orphanet

| Version 02 | October 2024

Procedural document: Data collection and registration of expert centres in Orphanet

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Co-funded by the Health Programme of the European Union

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I. Introduction

1. Purpose/objectives

Orphanet offers, amongst a range of expert resources on rare diseases, a directory of expert centres and networks of expert centres dedicated to the medical management and/or genetic counselling for one particular rare disease or a group of rare diseases.

This directory is intended to improve the referral of patients towards expert centres and ease the process of second opinions between professionals.

This document aims to explain the set of criteria used to select, register and update the expert centres and the network of expert centres.

2. Disclaimer

The content of this procedural document represents the views of the author only and is his/her sole responsibility; it cannot be considered to reflect the views of the European Commission and/or the Consumers, Health, Agriculture and Food Executive Agency or any other body of the European Union. The European Commission and the Agency do not accept any responsibility for use that may be made of the information it contains.

3. Range of application

The present procedure applies to all the expert centres and the networks of expert centres registered in Orphanet. The registration and update of the expert centres is performed by the Orphanet national teams (ONT) having signed a Network Agreement (NA) and a Data Transfer Agreement (DTA) with the Orphanet Coordinating Team (OCT).

4. References

- Orphanet Standard Operating Procedures
- <u>EUCERD</u> recommendations on quality criteria for centres of expertise for rare diseases in <u>member states.</u>
- Core competences for genetic counsellors
- Professional and educational standards for genetic counsellors
- <u>Code of professional practice for genetic counsellors</u>

5. Definitions

Data transfer agreement (DTA): Contract between the providing and recipient institutions that governs the legal obligations and restrictions, as well as compliance with applicable laws and regulations, related to the transfer of such data between the parties.

European Reference Networks (ERNs): Virtual networks involving healthcare providers across Europe, aiming to facilitate discussion on complex or rare diseases and conditions that require highly specialised treatment, and concentrated knowledge and resources.

Genetic counselling expert centre: Centre delivering genetic advice either for all rare genetic diseases or for a rare genetic disease/group of diseases.

Information scientist (IS): Member of an Orphanet national team, responsible for the collection, assessment and registration of data.

Medical management expert centre: Specialised centre for a rare disease (or a group of rare diseases) organised for the medical management of patients or recognised as an expert centre for consultation. It delivers a service of indisputably higher quality for rare diseases than a standard hospital service in the relevant specialty.

National Advisory Board: Orphanet national teams can decide to set up a National Advisory Board, its members being nominated by the appropriate legitimate institutions (learned societies, national authorities, etc.), which are defined at country level. National Advisory Board members contribute with their expertise to Orphanet at country level and validate any database content concerning resources listed for the country in question as well as Orphanet Rare Disease Nomenclature production in national language if relevant.

Network Agreement (NA): Agreement specifying binding commitments among members of the Orphanet Network.

Network of expert centres: Clinical centres with expert knowledge in the same rare disease or group of rare diseases and officially established as a network.

Orphadata: Platform developed by Orphanet to provide the scientific community with comprehensive, high-quality and freely accessible datasets related to rare diseases and orphan drugs, in a reusable format (<u>https://www.orphadata.com/</u>)

Orphanet coordinating team (OCT): It is the French US14 Inserm based team who coordinates the Orphanet Network, produces the English Orphanet Nomenclature and its scientific annotations and is also responsible for coordination of the production of the scientific content and of all Network activities including translation.

Orphanet national teams (ONT): Teams located in each participating country of the Orphanet network, and endorsed by national authorities. An ONT is composed, at least, of a country coordinator who is responsible for the national Orphanet activities including translation. It can also include one or several information scientists, translation staff and a project manager.

Orphanet national validator: Professional designated to assess at the national level the appropriateness to register a specific expert resource in the Orphanet database. It can be the national coordinator, a member of the national Advisory Board or of the Health Authorities.

Orphanet national websites: Each Orphanet national team maintains a national entry point to Orphanet, providing information on the team and on the latest news and updates concerning national activities, in the national language of the country concerned.

