

Welcome, Introductions, and Project Overview

Robert Cicco, MD, FAAP
Chairperson, Quality Improvement Expert Group

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Project Expert Group

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<p>Bethany Wenger, AuD, CCC-A Specialists in Pediatrics & Adolescent Medicine, Nashville, TN</p>	<p>Sadie Silcott, MBA, MPH Maternal and Child Health Bureau Rockville, MD</p>
<p>Susan Wiley, MD, FAAP Cincinnati Children's Hospital Medical Center Cincinnati, OH</p>	

Project Purpose

- Improve pediatric primary care practice and the role of the medical home in EHDI
- Enhances knowledge and practice related to the following:
 - Documentation of screening results
 - Referrals for audiological diagnostic exams
 - Identification of risk factors for late-onset and progressive hearing loss
 - Communication of these results with parents and families

Project Aim

By July 2017, five pediatric offices will make practice-based improvements that lead to enhanced care across the delivery system and strengthen the role of the medical home within the EHDI system. The participating pediatric practices will make improvements so that:

- 97% or more of all newborns have documentation of the results of their final newborn hearing screening in their medical records by 6 weeks of age
- 97% of newborns have documentation in their medical record that the results of the newborn hearing screening were discussed with the family no later than 6 weeks of age
- 97% or more of all newborns identified to have risk factors associated with hearing loss will have documentation of those risk factors in their medical record by 6 weeks of age and will have an individualized care plan by the 4 months of age
- 100% of children who do not pass their newborn hearing screening have completed an audiological evaluation by 3 months of age and documentation will be in their medical record by 4 months of age

Project Measures

- The project measures focus on the following areas:
 - Newborn hearing screening results received, documented in the medical record and discussed with families
 - Assessment, documentation and discussion of risk factors for hearing loss
 - Development of a care plan for newborns identified with risk factors
 - Referral initiated for newborns who do not pass the newborn hearing screen and documentation of referral in the medical record
 - Audiological exam conducted, documented, and results discussed with families

Participating Teams

Practice Improvement Teams

- 1. Beverly M Gaines, MD & Associates, PSC**
Louisville, KY
- 2. Centennial Pediatrics**
Little Elm, TX
- 3. Hillsboro Pediatric Clinic**
Hillsboro, OR
- 4. Summerwood Pediatrics**
Liverpool, NY
- 5. UK Pediatrics @ Maxwell**
Lexington, KY

Project High Level Timeline

	Pework/Baseline (January 2017)		Action Period (February – July 2017)	
Participant Enrollment (December 2016)	<ul style="list-style-type: none"> Project orientation webinar and QIDA demo to understand data collection system Review and submit charts from past 3 months for all children 6 weeks and 4 months with “do not pass” screening and up to 20 charts each for children 6 weeks and 4 months who passed screening 	Learning Session QI and Topical Education (February 2017)	<ul style="list-style-type: none"> Review and submit charts monthly for all children 6 weeks and 4 months with “do not pass” screening and up to 20 charts each for children 6 weeks and 4 months who passed screening Participate in at least 5 webinars to discuss data and receive education Implement interventions using PDSA cycles Communicate with other participants via listserv Participate in 1 QI coaching call and in the post-project feedback call 	Attestation Process (August 2017)



Participant Expectations/MOC Part 4 Points

- The project is pending approval to provide 25 MOC Part 4 points
- Pediatricians must meet the following requirements to qualify for points:
 - Be intellectually engaged in planning and executing the project
 - Implement the project's intervention
 - Review data in keeping with the project's measurement plan
 - Collaborate actively by attending team meetings
 - Complete a web-based pre- and post-implementation survey
 - Hold a brief discussion/interview with a family from your practice to assess gaps in patient care
 - Participate in the Learning Session
 - Perform monthly chart reviews to measure practice-based change around project aims and measures and submit findings through 6 monthly narrative reports
 - Participate in a series of five, one-hour facilitated monthly webinars
 - Participate in one QI coaching call and in one post-project feedback call with the QI Advisor

