



Caribbean
Public Health
Agency



CARPHA

Preventing disease
Promoting and protecting health

Progress on 2010/2011 Recommendations

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Preventing disease, promoting and protecting health

Dengue Integrated Management Strategy

Recommendations :

- Keep countries abreast of cutting edge technology re vector control
- CAREC to explore possibilities for operational research in the area of dengue prevention and control

Progress:

- IMS-Dengue workshops
 - Held in 5 CMS
 - Guyana, Jamaica, Suriname, Trinidad and Tobago and Dutch territories.
 - Country plans developed at workshops
 - Evaluations to be conducted to ascertain progress with the implementation of the plans in each country.
 - Guyana's plan was revisited and redefined in 2012.

Dengue Integrated Management Strategy

- New dengue classification still not been adapted in many countries
- Information shared with countries during interactions on new technologies such as genetically modified mosquitoes; lethal ovitraps, etc.
- Discussions held with countries on several operational research projects.
 - Some countries have submitted proposals for funding.
 - Research projects include
 - use of ovitraps and adult mosquito traps in the evaluation of control interventions;
 - use of fish as a means of biological control;
 - container productivity studies to determine most productive containers for *Aedes aegypti* in order to target control activities.

Influenza Surveillance

Recommendations :

To improve specimen collection for respiratory illnesses

Progress:

- Training and re-training of new and current staff on the technique of specimen collection was conducted by the PAHO flu team.

Sub-regional Surveillance

Recommendation:

- Changes to four-weekly form/collection
- Facilitate easier submission of data from countries (dedicated email)
- Coordinate and maintain regional health emergency response team
- Remove reporting of deaths on 4 weekly forms

Progress:

- Reporting of suspected cases and deaths have been removed from the four weekly reporting forms.
- Dedicated e-mail to facilitate the ease of submission of data has been created.

HIV Case-Based Surveillance

Recommendation:

- Operational manuals required for implementation of HIV case-based surveillance
- CAREC to play a catalytic role in resolving issues around the organization of care and treatment
- Do not revise data collection form too frequently as it presents logistical challenges for implementation in countries

Progress:

- OECS are implementing a case base surveillance system
- OECS has developed operational manuals for the implementation of HIV case based surveillance
- Surveillance forms not revised since 2007

Antimicrobial Resistance (AMR) Surveillance

Recommendations:

- Provide technical assistance to establish AMR surveillance to CMS
- Distribute list of organisms for consideration of inclusion in AMR testing
- Consider analysis of AMR data at the regional level to determine whether infections are community acquired or hospital acquired

Progress:

- CARPHA and Public Health England partnering to deliver workshop to identify key steps and strategies for combatting the spread of AMR in CMS.
 - will also examine laboratory twinning initiative
- CARPHA and Argentina collaborating on strengthening laboratory surveillance

Tuberculosis (TB) Surveillance

Recommendations:

- Improve TB testing services for countries and strengthen testing capacity in countries.
- Provide additional information about Gene Xpert testing system for TB, including a testing algorithm, to countries
- Continue to provide TB Drug sensitivity testing to countries requiring it

Progress:

- Countries now report TB data annually to WHO
- Protocol implementation of TB case-based surveillance and the GeneXpert has been finalized together with CARPHA laboratory.
- TB plans were done for 2 CMS (Anguilla and BVI)
 - follow-ups on the finalization and implementation conducted by PAHO

NCD Minimum Dataset Implementation

Recommendations:

- Clarify denominators to be used in the measurement of the four indicators requested for quarterly reporting
- CAREC should include averaging and benchmarking in data analysis for comparison purposes
- CAREC to send an annual NCD minimum dataset reporting form with the relevant year on it to countries.