Orphanet Management Board (MB): Decision-making body of the Orphanet Network. It is composed of the National Coordinators (one per member of the Orphanet Network). The MB is in charge of identifying funding opportunities, of guiding the project to provide an optimum service for the end-users, and of considering the inclusion of new teams as well as ensuring the continuity of Orphanet. It is chaired by the project coordinator at the Inserm. The Board is coordinated by Inserm.

Orphanet Quality Criteria Questionnaire (OQCQ): Questionnaire aimed at evaluating the appropriateness of registering in Orphanet a medical management expert centre that is not officiallydesignated. It is is based on the <u>EUCERD recommendations</u> on quality criteria for expert centres for rare diseases. **Orphanet quality questionnaire for Genetic Counselling Units / Clinics**: Questionnaire aimed at evaluating the appropriateness of registering in Orphanet a genetic counselling expert centre that is not officially-designated. It is based on peer reviewed literature about genetic counselling practices in Europe and the European Board of Medical Genetics documentation for European unified competency standards for ensuring patient safety.

Rare disease (RD): a disease that affects less than five in 10,000 persons in Europe, as defined by the European Regulation on orphan medicinal products (Regulation (EC) No 141/2000 of the European Parliament and of the Council of 16 December 1999 on orphan medicinal products).

Service contract: Contract, established by Inserm-Transfert, allowing for-profit companies/organisations to access Orphanet data via a for-fee Orphadata account. The contract stipulates the conditions of use of the data.

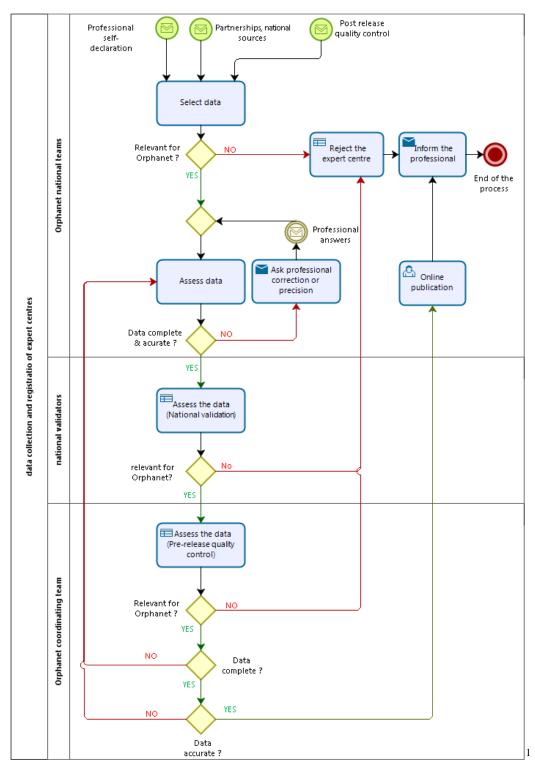
6. Filing and updates

This document is updated by the Orphanet coordinating team (OCT) as often as necessary and at least once a year. The most up-to-date version is available on the Orphanet website: https://www.orpha.net/orphacom/cahiers/docs/GB/eproc_expert_centres_R2_PatCar_Cns_EP_02.pdf

II. Methodology

1. Flowchart

The general process for the data collection, registration, validation and quality control of expert centres is presented below:



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2. Description

The process of registration/update of expert centres and networks of expert centres starts with:

- Professionals declaring their activity in any communication channel with Orphanet teams (e-mail, phone call, etc.).
- An exchange of data through a partnership (i.e. national Authorities, Expert networks).
- A post-release quality control task focused on expert centres or network of expert centres.

An annual update is organised and launched by the Orphanet coordinating team (OCT) and National teams. All the professionals responsible of expert centres / networks of expert centres registered in the database are invited to review and update their activities. National teams are responsible for the follow-up of their feedback.

3. Sources of information

Orphanet national teams (ONT) are in charge of identifying the sources of information for expert centres and networks of expert centres in their countries, and are advised to establish partnerships with them to be as **exhaustive** as possible.

