

Meeting Minutes: EHDI Newborn Hearing Screening Advisory Committee November 18, 2020

Minutes prepared by: Darcia Dierking
Location: Virtual – Microsoft Teams and Zoom

Attendance

Present:

Ingrid Aasan, Renae Allen, Kathy Anderson, Joan Boddicker, Nicole Brown, Mary Cashman-Bakken, Kirsten Coverstone, Laura Godfrey, Danelle Gournaris, Hannah Herd, Tina Huang, Colleen Ireland, Joscelyn Martin, Abby Meyer, Jessica Novak, Sara Oberg, Elizabeth Pai, Anna Paulson, Emilee Scheid, Katie Warne, Terry Wilding, Jay Wyant

Absent: Gloria Nathanson, Cat Tamminga

Agenda Item Minutes

- Topic/Presenter/Time/Decision Item
- Welcome and Announcements/Laura Godfrey/1:00-1:20pm
 - Logistics – explanations of how to access ASL interpreters, CART, Zoom, Microsoft teams
 - Attendance Roll Call
 - Minutes of last meeting were approved
- MDH Update /Nicole Brown/1:20pm
 - Many MDH staff in CYSHN are re-assigned to Covid response. Staff are working to continue providing resource binder to families, and making referrals to MN Hands & Voices and local public health for follow-up and back-up referrals to Part C, and providing information to primary care providers as best as we can, however not as timely as in the past. Nicole Brown has taken a new role as section manager of CYSHN, Darcia Dierking to take the EHDI Coordinator Role that focuses on follow-up after identification. Darcia reported out on the continuing education/professional and stakeholder development content category survey results and priorities.
- Impact of COVID-19 on Diagnosis through Intervention within the EHDI system/Stakeholders
 - Laura Godfrey/MN Hands & Voices/1:28pm

- Number of referrals for this year remains close to referrals from the previous year. Continuing follow-up in virtual formats. Challenges with staff comfort in doing in-person visits, and families getting used to visits online using camera. Last quarter did 12 in-person visits. They did receive some funding from MNCDHH for disposable clear masks to use. Received 30 referrals to DHH Guides, with engagement at varied levels. Staff are creating videos for families about various topics including technology for communicating, and scavenger hunt, DeafBlind resources and internet pledge to talk with kids about safety. Family and ASTra events have been virtual since April, limiting to 10 people or less to help families feel connected and engaged. Sent families supplies for activities. Led a book club in coordination with the Deaf Mentors.
- Danelle Gournaris/Deaf Mentor Family Program/1:38pm
 - At beginning of pandemic, half of families put mentoring on hold, but by June, re-evaluated case by case and followed up with them to see if they could continue on virtual format. Deaf Mentors have done a phenomenal job. Some families still doing in-person visits and are following specific guidelines. Several reasons given why virtual visits are difficult for some due to technology needs, internet bandwidth and learning style. They have clear masks provided by the MNCDHH. They had some challenges with face shields. Most families prefer to do home visits in person and looking forward to having COVID situation resolved. Deaf Mentors have made videos for families. Applications for enrollment has declined a bit – they have about 10 new families per quarter compared to 15 families per quarter pre-COVID pandemic.
- Katie Warne/Speech and Language/1:42pm
 - Beginning of pandemic in March had to cancel in-person appointments. Then got telehealth going and were back to full-time caseload in July (50% with virtual visits). Had wanted to do virtual visits for a long time pre-Covid, and now since that is an option, can see more families in Minnesota than could previously, and their caseload is now higher. For in-person visits there is a one-parent rule, so virtual visits allow more adults to be involved in sessions. Teletherapy allows clinician to “coach” role which has been helpful for in handing over the activity to parents to get the experience with the therapy goals. There is flexibility to switch to virtual as needed. Using a software platform through Amwell which is part of their medical record system. Families are using their own technology devices, needing at minimum a cell phone. Clinic not able to provide technology for families.
- Sarah Oberg/Speech and Language/1:50pm
 - Using telehealth for therapy 90-95% of visits. Families tend to prefer the video due to the sound quality. Also seeing some people in-person using face shield and Plexiglas at desk, and patients wear a mask. Very busy with caseloads and Sarah predicts this format will stick around after Covid pandemic, especially if people are sick or if there is long distance or bad weather. Answered questions about type of technology used for telehealth. Using Google Duo with an iPad. Families are providing their own equipment. If there are any resources to support families getting equipment that would be welcome.

- Mary Cashman-Bakken/MDE/1:58pm
 - Teachers and staff have done a wonderful job given the circumstances. Mary talked about the Child Outcome Summary Assessments. In Minnesota, they are still collecting assessment data, even during COVID pandemic, and are shifting focus from subjective to objective assessments. Still teaching, doing everything possible to meet the needs of DHH kids. Technology skills for teachers, parents, and students has grown tremendously. They had early childhood conference that was held virtually.
- Ingrid Aasan/MN Low Incidence Projects/2:06pm
 - Helping schools interpret Governor's orders and providing an enormous amount of support to teachers, administrators and families. Using websites to post resources. Gave links for the websites for Low Incidence Projects. Providing technical assistance for accessibility needs, virtually. Moving more to virtual platforms. The content hasn't changed but had to move everything online. Each region is continuing to meet in their regional EHDI teams and the statewide team. Workgroups were started this fall to increase collaboration and communication between educational service providers. Have offered some virtual family support options. Piloting many ideas. Thank your teachers, they are working hard.
- Terry Wilding/MN State Academies/2:16pm
 - Making many modifications due to COVID, especially in the ways that we connect with families and children and ensuring videos are accessible. Added interpreter support because many teachers use ASL. Using Zoom or other platforms to communicate. Using split screens for sharing books. Providing teletherapy. Some challenges with technology and internet connection in rural areas; spent money on internet hot spots for families so they can connect. Had in-person classes this fall starting with youngest children and then older students were able to come for a while, and they are transitioning back to online models as the cases of Covid are rising. They have made many adjustments on campus, facemasks, face shields, hand washing stations and air filters. Hoping to be back on campus in the spring. Strategic plan included virtual learning and online support to school districts and now with the pandemic that process is coming together more quickly and they expect to be able to increase support to students and families statewide. Librarian has been doing a family literacy night. Members encouraged to check out website.
- Questions/Laura Godfrey/2:28pm – due to time constraints, send additional updates via email or chat.
- Closure/Laura Godfrey/2:29pm – Next meeting Feb 17, 2021, virtual. Meeting adjourned.

Next Meeting

Date: Feb 17, 2021

Time: 1:00 pm

Location: Virtual

Agenda items: submit proposed agenda items to ehdi@state.mn.us

Approved: February 17, 2021