Follow Up and Treatment Workgroup Update

April 24, 2019

2019 Follow-up and Treatment Workgroup

ACHDNC MEMBERS

- Jeffrey P. Brosco, MD, PhD (FUTR Chairperson)
- Susan A. Berry, MD
- Kyle B. Brothers, MD, PhD
- Kamila B. Mistry, PhD, MPH
- Annamarie Saarinen

ORGANIZATION REPRESENTATIVES

- Christopher A. Kus, MD, MPH (FUTR Co-Chair)
 Association of State & Territorial Health Officials
- Robert J. Ostrander, MD
 American Academy of Family Practice Physicians
- Jed L. Miller, MD, MPH
 Association of Maternal and Child Health Programs

WORKGROUP MEMBERS

- Sabra A. Anckner, RN, BSN
- Tracey Bishop
- Amy Brower, PhD
- Luca Brunelli, MD, PhD
- Christine S. Brown, MS
- Debra Freedenberg, MD, PhD
- Lawrence Merritt, II, MD
- Dawn S. Peck, M.S., CGC
- Margie A. Ream, MD, PhD
- Elna Saah, MD
- Joseph H. Schneider, MD, MBA, FAAP
- Marci Sontag, PhD
- Janet Thomas, MD

Newborn Screening Translational Research Network (NBSTRN)

Amy Brower, PhD

- Longitudinal Pediatric Data Resource (LPDR)
 - This tool enables clinicians, researchers, parents and patients to enter health information in a secure centralized system.

Goal was to create a minimum set of questions and answers from the LPDR for use by State Newborn Screening Programs

• > 2500 Questions to 4 Questions

Newborn Screening Technical assistance and Evaluation Program (NewSTEPS) Long-Term Follow-up

Marci Sontag, PhD

Minimum Question Set for Public Health – developed in partnership with NBSTRN

- Diagnosis
- Date of appropriate first intervention
- Are they alive?
- Within the last 12 months did the child receive care and treatment specific to the diagnosis? Type of care provider?

Minimum Data Set

Question:

Would the Committee approve of the FUTR Workgroup thinking about a proposal that would encourage states to utilize a minimum data set for program evaluation?

Consent and Confidentiality

- Discussion of risk of potential harm of identifying individuals
- In smaller states, it is a significant concern
- Communities vary in their willingness to consent to share their information
- Labs can be a barrier to consent
- It is important for families to know that part of consent is the ability to reconsider consent throughout the study period

Next Workgroup Call

Minimum data set discussion

 Discuss workgroup input on key aspects of Kemper presentation (case definition, outcomes, treatment, gray literature)