In case of establishing a partnership, national teams must inform the coordinating team, as some types of partnerships require the signature of a data transfer agreement (DTA).

The mains sources of information are:

a) For officially designated expert centres

- National list of expert centres, recognised by the Health authorities, if applicable,
- List of expert centres members of European Reference Networks (ERN).

b) For non-officially designated expert centres

- Learned societies, foundations and other networks,
- Expert centres involved in clinical trials,
- Expert centres members of European Reference Networks (ERN),
- Scientific publications,
- Patient organisations,
- Websites of Human Genetics societies (for genetic counselling centres),
- Pharmaceutical and biotechnology companies involved in orphan drugs,
- Professionals declaring an expert centre through declaring their activity in any communication channel with Orphanet teams (e-mail, phone call, etc.)..

4. Data Selection

ONT are involved in collecting and registering information on expert centres and networks of expert centres located in their own country. National teams and the coordinating team are involved in collecting information on international networks, but only the coordinating team can register them.

National teams start the data selection by verifying that the expert centre meets the inclusion criteria for Orphanet. An expert centre can offer medical management and/or genetic counselling services. Both options have specific selection criteria.

a) Inclusion and exclusion criteria for the medical management centres

i. Inclusion criteria

In order to be registered in Orphanet, a medical management expert centre should be a specialised centre for a rare disease (or a group of rare diseases) either officially designated by the country's health authorities, member of a European Reference Network (ERN), or complying with the Orphanet Quality Criteria Questionnaire (OQCQ, see annex 1). It should have an adapted technical platform, a multidisciplinary team (when necessary) and clinical research expertise.

The OQCQ is based on the <u>EUCERD recommendations</u> on quality criteria for expert centres for rare diseases, which are:

- 1. Capacity to produce and adhere to good practice guidelines for diagnosis and care.
- 2. Quality management in place to assure quality of care, including National and European legal provisions, and participation in internal and external quality schemes when applicable.
- 3. Capacity to propose quality of care indicators in their area and implement outcome measures including patient satisfaction.
- 4. High level of expertise and experience documented, for instance, by the annual volume of referrals and second opinions, and through peer-reviewed publications, grants, positions, teaching and training activities.
- 5. Appropriate capacity to manage RD patients and provide expert advice.
- 6. Contribution to state-of-the-art research.
- 7. Capacity to participate in data collection for clinical research and public health purposes.
- 8. Capacity to participate in clinical trials, if applicable.
- 9. Demonstration of a multi-disciplinary approach, when appropriate, integrating medical, paramedical, psychological and social needs (e.g. RD board).
- 10. Organisation of collaborations to assure the continuity of care between childhood, adolescence and adulthood, if relevant.
- 11. Organisation of collaborations to assure the continuity of care between all stages of the disease.
- 12. Links and collaboration with other CE at national, European and international level.
- 13. Links and collaboration with patient organisations where they exist.
- 14. Appropriate arrangements for referrals within individual Member States and from/to other EU countries if applicable.
- 15. Appropriate arrangements to improve the delivery of care and specially to shorten the time taken to reach a diagnosis.
- 16. Consideration of eHealth solutions (e.g. shared case management systems, expert systems for tele-expertise and shared repository of cases).

The questionnaire must be filled-in by professionals when the expert centre is not officially designated, unless a member of a European Reference Network (ERN), and it is assessed by national validators.

ii. Exclusion criteria

Orphanet does not register an expert centre if it is:

- A conventional specialised medical department without specific focus on rare diseases, even if it is a reputed one.
- A self-declared centre that does not fulfil the selection criteria.

b) Inclusion and exclusion criteria for genetic counselling centres

i. Inclusion criteria

In order to be registered in Orphanet, a genetic counselling centre should deliver genetic advice either for all genetic diseases or for a genetic disease/group of diseases, and be either officially designated either officially designated by the country's health authorities, a member of a European Reference Network (ERN), or comply with the Orphanet quality questionnaire for Genetic Counselling Units / Clinics (annex 2).