Progress:

- NCD minimum dataset is currently being revised to include the NCD Global Indicators
- The UN High Level Meeting on NCDs was held in September, 2011
 - Political Declaration signed by countries worldwide
 - Development of a Global Framework

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Progress:

- Quarterly indicators discontinued until the ambiguities clarified
- Inclusion of averaging and benchmarking in analysis implemented and reflected publications
- Reporting Form modified to reflect inclusion of relevant year and distributed

Cancer and Stroke Registries

Recommendations:

- Initiate surveillance for NCDs utilizing laboratory data e.g. lipids, cholesterol,
- Collaborate with PAHO to deliver IARC training CMS and follow-up training for other countries previously trained
- Conduct training in stroke registries to CMS
- Coordinate exchange/mentorship visits between countries

Progress: CANCER

- Cancer surveillance workshop conducted with IARC & partners in 2014
- Discussions are ongoing with IARC & partners to support cancer and NCD surveillance in CMS
- To date ten (10) countries participated in the IARC training
 - Anguilla, Aruba, Bahamas, Barbados, Curacao, Dominica, Guyana, Jamaica, Trinidad and Tobago and Suriname

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Progress: STROKE

- Stroke registration workshop held in collaboration with PAHO in 2012.
- Five (5) CMS participated
- Technical co-operation project planned between Barbados and Curacao
 - to support the development of Curacao's stroke registry
 - to date this has not been done.

Risk Factor Surveys (RFS)

Recommendations:

- Continue to provide technical assistance to countries to conduct risk factor surveys

Progress:

- Technical assistance to 11 CMS for planning and implementation of RFS
 - Anguilla, Bahamas, Bermuda, Cayman Islands, Guyana, Nevis, Montserrat, St. Lucia, St. Vincent and the Grenadines, Suriname and Turks and Caicos Islands
- RFS completed in 5 CMS
 - Bahamas, Cayman Islands, St. Lucia, St. Vincent and the Grenadines and Suriname
- Survey reports completed for 2 countries (Cayman Islands and Suriname)
 - Draft reports available for 1 CMS (St. Lucia)
 - In progress in 2 CMS (Bahamas and St. Vincent and the Grenadines)
- Data collection ongoing in 1 CMS (Bermuda)
- Survey planning ongoing in 3 CMS (Anguilla, Montserrat and Turks and Caicos)



Laboratory External Quality Assurance (EQA)

Recommendations:

- Improve communication with countries at each step of the process being coordinated for UKEQAS (notification of panel distribution; sample receipt to release of PT results) so that gaps/delays can be identified and corrected for improved participation

Progress:

- CARPHA currently does not co-ordinate any EQA (External Quality Assurance) programmes
 - information on EQA programmes and providers is shared CMS on request
- CARPHA not currently involved in UKEQAS for countries
 - funding for coordination to be sourced
 - suggestion to re-explore under Laboratory Network and Coordination activities.

Recommendations:

- Document agreement and plan (sustainable funding; HR issues; QMS)
- Clear guidelines for responsibility of each stakeholder and partner
- Set realistic timelines e.g. procurement of equipment, infrastructure
- Country needs to perform a sound financial assessment taking into account sustainability
- In identifying staff for training specific competencies should be outlined
- Monitoring and supervision after implementation
- Recipient MOH should make incremental payments to ensure sustainability

Progress:

- Draft protocol for Laboratory Technology Transfer developed.
 - To be reviewed.
 - Suggestion to adapt protocols on a country specific basis, and implement under a MOU framework.
- Laboratory technology transfer done upon request from individual CMS



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Laboratory Networks

Recommendations:

- To provide technical assistance through replication exercises of the Infectious Substances Shipping Training in countries

Progress:

- In collaboration with PAHO
 - training was provided for 166 persons (137 Category A certified) across 9 CMS since 2012
 - 1 regional course held in October 2012
 - 1 sub-regional course held for the Dutch Antilles in July 2013.

Implementation of International Health Regulations (IHR)

Recommendations:

- Clarify the status of overseas territories with respect to an extension for IHR implementation
- Facilitate the provision of assistance in the area of legislation to support the implementation of IHR

Progress:

- 6 CMS implemented Level I of the Caribbean Regional Field Epidemiology and Laboratory Training Programme
 - strengthening human resources capacity for IHR implementation
 - Barbados, Bahamas, Suriname, St Lucia, Grenada, St Vincent and the Grenadines