

# INSTRUCTIONS TO PREPARE FOR THE SESSION

## Exchanging experiences and developing the National Monitoring Framework for NCDs

### **Objectives of the session:**

Share experiences and present country capacity to monitor NCDs to develop a National NCD monitoring framework

[This template was developed to guide countries participants to assess their capacity to monitor NCDs. It is presented in 3 areas:

data sources available, capacity to report on the NCD Monitoring Framework and identifying gaps and priorities]

[Relevant links are included in this template to facilitate your review and preparation for this presentation – feel free to use but you are not limited to it – feel free to add information that you may find it necessary to share, just be aware of the time allocated to present which is 10 min per country].

[The information presented in this ppt will be used to develop a Country Monitoring Framework for NCDs].

In case there are doubts please contact [malcolmt@paho.org](mailto:malcolmt@paho.org) (Taraleen Malcom) and [caixetro@paho.org](mailto:caixetro@paho.org) (Roberta Caixeta) – See you soon!

# National Capacity to Monitor NCDs

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# KEY DATA SOURCES FOR NCDs

## Mortality

Vital registration with complete coverage and medical certification of cause of death

## Morbidity

Population-based disease registries

Hospital-based registries

Primary health care information system

## Risk factors

## Policies and interventions

### Population-based surveys

Household

School-based

Mobile phone



Global School-based Student Health Survey  
**G-SHPPS**



[Here you can see the main data sources for NCDs. To establish a Monitoring Framework for NCDs it is important to produce data specially from healthcare facility and using population-based surveys. In the next slides you are invited to review your country capacity to monitor NCDs through this main data sources]

# I Data availability: Population-based surveys

<b>Survey name</b> [Please enter all the surveys country have done related with NCDs and their Risk Factors]	<b>Round(s)/Year(s)</b>	<b>Future round planned</b>
STEPS survey [If similar to STEPS add the information here]	2011	TBD
Global School-based Student Health Survey(GSHS)[Add information if here is there is a similar survey to GSHS]	2017	TBD
Global Youth Tobacco Survey (GYTS)[Add information here if there is a similar survey to GYTS]	ND	
Rapid Mobile Phone Survey (RaMPS) [Add information here if there is a similar survey to RaMPS]	ND	

[ADDITIONAL INFORMATION: Information related with the STEPwise approach to NCD risk factor surveillance (STEPS), GSHS. GYTS available at: <https://www.who.int/teams/noncommunicable-diseases/surveillance/systems-tools/steps>; RaMPS information available at: <https://www.paho.org/en/enlace/ramps-rapid-mobile-phone-survey>]

# I Data availability: Healthcare Facility Information System

indicate the existence of a standardized system for RECORDING PATIENT LEVEL data that includes NCD status and risk factors in the following PUBLIC facilities






	Primary Health Care Centres	Secondary healthcare facilities/hospitals	Tertiary care facilities / Hospitals
i) Does a standardized system for <b>recording patient level</b> data that includes NCD status and risk factors exist? [Response options: Yes, No or 'Don't know]	No	No	No
ii) Which topics are covered? [List for each of the levels: Cancers, Cardiovascular Diseases, Hypertension, Diabetes, NCDs Risk Factors (specify it), list other NCDs, Disabilities, Rehabilitation]	NA	NA	NA
iii) What type of system is it? [Paper-based, Electronic, Mixed (describe) or Don't Know]	NA	NA	NA
iv) What is the coverage of the system? [Response options: <25% of facilities; 25% to 50% of facilities, more than 50% of facilities to 75% of facilities, more than 75% of facilities, Don't know]	NA	NA	NA
v) Does your country have a patient unique identifiers as part of the information system? [Response options: Yes, fully implemented, Yes, partially implemented, Not available]	No	No	No

# I Data availability: Healthcare Facility Information System

Indicate the existence of a **DISEASE REGISTRY** for recording patient level data that includes NCD Status and risk factors in the following **PUBLIC** facilities