The Orphanet quality questionnaire for Genetic Counselling Units / Clinics (see annex 2) is based on peer reviewed literature about genetic counselling practices in Europe and the European Board of Medical Genetics documentation for European unified competency standards for ensuring patient safety (2010-2013):

- <u>Core competences for genetic counsellors</u>
- Professional and educational standards for genetic counsellors
- <u>Code of professional practice for genetic counsellors</u>

The questionnaire must be filled-in by professionals when the genetic counselling centre is not officially designated, and it is assessed by national validators.

ii. Exclusion criteria

Orphanet does not register a genetic counselling expert centre if the centre is:

• Not officially designated and the quality questionnaire for Genetic Counselling Units / Clinics is not validated.

c) Inclusion and exclusion criteria network of expert centre

i. Inclusion criteria for network of expert centre

In order to be registered in Orphanet, a network of expert centres should consist of clinical centres having expert knowledge in the same field and officially established as a network and focus on a rare disease or on a group of rare diseases.

ii. Exclusion criteria for network of expert centre

Orphanet does not register a network of expert centres if the network is:

- A self-declared network (same hospital or same disease without any funding).
- Clinical centres participating in a same clinical trial.
- Clinical centres with expert knowledge in the same field but without official recognition as a network.

5. Data assessment

If the centre complies with the Orphanet inclusion criteria for expert centres, the national IS analyse the information to check that the mandatory dataset (cf below) is provided and that it is coherent, and eventually introduce the necessary corrections before submitting to national and international pre-release quality control.

In case of inconsistency or missing information, the IS will contact the professional in order to clarify or obtain the information needed.

a) Orphanet dataset for expert centres

i. Mandatory dataset

- Name of the expert centre in local language and in English
- Name and address of the institution and of the department/service responsible of the expert centre
- Name and contact details (email address and phone number) of at least one expert centre coordinator²
- The disease(s) or group of diseases covered by the expert centre
- Indication whether the expert centre is officially designated by the national health authorities for Medical management and/or for Genetic counselling
- The Orphanet Quality Criteria Questionnaire (OQCQ) if the centre is not officially designated and not a member of a ERN
- Indication whether the expert centre is member of an ERN and if yes, of which ERN the centre belongs
- Indication whether the expert centre is intended for children, adults or both
- Indication whether the expert centre is a genetic counselling clinic, a medical management clinic or both.

ii. Optional dataset

- Website of the expert centre
- Team members (with a maximum of seven professionals)

b) Mandatory dataset for network of expert centres

- Name in local language and English
- Network website or description
- Geographical coverage of the network of expert centre
- Name and contact details of the coordinator of the network of expert centre
- The disease(s) or group of diseases covered by the network of expert centre
- List of expert centres integrating the network

6. Pre-release national validation

A validation process at the national level is mandatory for expert centres:

- In the case of officially designated expert centres and/or centres member of an ERN, the Orphanet national validator(s) confirm the fact that the centre has indeed received an official designation from the national health authorities and/or is member of an ERN.
- In the case of non-officially designated expert centres, the Orphanet national validator assesses if the centre meets the inclusion criteria, paying special attention to the Orphanet quality criteria questionnaire (OQCQ) unless for Medical management if the expert centre is a member of an ERN (indeed, to be a member of an ERN, the center must also complete a questionnaire gathering the same criteria as the Orphanet quality questionnaires). This a very important step given that the quality questionnaires should be appraised according to the national context.

In the case of the OQCQ, by decision of the **Orphanet Management Board**:

² Please note that Orphanet register a maximum of 2 expert centre coordinators

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• The following questions are "major" criteria, although not mandatory:

<u>Question 1</u>: How many patients did you see with this disease or group of diseases last year? <u>Question 2</u>: Do you provide expert advice/second opinion to other clinicians (mail, telephone)? <u>Question 7</u>: Does the centre publish peer reviewed publications?

- The criteria should be appraised qualitatively by the national validator according to the disease(s) and the national context.
- Each country needs to indicate on their national website which other criteria are taking into account in order to be transparent on how the data selection is carried out.

In the case of the Orphanet quality questionnaire for Genetic Counselling Units / Clinics, the criteria should be appraised qualitatively according to the disease(s) and the national context.

