

## Evaluation of the Newborn Screening Program Implementation at the Regional Offices

To ensure the quality and sustainability of the Newborn Screening system, the Newborn Screening Reference Center and the DOH Central Office are conducting an evaluation of the Newborn Screening Program in all DOH Regional Offices. This evaluation aims to assess the progress of the program, its strengths and weaknesses, and to seek to offer solutions to identified problems, particularly the problems which impact on achieving DOH's goal of "every parent informed, every newborn screened, every health facility equipped and with health practitioner trained to provide newborn screening service". Results of this evaluation will be the basis for recommendations to improve the implementation of the NBS program in the region and throughout the country.

Thank you for your cooperation.

	Date	Regional Office and Address
Name of Respondents	Designation	Signature
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3.		
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**Note:** Please accomplish and submit this form and attachments (via express mail, email or fax) to NSRC on or before \_\_\_\_\_.

I. Operational Structure (7 points)	YES	NO	REMARKS
<b>A. Staffing</b>			
1. Sufficient trained staff are available to administer the program composed of:			
i. RO Program Coordinator			
No. of years in service in DOH?			
Has the coordinator been employed/assigned to NBS for more than 12 months?			
ii. Hired Medical/Nurse Coordinator/s			
No. of years in service in DOH?			

	YES	NO	REMARKS
Has the coordinator been employed/assigned to NBS more than 12months?			
Does NBS coordinator spend 100% of his/her time handling the NBS program?			
iii. Other staff involved in NBS program?			
2. Organizational chart of all staff and units involved in the implementation of the program <i>(include organizational chart as attachment)</i>			
3. Written defined roles and responsibilities <i>(include written roles and responsibilities as attachment)</i>			
<b>B. Personnel Training and Competency</b>			
1. A personnel training plan/program exists			
2. The training plan for new personnel includes			
i. Administrative policies and procedures			
ii. Program operation (including all systems components)			
iii. Technical procedures (as appropriate)			
a) Heel prick method			
b) Specimen quality checking			
c) Protocols for recall and follow-up			
d) Safety measures			
iv. Available resources (local, regional, national, international)			
3. Documentation of continuing education/certification of training			
4. Performance competency evaluation for each employee at least annually			
<b>II. Plan of Action (Work and Financial Plan) (2 points)</b>	<b>YES</b>	<b>NO</b>	<b>REMARKS</b>
1. Action plan (WFP) for current year containing objectives, targets, activities (advocacy, training and monitoring), budget and fund source (4% and other sources) <i>(include WFP as attachment)</i>			
2. Accomplishment report for previous year including fund utilization <i>(include accomplishment &amp; Utilization report as attachment)</i>			

<b>III. Systems in Place (28 points)</b>	<b>YES</b>	<b>NO</b>	<b>REMARKS</b>
1. Financing Scheme			
i. Provides free newborn screening kits for indigents			
a) 6-test			
b) ENBS			
ii. Provides free confirmatory testing for indigents			
a) 6-test			
b) ENBS			
iii. Provides assistance for treatment for indigents			
a) 6-test			
b) ENBS			
2. Information system			
i. Do you utilize the online NSF database?			
ii. Available Statistics for			
a) Number of deliveries			
b) Number of newborns screened			
c) Positive screens requiring assistance for recall from NSCs			
d) Confirmed diagnoses			
e) Lost to follow-up			
f) 50% annual decrease in the unsatisfactory samples			
g) 50% annual decrease in the unfit samples			
h) Number of refusal			
i) Updated list of health facilities indicating status of implementation (active/inactive)			
iii. Reporting system/Tracking and frequency of reports (documented reporting)			
a) Reports submitted by NSFs to ROs			
b) Reports submitted by ROs to DOH National Office and NSRC			
iv. Updated directory of specialists for referral and case management with contact details and clinic hours (with continuity clinic)			
v. Records are easily retrievable within 15 minutes			

	YES	NO	REMARKS
3. Network and linkage			
i. Established network with LGUs and other stakeholders (OB, pedia, midwives, other health professionals and newborn screening continuity clinics) ( <i>Show documented activities/written agreements with stakeholders</i> )			
a) Advocacy			
b) Recall of patients			
c) Financing			
4. Monitoring scheme			
i. Monitoring plan contains			
a) List of Health facilities visited in the previous year			
b) List of Health facilities to be visited			
ii. Monitoring checklist (from NSRC) ( <i>Written exit report must be available upon request</i> )			
iii. Documentation of monitoring conducted reflecting issues and concerns, findings/problem areas, recommendations, agreements, and if applicable, follow-up visit			
5. Documentation of planning and consultative meetings reflecting issues and concerns, agreements and action points			
6. Annual program implementation review with documentation			
7. Logistics Management			
i. Record of Number of kits procured			
ii. Record of Number of kits distributed			
iii. Record of monitoring allocated cards			
<b>IV. Health promotion plan (15 points)</b>	<b>YES</b>	<b>NO</b>	<b>REMARKS</b>
<b>A. Communication Plan</b>			
1. A comprehensive, written communication plan that includes			
i. Objectives related to newborn screening - coverage and quality			
ii. Messages appropriate to specific audiences			
iii. Target audience (newborn screening stakeholders- health professionals, policy makers, parents)			
iv. Medium			

v. Timeline including preparation and distribution	YES	NO	REMARKS
2. IEC/reference materials available			
i. RA 9288, IRR, and Presidential Proclamation			
ii. Manual of Operations			
iii. Posters			
iv. Brochures			
v. Flipcharts (Checked for technical accuracy and consistency by NSRC)			
vi. DOH and PhilHealth issuances			
vii. NBS AVP			
viii. NBS Factsheets			
ix. Facilitators Guidebook			
3. A method for evaluating effectiveness of communication methods and materials			
<b>B. Training program</b>			
1. Updated training module that includes all of the following			
i. Importance of newborn screening			
ii. Heel prick method - specimen quality			
iii. Timeliness of screening and diagnosis			
2. Training materials			
3. Training evaluation			
4. Follow-up after training report			
5. Directory of trained health workers			
<b>V. Contingency Plan</b>			
1. Disasters			
2. Human Resource			
3. Data loss/corruption			
4. Supply shortage			
<b>VI. Innovation Strategies and Best Practices</b>			

VII. Significant Findings, Agreements and Recommendations			
SCORE			

Name of Interviewer/s	Designation/Institution	Signature
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