

Tool for Assessing Health Needs

in relation to

Preconception Care and Screening

Part of the PHG Foundation Toolkit for Assessing Health Needs in relation to Congenital Disorders

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PHG Foundation Needs Assessment Tool for Preconception Care and Screening

Country/Territory of interest for present needs assessment on Preconception Care and Screening

PCCS-0 INTRODUCTION

Welcome to the PHG Foundation Congenital Disorders Needs Assessment Tool, for Preconception Care and Screening (PCCS). This Tool consists of five sections, which are explained briefly in the Guide:

- the Country Profile
- the Needs Assessment section
- the Situation Assessment

- the Initial Prioritisation
- the Summary Report.

The narrative and the written instructions are contained in the Tool, while numerical input and calculations are performed in the Calculator. The Tool and the Calculator should be used alongside one another. Where you need to put data into the calculator, you will see an instruction.

Decision points

At certain points you will be prompted to decide whether it is necessary to continue with your present needs assessment. If the burden is low, for example, you may decide your efforts are better used on another topic, but this should be made explicit.

Subpopulations

If there is substantial variation in burden or service factors between population sub-groups, a whole-population needs assessment may not be appropriate. It may be necessary to conduct separate assessments for the individual groups, or to focus your assessment on a group that is particularly affected. At the minimum, you should ensure that substantially higher or lower rates in an identified population sub-group do not lead to inaccurate estimates for the whole population.



PCCS-CP COUNTRY PROFILE

Demographic and health service factors are key determinants of the scale of congenital disorders and of the potential to provide care and prevention.

Note: If you or others conducting PHG needs assessments have already completed Demography and Health services sheets in another topic Calculator for this population, you can copy that data into the present Calculator.

Population definition: briefl	y describe the population if you are not using the whole country.
Some sources containing located at the end of this d	data relevant to the Country Profile are given in Appendix 1 ocument.
Demographic factors in a disorders. Variables such incidence of disorders, whi	population have important effects on the burden of congenital as maternal age and level of consanguineous marriage affect the ile variables such as birth rate and contraceptive prevalence affect births. Other indicators are useful for understanding the general
	tor named 'Demography' there are estimates of various important ou can add data from your own sources.
	>>> Go to Calculator sheet Demography
Ideally, activities related	alth services to the care and prevention of congenital disorders are well vices, and particularly into family planning, women's, maternal, d public health services.
•	escription of the operation of health services and programmes in scribe their accessibility and coverage, and who is responsible for



conception period, pregnancy and childh	and including constitutions and corponing for
	iood, including genetic services and screening for
genetic conditions.	
for change and when completing the p	important to consider when assessing the potential prioritisation process. Please now go to the Health Services) and enter estimates of the health-service
	>>> Go to Calculator sheet HealthServices
Please summarise the country profile, he Comment on areas for improvement in the country profile, he comment on areas for improvement in the country profile, he count	
	nighlighting where the indicators are unsatisfactory. ne indicators.



PCCS-NA NEEDS ASSESSMENT SECTION

PCCS-NA1 Preliminary assessment of public health need

This section should help you to make an initial assessment of the level of need for PCCS in your country or territory. You should complete the Tables using epidemiological data where available. If data are not available, please enter a qualitative assessment using a rating system of 1-5, where 1 indicates that the risk factor is not significant in your population, and 5 indicates a highly significant risk factor.

Calculator PCCS-NA1.1 deals with maternal and environmental risk factors for congenital disorders. Please enter estimates, including an indication of variation within your population.

>>> Go to Calculator sheet PCCS-NA1.1

Calculator PCCS-NA1.2 addresses genetic conditions whose birth prevalence may be influenced by preconception interventions such as carrier screening, preconception advice on increased risk due to family history or belonging to a high-risk population.

Based on this preliminary assessment and your experience, how do you rate the need for

effective PCCS services as a public health issue in the country or region?

>>> Go to Calculator sheet PCCS-NA1.2

Very low	Low	Medium	High	Very high	Do not know
Explain your o	choice.				

Decision point: If you do not consider this to be a significant public health problem and no specific policies and interventions are required as a priority, you may stop

here and move to another topic. Otherwise, continue with section PCCS-NA2.