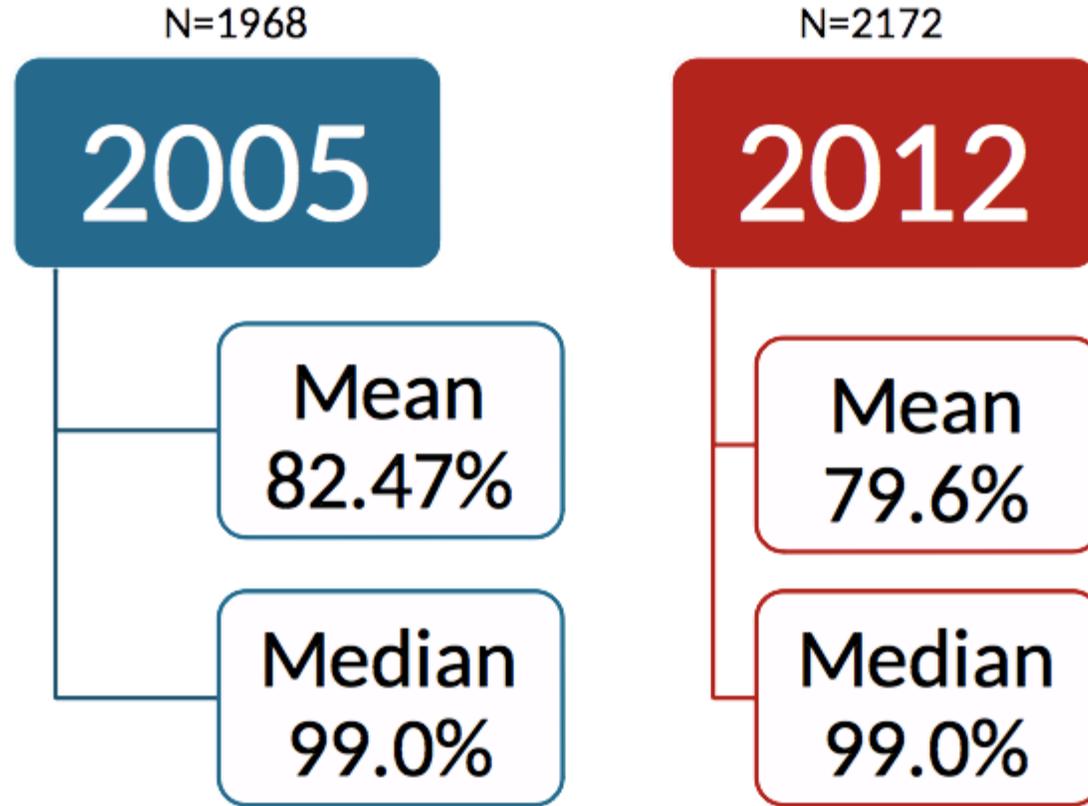
So why is this project so important?

Purpose of 2012 Physician Survey

- ✓ Understand the degree to which medical homes are engaged in EHDI systems.
- ✓ Update our understanding of physician attitudes & knowledge re: EHDI, assessing progress since 2005.
- ✓ Drive strategies to support physicians in their role in EHDI.



**For newborns in your practice during the past year,
estimate the percentage for which you received initial
newborn hearing screening results?**



What is your best estimate of the earliest age at which:

	<1 mo	1-3 mos	4-6 mos	7-9 mos	10-12 mo	>12 mo	
	75.7%	11.7%	7.1%	4.2%	0.1%	1.2%	a. A newborn not passing the hearing screening should receive additional testing
	41.0%	51.9%	6.1%	0.3%	0.7%	0.8%	
	51.9%	10.8%	12.4%	15.3%	0.3%	9.3%	b. A child can be definitively diagnosed as having a permanent hearing loss
	20.9%	37.0%	24.8%	2.2%	10.2%	5.3%	
	38.3%	9.0%	11.2%	47.3%	0.0%	18.1%	c. A child can begin wearing hearing aids
	12.2%	26.9%	31.9%	3.7%	16.6%	9.1%	
	61.6%	8.0%	6.0%	0.0%	0.4%	7.0%	d. A child with permanent hearing loss should be referred to early intervention services
	26.9%	33.3%	39.1%	0.0%	8.1%	4.2%	

