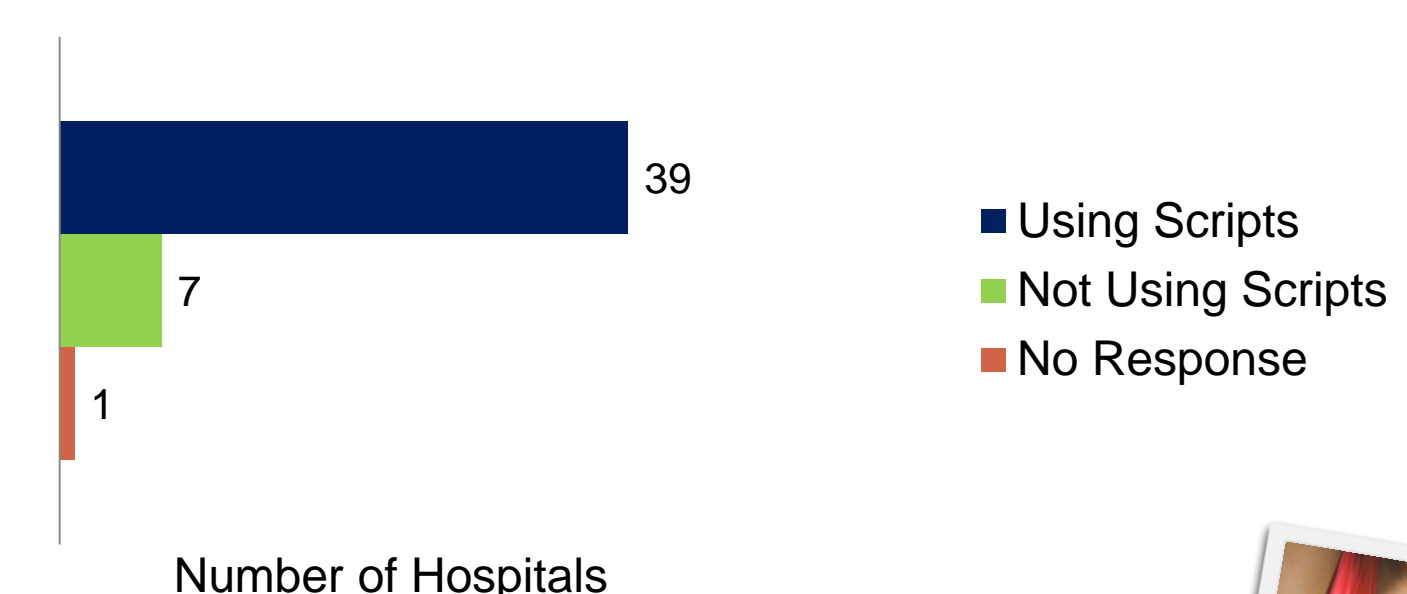
### Implementing or Planning to Implement Annual Competencies for Newborn Hearing Screening Staff



### Method of Sharing Results with Families



### Using Scripts for Sharing Results with Families



## Conclusions

### Challenges:

- Night shift staff who conduct most of the screening were not always present for the site visit
- Newborns not always available to demonstrate screening or for EHDDI staff to observe screening
- High turn-over in hospital newborn hearing screen staff
- Coordinating site visits with multiple hospitals to maximize efficiency

### Next Steps:

- Focus on visiting hospitals that demonstrate or communicate the greatest need for support
- Implementing small tests of change with hospitals with high refer rates and loss to follow-up