	Primary Health Care Centres	Secondary healthcare facilities/hospitals	Tertiary care facilities / Hospitals
v) Does your country have a <b>disease registry</b> ? [Describe if you have a registry that covers the main NCDs (Diabetes, Hypertension, Cancer, Cardiovascular disease and Chronic Respiratory disease in each healthcare, when it is applied]	Yes	No	Yes- Cancer
vi) What is the coverage of the disease registry? [Response options applies to each disease registry. If there is a disease registry for all/main NCDs report it: <25% of facilities; 25% to 50% of facilities, more than 50% of facilities to 75% of facilities, more than 75% of facilities, Don't know]	100%	No	100%
vii) Are the patient information systems in primary health care centres & hospitals interoperable? [does one system cover both types of facilities or can information be passed between two systems? Response options: Yes, No, Don't know]	No	No	No
vii) Can private facilities access or share data with this system? [Response options: Yes, No, Don't Know]	No	No	No
vi) Has an assessment ever been done to review the quality of the data collected by this system? [Response options: Yes (describe), No, Don't Know]	Yes – some facilities have routine audits	Yes – some facilities have routine audits	Don't know




# I NCD Monitoring Framework – Global Monitoring Framework

	Target	Indicators	Data Source	Baseline value	Data source/Year	Target deadline value	Data source/Year	Country Target
Mortality & morbidity		33% reduction	1. Unconditional probability of dying between ages of 30 and 70 from NCDs	Vital registration	22%	PAHO/2019	Decrease by 25%	2025
			2. Cancer incidence by type of cancer	Cancer registry				
Behavioral risk factors		20% reduction	3. Alcohol per capita consumption (APC)	Adm system	40%	STEPS/2011		
			4. Heavy episodic drinking	Household/School-based Survey				
			5. Alcohol use disorders	N/A				
		15% reduction	6. Insufficient physically activity adolescents	Household/School-based Survey	45%	STEPS/2011		
			7. Insufficient physically activity adults	Household Survey	45%	STEPS/2011	Improve by 20%	2025
		30% reduction	8. Salt/sodium intake per day	Household Survey			Reduce by 5%	2025
		30% reduction	9. Tobacco use adolescents	School-based Survey	30%	STEPS/2011		
			10. Tobacco use adults	Household Survey	21%	STEPS/2011	Decrease by 10%	2025

[Review the NCDs specifications and definitions to identify the indicator and establish a baseline, target baseline, data source, country target. More information at:

<https://www.who.int/publications/m/item/noncommunicable-diseases-global-monitoring-framework-indicator-definitions-and-specifications>]

# I NCD Monitoring Framework – Global Monitoring Framework

Target		Indicators	Data Source	Baseline value	Data source/Year	Target deadline value	Data source/Year	Country Target
Biological risk factors		25% reduction	11. Raised blood pressure and mean systolic blood pressure	Household/School-based Survey	26.7%	STEPS/2011	Decrease by 20%	2025
		0% reduction	12. Raised blood glucose/diabetes	Household/School-based Survey	20.5%	STEPS/2011	Decrease by 20%	2025
			13. Overweight and obesity in adolescents	School-based Survey	23%	CFNI/2010	Decrease by 12%	2025
			14. Overweight and obesity in adults	Household Survey	55.7%	STEPS/2011	Decrease by 10%	2025
			15. Mean proportion of total energy intake from saturated fatty acids	Household Survey				
			16. Less than five total servings (400 grams) of fruit and vegetables per day	Household Survey	91.5%	STEPS/2011		
			17. Raised total cholesterol and mean total cholesterol	Household Survey			Decrease by 20%	2025

[Review the NCDs specifications and definitions to identify the indicator and establish a baseline, target baseline, data source, country target. More information at: <https://www.who.int/publications/m/item/noncommunicable-diseases-global-monitoring-framework-indicator-definitions-and-specifications>]



# Noncommunicable disease facility-based monitoring guidance

## Framework, indicators, and application

A set of relevant, valid, and feasible standardized indicators to guide recording and reporting of health services data at the primary care level.

**22 core indicators** and **59 optional indicators** for monitoring primary care essential interventions for CVDs including hypertension, as well as diabetes, asthma, COPD, breast cancer, cervical cancer, childhood cancer and other cancers.

Countries can use this framework to strengthen monitoring for NCDs by leveraging existing national health information systems, particularly routine health facility reporting systems and health facility survey systems.

[Review the indicators presented in the Noncommunicable Disease Facility-based monitoring guidance.

<https://www.who.int/publications/i/item/9789240057067> and provide the information on what indicators you have and what are the ones you need to integrate in your system.