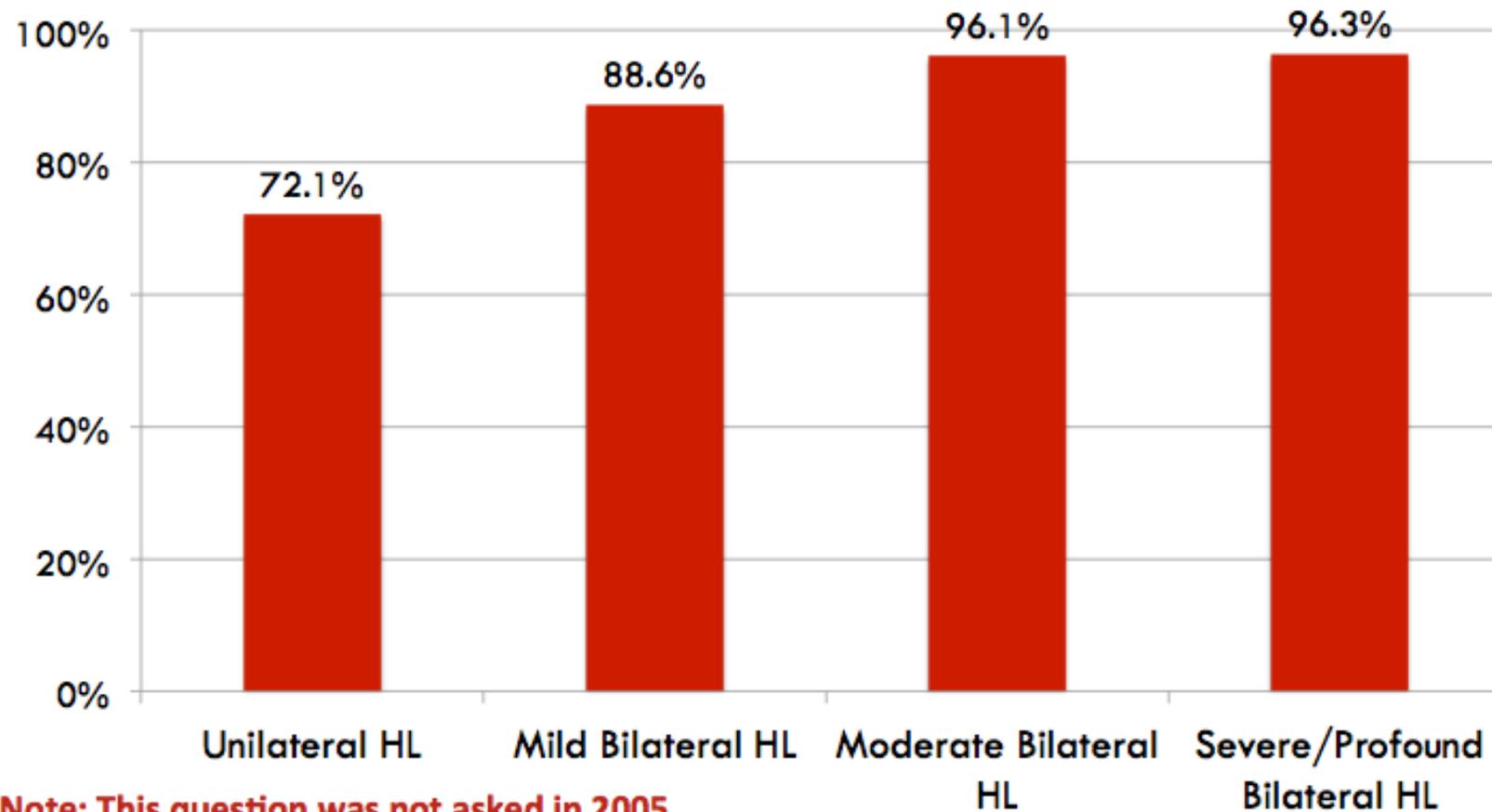
2005/2012 Comparison

List any specialists to whom you would routinely refer the family of a child with confirmed permanent hearing loss

(open-ended question)