Each ONT has to establish and publish on their national website the list of the current national validators.

7. Pre-release quality control (PrRQC)

Once the candidate expert centre passed the national validation, the OCT performs a pre-release quality control to assess the relevance and correctness of data collected by the national teams.

This quality control is mainly focused on the disease(s) linked, the quality questionnaires for nonofficially designated expert centres, and on the coherence of the whole dataset.

In case some information is missing or needs correction, the form is sent back to the national teams.

8. Data publication

Once all the quality control steps have been completed, the information on expert centres and networks of expert centres is accessible on the <u>Orphanet website</u> and can be retrieved from <u>Orphadata</u> after signature of a Data Transfer Agreement (DTA) or a service contract. Once published, the ONT are in charge of informing the professional(s) that the activity has been published.

9. Post-release validation

The post-release quality control for expert centres includes the quality control projects, which are organised by the OCT on a regular basis to check the completeness and consistency of the data. ONT can, at any time, perform an extraction from the database to perform this post release quality control.

III. Annexes

1. Annex 1 – Orphanet Quality Criteria Questionnaire (OQCQ)

orph	napet
Questionnaire for medical	management expert centres
(Fill in a separate	form for each clinic)
For the Orphanet Coordinator only	Return this form to:
Checked on (date):	Fax:
Validation: Ves No	E-mail:
Form intended for the scientific committee to check whether EU Committee of Experts on Rare Diseases (EUCERD) for a	the expert centre matches the quality criteria defined by the a Centre of Expertise.
Name of expert centre:	
Name of coordinator:	
Diseases or (group of) managed in this expert centre:	
ACTIVITY OF THE EXPERT CE	NTRE FOR RARE DISEASES (RD)*
*A disease is considered to be rare w	hen it affects less than 1 person in 2,000
Are you officially a centre of expertise?	
Yes => If yes, you <u>do not need</u> to an	swer the following questions
\square No \implies If no, <u>please answer</u> the foll	owing questions
 How many patients did you see with this disease or Total number of patients seen last year: Number of new cases last year: Percentage of patients from other regions from the country Percentage of patients from abroad: 	
2. Do you provide expert advice/second opinion to oth Number of expert opinion given last year:	er clinicians (mail, telephone)? 🔲 Yes 🔲 No
 3. Is your centre multi-disciplinary, integrating medic needs (such as a rare disease bo: Yes No Please explain your answer: 	cal, biological, paramedical, psychological and social

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5 December 4 1.	
other EU countries (if applica)	ate arrangements in place for referrals within your country and from/t Yes No
	nanagement procedure(s) in place to ensure quality of care (including al provisions), and does it participate in internal and external quality
7. Does the centre publish peer rev	-
-	e(s) over the past five years:
number of communications on the dis	sease(s) over the past five years:
8. Have you obtained grants for str	udies on this disease or group of diseases? 🔲 Yes 📃 No
If yes, please describe:	
9. Do you participate in systematic If yes, please describe:	e clinical data collection? 🔲 Yes 🔲 No
10. Do you participate in clinical tri If yes, please describe:	
11. Do you teach and train for this d If yes, please describe:	disease or group of diseases? 🔲 Yes 🔲 No
	itions with patient organisations? 🔲 Yes 🔲 No
If yes, please describe:	
	collaborations with other centres at national, European or international
13. Does the centre have links and c	