PCCS-NA2 Assessment of policies, services and information

PCCS-NA2.1 Desired situation

First outline the desired situation ('where do we want to be?') in relation to the prevalence of genetic and environmental risk factors in the preconception period.

iviaternai risk	tactors and genet	ic congenital di	soraers		
in your cour screening an that may aff	er what policies and ntry or region. On support in the precent of the precent of the may focus on the precent of the precent o	ptions include preconception p gnancy and inf	an integrated eriod on the ful ant. Alternative	programme pro Il range of risks ely (or in additi	oviding advice, and conditions ion) policies or
defects or sir	ngle gene disorder		or particular cc	nutions such	as fiedral tube



Now consider services that may be delivered in the preconception period, such as women's and reproductive health services; preventive services and interventions aimed at risk factors such as alcohol abuse, diabetes, epilepsy or teratogen exposure.

Services and interventions		
Please comment on the availability of in information, health service indicators).	nformation (e.g. re	gistries, epidemiological
Desired outputs resulting from action (e.g. a interventions and services)	availability, coverage	and quality of policies,



PCCS-NA2.2	Current situation and gaps

Now please asse indications on pote			inmet needs	('where are	we now?')	, giving
PCCS-NA2.2.1		programme				
Briefly list any na screening in your						
or Department).	, 0	•	·		,	Í
Preconception car	·e					
Preconception scr	eening					



Do you have an integrated preconception care programme? If yes, please describe.
Is presented and delivered within other health care pregrammes (e.g. as part of family
Is preconception care delivered within other health care programmes (e.g. as part of family planning services) or as an isolated preconception care programme for a specific condition?
Give details.
Are there gaps or inadequacies in policies/programmes and in their implementation? Give details.
Give details.



,,	plans to address ther	n? Give details.	
What else can be	e done to tackle unm	et needs?	



PCCS-NA2.2.2 Services and interventions

In Table PCCS-NA2, list and describe current preconception care and screening services. Describe any significant variations in the availability or delivery of services.

Table PCCS-NA2 Delivery of preconception interventions (add rows if needed)

Component	Tick if available*	Description	Variation**
Family planning services			
that include preconception			
care			
Advice on diet			
Advice on folic acid			
supplementation before			
conception			
Folic acid fortification			
Advice on avoidance of			
environmental &			
occupational teratogens			
Screening and treatment			
for syphilis			
Rubella immunisation			
and/or screening			
Screening for other			
infections (specify)			
Programmes and advice			
on smoking			
Programmes and advice			
on alcohol consumption			
Management of chronic			
conditions, including			
diabetes, obesity and			
epilepsy			
Advice on use of			
prescribed and over the			
counter medicine during			
pregnancy			
Discussion of relevant			
history for risk of			
congenital disorders,			
inherited disease or			
repeated miscarriage			
Carrier screening for			
genetic conditions e.g.			
haemoglobin disorders and G6PD deficiency			
Advice on risk of			
advanced age in			
pregnancy			
Or optor p/a if not relevant			

^{*} Or enter n/a if not relevant for your population.

^{**} Describe any significant variations in the programme coverage across the country/region and any sub-groups of the population who are under served by the programme.



Comment country/terr	ritory,	er o	on on	sign any	ificant sub-g	varia roups	ations of the	in po	progra pulation	mme who	co are	verage unders	acros erved	ss by	the the
How is the	delive	erv of	pro	aram	mes m	onitor	red and	l ev	aluated?						
	40	., o.	ρ.σ.	g. a			<u> </u>								
Are the pre	conce	eption	sei	vices	s being	satis	factorily	/ de	elivered?						



Are the about	ove services ing services,	and interve maternal an	ntions well d child heal	integrated th services)	with other?	health se	rvices (e.g
				,			
	cies, services mployment e		entions well	integrated	with other i	nitiatives	(e.g. social
	interventions erent populat		cross the c	ountry or te	rritory equit	ably, acco	ording to the



Are there any gaps or inadequacies in the delivery of services and interventions? If yes,
what are the main reasons (e.g. lack of priority, planning, financial resources, facilities and
equipment, trained personnel, managerial deficiencies)?
If there are gaps, are there plans to address them? Give details.
If not, is there a need for service changes or implementation of services or interventions? List what could be done and how.



PCCS-NA2.2.3 Information needs

Comment on the quality of any existent surveillance, other epidemiological and research data that is relevant to the conditions that you provide advice on or screen for before
pregnancy (e.g. carrier screening) and also on data for programme monitoring.
Is there a need for implementation or changes in information systems in relation to preconception care or screening programmes?
preconception care or serecting programmes:
If there are unmet information needs, how far does the absence of appropriate data hamper action? What can be done?
action? What can be done?



a need fo ? What ca		in	relation	to	preconception	care	or	preconception
e unmet rection? Wha		ow	far does	the	e absence of a	opropr	iate	research data
of the mai				alcı	ulator and NA2	above	.)	