# I NCD Monitoring Framework: Healthcare Facility

<b>Hypertension and cardiovascular diseases</b>	<b>Status</b>
C1-Availability of hypertension core medicines	<i>present</i>
C2-Availability of cardiovascular disease core medicines	<i>present</i>
C3-Availability of a functional blood pressure measuring device	<i>needed</i>
C4-Blood pressure control among people with hypertension	<i>present</i>
O1-Assessment of cardiovascular disease risk among people aged 40 years and over using WHO CVD risk charts	<i>present</i>
O2-Screening for hypertension among people aged 18 and over as part of routine service	<i>needed</i>
O3-Hypertension detection from opportunistic screening	<i>needed</i>
O4-Assessment for chronic kidney disease among people newly diagnosed with hypertension	<i>needed</i>
O5-Blood pressure control among people with hypertension (follow-up)	<i>present</i>
O6-Availability of trained staff who are providing services for hypertension management	<i>present</i>
O7-Completeness and timeliness of reporting of health facilities	<i>needed</i>
O8-Facilities receiving supervision visit	<i>needed</i>
O9-Loss to follow-up	<i>needed</i>
Total of indicator currently monitoring	6
Total of indicators country plan to integrate into the healthcare facility information system	13

[After reviewing the publication [Noncommunicable Disease Facility-based monitoring guidance](https://www.who.int/publications/i/item/9789240057067). <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I NCD Monitoring Framework: Healthcare Facility

<b>Diabetes</b>	<b>Status</b>
C1-Availability of diabetes core medicines	<i>Needed</i>
C2-Availability of plasma glucose testing	<i>Needed</i>
C3-Availability of Hemoglobin A1c testing	<i>Needed</i>
C4-Glycaemic control among people with diabetes	<i>Present</i>
O1-Pharmacological treatment among people with diabetes	<i>Needed</i>
O2-Statin therapy among people with diabetes	<i>Needed</i>
O3-Pharmacological treatment for chronic kidney disease among people with diabetes	<i>Needed</i>
O4-Pharmacological treatment for hypertension among people with diabetes	<i>Needed</i>
O5-Assessment for diabetic chronic kidney disease among people with diabetes	<i>Needed</i>
O6-Assessment for diabetic foot among people with diabetes	<i>Needed</i>
O7-Referral for retinopathy screening among people with diabetes	<i>Needed</i>
O8-Glycaemic control among people with diabetes (follow-up)	<i>Present</i>
O9-Chronic kidney disease among people with diabetes	<i>Present</i>
O10-Lower-limb amputation among people with diabetes	<i>Needed</i>
O11-Blindness among people with diabetes	<i>Needed</i>
O12-Availability of trained staff who are providing services for diabetes management	<i>Needed</i>
O13-Completeness and timeliness of reporting of health facilities	<i>Needed</i>
O14-Facilities receiving supervision visit	<i>Needed</i>
O15-Loss to follow-up	<i>Needed</i>
Total of indicator currently monitoring	3
Total of indicators country plan to integrate into the healthcare facility information system	19

[After reviewing the publication [Noncommunicable Disease Facility-based monitoring guidance](https://www.who.int/publications/i/item/9789240057067). <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I NCD Monitoring Framework: Healthcare Facility

Chronic Respiratory Diseases	Status
C1-Availability of asthma core medicines	Present
C2-Availability of chronic obstructive pulmonary disease core medicines	Present
C3-Asthma control	Needed
C4-Chronic obstructive pulmonary disease control	Needed
O1-Availability of peak flow meter and mouthpiece	Needed
O2-Asthma diagnosis using peak flow measurement	Needed
O3-Chronic obstructive pulmonary disease diagnosis using peak flow measurement	Needed
O4-Treatment among people with asthma	Needed
O5-Treatment among people with chronic obstructive pulmonary disease	Needed
O6-Emergency visit among people with asthma	Needed
O7-Emergency visit among people with chronic obstructive pulmonary disease	Needed
O8-Availability of trained staff who are providing services for asthma/chronic obstructive pulmonary disease management	Needed
O9-Completeness and timeliness of reporting of health facilities	Needed
O10-Facilities receiving supervision visit	Needed
O11-Loss to follow-up	Needed
Total of indicator currently monitoring	2
Total of indicators country plan to integrate into the healthcare facility information system	15

[After reviewing the publication Noncommunicable Disease Facility-based monitoring guidance. <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I NCD Monitoring Framework: Healthcare Facility