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2.	Annex 2: Questionnai	re for Genetic Counselling Units / Clinics
	or	phanet
Ou	estionnaire for Gene	etic Counselling Units / Clinics
Ľ		<u>e</u> form for each unit/clinic)
		Return this form to:
F or the Checked on (date	Orphanet Coordinator only	Fax:
	Yes No	E-mail:
Form intended for th	e scientific committee to check whet	her the clinic/unit matches the quality criteria defined
ACTIVI	Y OF THE GENETIC COUN	SELLING UNITS FOR RARE DISEASES (RD)*
	*A disease is considered to be rar	e when it affects less than 1 person in 2,000
1. <u>Patient popula</u>	tion	
		eases did you provide genetic counselling, approximately per
annum? (Your cour	ntry's Orphanet Information Scier	ntist can discuss disease groupings with you)
Total number	of patients seen :	
	w cases:	
Time period:		
2. <u>The team</u>		
	ing professionals who provide ge	netic counselling includes (state number):
Clinical Geneti	cists	
Genetic couns	ellors with an MSC in genetic cour	iselling
Genetic nurse	s with an MSc in genetic nursing	
Genetic couns	ellors without an MSc	
Genetic nurse	s without an MSc	
How many of	the above staff have current Natio	nal or European registration:
		Genetic Nurses
		r genetic counseling qualifications)
Other nearth p	nolessionais (list please, with then	genetic counseiing quaincations)
	service include (i.e. in-house, po	
Laboratory sci Please describ	entists, Psychologists, Social work	ers, Other medical specialists
c) Does your service?	service have designated pathway	ys for collaboration with professionals external to your

a) b) c) Est	 scope of genetic counselling services provided Do patients receive psychological support as part of the genetic counselling consultation? Yes No From the genetic counselling professional during consultation Yes No From other counselling or psychologist team members as part of the service Yes No Which of the following genetic counselling services does your team provide? Cascade genetic counselling and testing (where applicable) to at-risk family members Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by po or telephone?							
c) Est	 From other counselling or psychologist team members as part of the service Yes No Which of the following genetic counselling services does your team provide? Cascade genetic counselling and testing (where applicable) to at-risk family members Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by poor telephone?							
c) Est	 Which of the following genetic counselling services does your team provide? Cascade genetic counselling and testing (where applicable) to at-risk family members Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by po or telephone?							
c) Est	 Cascade genetic counselling and testing (where applicable) to at-risk family members Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary 							
c) Est	 Cascade genetic counselling and testing (where applicable) to at-risk family members Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary 							
Est	 Pre-symptomatic genetic testing (where applicable) to at-risk individuals A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary 							
Est	 A pathway for access to the appropriate clinical services (by medical specialty) for those who are shown to be carriers on pre-symptomatic testing Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by poor telephone? 							
Est	 Access to prenatal diagnosis services (where applicable) Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by poor telephone?							
Est	 Patient education materials and links to patient support groups Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by po or telephone?							
Est	 Written information provided to patients after consultation A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by poor telephone? 							
Est	 A pathway for access to further psychological support, when necessary Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by poor telephone? 							
Est	Do you provide expert advice or second opinions for genetic counselling issues to other clinicians by po or telephone?							
Est	or telephone?							
	imate number of expert opinions given last year.							
I. Qua	Estimate number of expert opinions given last year:							
	Quality management							
a)	a) Does your centre have quality management procedure(s) in place to ensure quality of care in genetic							
	counselling (including National and/or European legal provisions),							
If yes, please describe:								
ь)	Doos your contro participato in the CEOAS quality assurance scheme for genetic councelling?							
b)	Does your centre participate in the CEQAS quality assurance scheme for genetic counselling? Yes No							
c)	Does your centre participate in other internal or external quality schemes for genetic counselling,?							
C)	Yes No							
If yes, please describe:								
d)	Please describe how professional genetic counselling standards are maintained within the team (eg.: through formal case discussion, clinical and/or counselling supervision, continuing professional							
	development participation, and other activities)							
5. <u>Tea</u>	ching and training							
a)	Does your centre offer an MSc Genetic Counselling training program? Yes No							
b)	Does your centre offer clinical placements for trainee Genetic Counsellors / Genetic Nurses ? Yes No							
c)	Does your centre teach other health care professionals about genetic counselling Yes No							

For any questions or comments, please contact us: <u>contact.orphanet@inserm.fr</u>

Editor of this procedural document: Gersende Gendre - This procedural document has been approved by : Ana Rath – Quality control : Florence Sauvage

Identification code of the document: R2_PatCar_Cns_EP_02. Version of the document : 02

The correct form when quoting this document is: "Procedural document on data collection and registration of expert centres in Orphanet, Orphanet, October 2024"

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