PCCS-NA3 Qualitative assessment of interventions

Now consider existing interventions and their coverage, effectiveness, cost-effectiveness, and their current impact (Table PCCS-NA3a) and expected impact (Table PCCS-NA3b). Use numbers from '1' (very low) to '5' (very high). Please add rows as appropriate.

Table PCCS-NA3a Qualitative assessment of the impact of current interventions

Intervention	Coverage	Effectiveness	Cost- effectiveness	Impact
Family planning services that include preconception care				
Advice on diet before conception				
Advice on folic acid supplementation before conception				
Folic acid fortification of foods				
Advice on avoidance of environmental and occupational teratogens				
Advice on risks of use of prescribed and other drugs				
Screening and treatment for syphilis before pregnancy				
Rubella immunisation and/or screening				
Screening for other infections that may be teratogenic				
Programmes and advice on smoking				
Programmes and advice on alcohol consumption				
Management of chronic conditions, including diabetes, obesity and epilepsy				
Discussion of relevant history for risk of congenital disorders, inherited disease or repeated miscarriage				
Carrier screening for genetic conditions e.g. haemoglobin disorders and G6PD deficiency				
Advice on risk of advanced age in pregnancy				

G6PD = glucose-6-phosphate dehydrogenase



Table PCCS-NA3b Qualitative assessment of the **expected** impact of changes and interventions

Intervention	Coverage	Effectiveness	Cost- effectiveness	Impact
Family planning services that				
include preconception care				
Advice on diet before				
conception				
Advice on folic acid				
supplementation before				
conception				
Folic acid fortification of foods				
Advice on avoidance of				
environmental & occupational				
teratogens				
Advice on risks of use of				
prescribed and other drugs				
Screening and treatment for				
syphilis before pregnancy				
Rubella immunisation and/or				
screening				
Screening for other infections				
that may be teratogenic				
Programmes and advice on				
smoking				
Programmes and advice on				
alcohol consumption				
Management of chronic				
conditions, including				
diabetes, obesity and				
epilepsy				
Discussion of relevant history				
for risk of congenital				
disorders, inherited disease				
or repeated miscarriage				
Carrier screening for genetic				
conditions e.g. haemoglobin				
disorders and G6PD				
deficiency				
Advice on risk of advanced				
age in pregnancy				

G6PD = glucose-6-phosphate dehydrogenase



PCCS-NA4 Quantitative assessment of interventions

The following sheets in the Calculator allow you to estimate the potential reduction in birth prevalence of various conditions, through preconception care and screening.

Note: If you or others conducting PHG needs assessments have already completed the intervention(s) sheets in another topic Calculator for this population, you can copy that data into the present Calculator.

- >>> Go to Calculator sheet PCCS-CHD
- >>> Go to Calculator sheet PCCS-DOWNS
- >>> Go to Calculator sheet PCCS-FASD
- >>> Go to Calculator sheet PCCS-NTD
- >>> Go to Calculator sheet PCCS-OFC
- >>> Go to Calculator sheet PCCS-RUB
- >>> Go to Calculator sheet PCCS-SYPH
- >>> Go to Calculator sheet PCCS-TER



PCCS-NA5 Situation assessment

Now consider your situation and describe the **S**trengths, **W**eaknesses, **O**pportunities and **T**hreats in relation to policies and services, using the SWOT diagram in Table PCCS-NA5.

 Table PCCS-NA5
 SWOT diagram

Internal environment	External environment	
Strengths	Opportunities	
		+
Weakness	Threats	
Weakiless	Tilleats	
		_



PCCS-NA6 Initial prioritisation: Comparing interventions

The prioritisation team and processes

List the persons and organisations invited for and involved in the initial prioritisation process in Table PCCS-NA6a, and briefly explain how they were chosen.

Person invited	Organisation represented	Accepted (Y/N)
3rief explanation of choic	e of participants and give any other comm	nents.
	oup your ground rules, prioritisation crite	
complete Tables PCCS-N	NA6b to PCCS-NA6d. Start with the ground	d rules.
Table PCCS-NA6b Gro	ound rules for the prioritisation process (ad	dd rows if needed)



Now list in Table PCCS-NA6c the prioritisation criteria you will use. You may wish to add weights to each criterion (from '0' to '1') in the table.