<b>Breast cancer</b>	<b>Status</b>
C1 - Clinical breast evaluation for early diagnosis of breast cancer among women aged 30–49 years with signs and/or symptoms associated with breast cancer	<i>Needed</i>
C2 - Timeliness of referral for breast cancer diagnosis among women aged 30–49 years with signs and/or symptoms associated with breast cancer who had suspicious findings from clinical breast evaluation	<i>Needed</i>
O1- Referral for mammography screening among women aged 50–69 years	<i>Needed</i>
O2-Timeliness of breast cancer confirmatory diagnosis among women aged 30–49 years with suspicious findings from clinical breast evaluation	<i>Needed</i>
O3-Timeliness of breast cancer treatment among women aged 30–49 years with suspicious findings from clinical breast evaluation	<i>Needed</i>
O4-Availability of trained staff who are providing clinical breast evaluation services	<i>Needed</i>
O5-Completeness and timeliness of reporting of health facilities	<i>Needed</i>
O6-Facilities receiving supervision visit	<i>Needed</i>
O7-Loss to follow-up	<i>Needed</i>
Total of indicator currently monitoring	0
Total of indicators country plan to integrate into the healthcare facility information system	9

[After reviewing the publication Noncommunicable Disease Facility-based monitoring guidance. <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I NCD Monitoring Framework: Healthcare Facility

<b>Cervical cancer</b>	<b>Status</b>
C1-Availability of Human papillomavirus testing	<i>Needed</i>
C2-Cervical cancer screening with high performance test among women aged 30–49 years	<i>Needed</i>
C3-Cervical cancer screening among women aged 30–49 years	<i>Needed</i>
C4-Cervical cancer screening test positivity among women aged 30–49 years	<i>Needed</i>
O1-Availability of Pap smear testing	<i>Needed</i>
O2-Availability of visual inspection with acetic acid testing	<i>Needed</i>
O3-Cervical cancer rescreening among women aged 30–49 years	<i>Needed</i>
O4-Pre-invasive cervical disease treatment among women aged 30–49 years	<i>Needed</i>
O5-Timeliness of referral for cervical cancer diagnosis among women aged 30–49 years with suspicious findings from cervical cancer screening	<i>Needed</i>
O6-Availability of trained staff who are providing cervical cancer screening services	<i>Needed</i>
O7-Completeness and timeliness of reporting of health facilities	<i>Needed</i>
O8-Facilities receiving supervision visit	<i>NeededNeeded</i>
O9-Loss to follow-up	<i>needed</i>
Total of indicator currently monitoring	<i>0</i>
Total of indicators country plan to integrate into the healthcare facility information system	<i>13</i>

[After reviewing the publication Noncommunicable Disease Facility-based monitoring guidance. <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I NCD Monitoring Framework: Healthcare Facility

<b>Childhood cancer</b>	<b>Status</b>
C1-Clinical evaluation for early diagnosis of childhood cancer among children with signs and/or symptoms associated with childhood cancer	<i>Needed</i>
C2-Timeliness of referral for childhood cancer diagnosis among children with associated signs and/or symptoms of childhood cancer who had suspicious findings from clinical evaluation	<i>Needed</i>
O1-Availability of trained staff who are providing services for early diagnosis of childhood cancers	<i>Needed</i>
O2-Completeness and timeliness of reporting of health facilities	<i>Needed</i>
O3-Facilities receiving supervision visit	<i>Needed</i>
O4-Loss to follow-up	<i>Needed</i>
Total of indicator currently monitoring	0
Total of indicators country plan to integrate into the healthcare facility information system	6

[After reviewing the publication Noncommunicable Disease Facility-based monitoring guidance. <https://www.who.int/publications/i/item/9789240057067> mark the indicators that your country can monitor. Present the total of indicators that you can currently report and how many you wish to/can integrate in the future]

# I Challenges and Opportunities

[Describe what you identify as **the main challenges** related with:

- Availability of data sources and indicators;
  - Paper based system
  - Lack Standardized data collection system
  - Variability in data collected among RHAs → important data being omitted
  - Data collation and analysis
  - Limited human resource capacity → incomplete data

– Process to establish a National Monitoring Framework to monitor NCDs]

- Limited resource allocation
  - Human
  - Infrastructure
  - Financial
- HCW resistance



- Describe what are the opportunities you identify that could be in place to overcome the challenges and what are the support needed from PAHO to improve countries capacity on NCD surveillance]
- Establishment of a NCD Director
- Establishment of National NCD Steering Committee to oversee implementation of NCD strategic plan
- Development of new National Strategic Plan for the prevention and control of NCDs
- Opportunity for training from the University of the West Indies
- Support
  - Resources
  - Access to appropriate monitoring platform