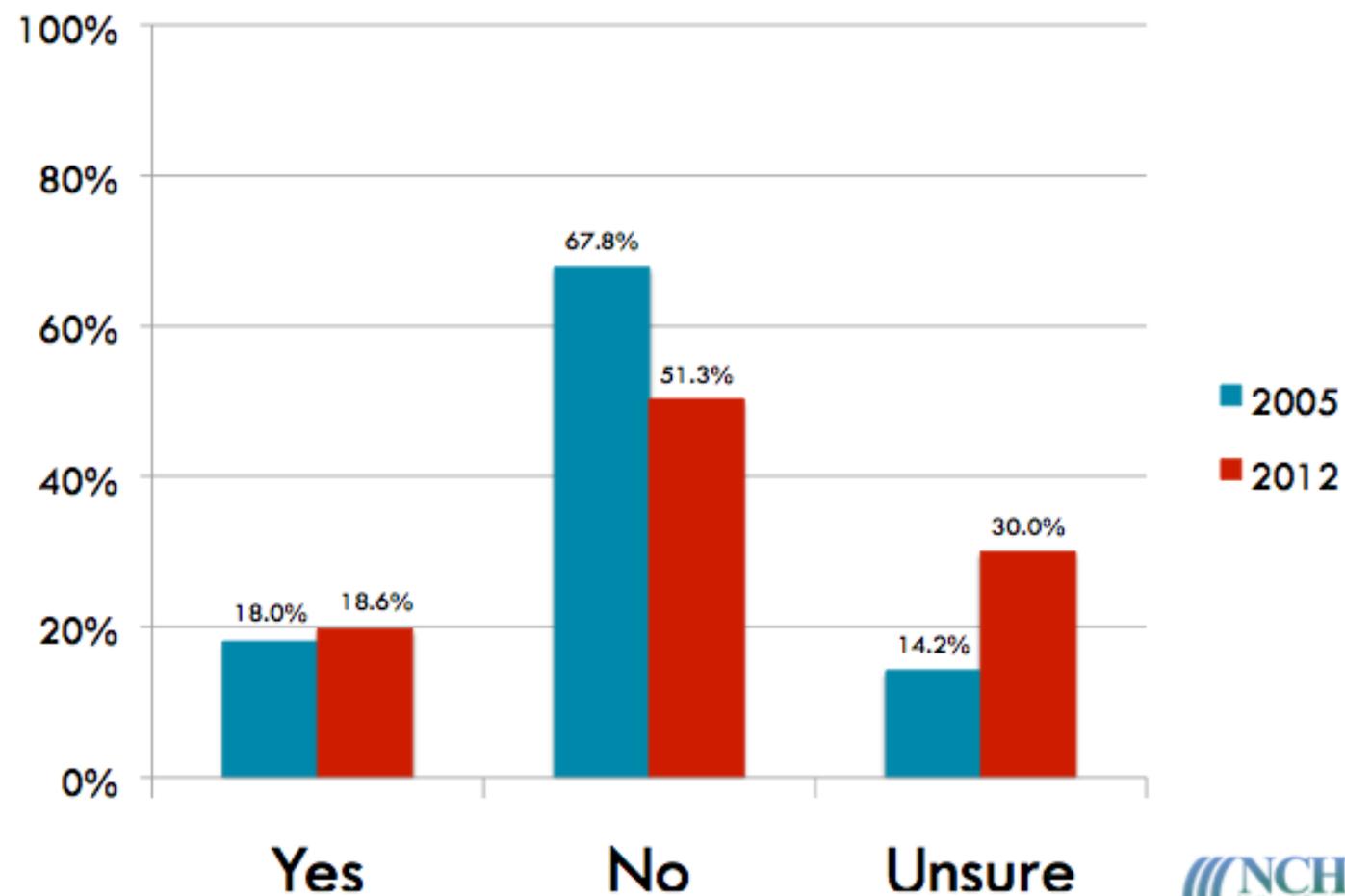
Specialist	2005	2012
ENT/Otolaryngology*	75.6%	73.4%
Geneticist*	8.8%	9.3%
Ophthalmologist*	0.9%	2.2%
Audiologist	41.2%	53.0%
Speech Language Pathologist	22.9%	27.0%
Early Intervention	11.4%	12.0%
Neurologist	7.0%	5.6%

Which of the following can have an impact on speech and language development? (Check all that apply):



Note: This question was not asked in 2005

Did your training prepare you adequately to meet the needs of infants with permanent hearing loss?



Questions?