Table PCCS-NA6c	List of criteria for prioritisation of interventions (add rows if needed)
Based on your asse areas for consideration	ssment of needs, please consider and list in Table PCCS-NA6d action on.
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
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Table PCCS-NA6d	List of action areas for consideration (add rows if needed)
Table PCCS-NA6d	List of action areas for consideration (add rows if needed)

Based on the criteria selected, compare the Action Areas and rank them from the highest to the lowest priority. You may enter the results directly, following your discussions. If helpful, this can be done in a more systematic way using a decision analysis software (see the Prioritisation and Supporting document). Show your results in Table PCCS-NA6e, by entering the selected 'Action Areas' from the highest priority (1) onwards, using as many rows as appropriate. Tick the last column for all action areas that you consider are of enough priority to carrying over to the latter stages of the prioritisation process. This will enable the comparison of these results with those for other conditions or topics at a later stage.

Table PCCS-NA6e List of priority action areas and interventions for preconception care and screening

Priority	Action area	Carry over
1. highest		
2.		
3.		
4		
5		

You have completed this Section! Now please proceed to the Summary Report.



PCCS-NA7 Summary report

It is now time to bring together the main findings of your needs assessment into a summary report. This will present in one place the basic information about the need for preconception care and screening services, the present state of interventions and the potential to improve care and reduce incidence.

Briefly describe how the relevant services are organised ¹ .			
meny describe now the relevant services are organised.			
	£ 1	h	
List the main service activities and interventions currently available	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e an
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e an
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and
List the main service activities and interventions currently available prevention of the congenital disorders ² .	for t	he care	e and

¹ Possible reference sections: CP2

² You may wish to include an assessment of the effectiveness, cost-effectiveness, coverage, quality and level of satisfaction with the interventions or services.

Possible reference sections include NA1.1, NA1.2, NA2.2.1.



Are there any threats to the continuation of services ³ ?	
What are the unmet needs as assessed by the Toolkit ⁴ ?	
Is it feasible to meet the identified needs ⁵ ?	
is a reason to most the restrained reside.	

³ For example, in relation to resources, acceptability, competing priorities

⁴ You may wish to consider the following questions: i) What are the main needs? ii) Is appropriate information available? iii) Are appropriate legislation, policies and programmes in place? iv) Are appropriate services and interventions in place? v) Are the main risk factors being addressed? vi) If appropriate, are prevalence rates, e.g. at birth and population level, as low as they can be? vii) Is prevention and care being delivered effectively, cost-effectively and according to need? viii) Are prevention and care activities being delivered fairly (equity)? Possible reference section: NA3

⁵ You may wish to consider strengths, weaknesses, opportunities and threats. Possible reference section: NA4



What actions may be required to respond to the unmet needs?	
Describe how the prioritication has been done and the main findings	
Describe how the prioritisation has been done and the main findings ⁶ .	
List the planned activities and how they will be evaluated.	

⁶ Possible reference section: NA6



List the proposed next steps.	



APPENDIX 1 - SOURCES OF DATA FOR THE COUNTRY PROFILE

For demographic, socio-economic and other indicators for your country or world regions, you may use the links below or other sources available to you.

1. Consanguinity

http://www.consang.net/index.php/Global prevalence tables

2. Countdown to 2015 (profiles for selected countries) http://www.childinfo.org/countdown_638.htm

3. Global health Observatory (GHO) http://www.who.int/gho/en/index.html

4. Health Indicators database. Pan American Health Org (PAHO) http://ais.paho.org/phip/viz/basicindicatorbrowaser.asp

5. Health of Nations

http://www.healthofnations.com/countries/map/outcomes/life

6. Immunisation

http://apps.who.int/immunization_monitoring/en/globalsummary/countryprofileresult.cfm

7. Indicator definitions. (WHO) http://www.who.int/whosis/indicators/en

8. UN Demographic Yearbook (UNDY) series http://unstats.un.org/unsd/demographic/products/dyb/dyb2.htm

9. UN Statistics Division

http://unstats.un.org/unsd/demographic/products/socind/health.htm

10. UNICEF country statistics

http://www.unicef.org/statistics/index_countrystats.html

11. UNICEF reports on The State of the World's Children http://www.unicef.org/sowc08/statistics/statistics.php

12. WHO data and statistics (various links)

http://www.who.int/research/en/

13. WHO Statistical Information System (WHOSIS)

http://www.who.int/whosis/whostat/2010/en/index.html

Please list your own sources of data below.

- 1.
- 2.
- 3.