

Implementation Status & Results
Uruguay
UY Non Communicable Diseases Prevention Project (P050716)

Operation Name: UY Non Communicable Diseases Prevention Project (P050716) Project Stage: Implementation Seq.No: 8 Status: ARCHIVED Archive Date:

Product Line: IBRD/IDA Country: Uruguay Approval FY: 2008
 Region: LATIN AMERICA AND CARIBBEAN Lending Instrument: Specific Investment Loan
 Implementing Agency(ies): Ministry of Public Health

Key Dates

Board Approval Date	28-Aug-2007	Original Closing Date	31-Dec-2012	Planned Mid Term Review Date	06-Dec-2010	Last Archived ISR Date	27-Feb-2011
Effectiveness Date	09-Jan-2008	Revised Closing Date	31-Dec-2012	Actual Mid Term Review Date	10-Dec-2010		

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The operation would seek to support the Government's efforts to further strengthen its health delivery services and the current health policy framework for NCD. In this context, the specific development objectives of the proposed operation would be: (i) To expand accessibility and quality of primary health care services related to selected NCD early detection and medical care; and (ii) To avoid and reduce exposure to selected NCDs risk factors as well as their health effects

Has the Project Development Objective been changed since Board Approval of the Project?

Yes No

Component(s)

Component Name	Component Cost
Strengthening of the MSP's Capacity to Address the Country's Changing Epidemiological Profile	6.10
Improving Access to Quality Health Care Services for Prevalent NCDs in Public Care Facilities	15.80
Implementation of the Previniendo Pilot Program	3.80
Project Management	2.10

Overall Ratings

	Previous Rating	Current Rating
Progress towards achievement of PDO	Moderately Satisfactory	Moderately Satisfactory
Overall Implementation Progress (IP)	Moderately Unsatisfactory	Moderately Satisfactory
Overall Risk Rating	Moderate	Moderate

Implementation Status Overview

Project implementation has improved during the last eight months, with the achievement of the following key actions between December 2010 and August 2011: (i) advances are

being made in the implementation of the National Integrated Health Information System (NIHIS), including equipment purchased, pilot implementation of electronic medical records in the State Health Service Administration (ASSE) and hospital discharges classified using the International Classification of Disease (ICD-10) which have increased to 68% in ASSE and have reached 100% for private providers; (ii) Health Situation monitoring continues to improve, with the addition of three new departmental Health Situation Rooms (now 9 / 19) contributing to modernization and decentralization of the health surveillance system; (iii) regular publishing of electronic surveillance bulletins; (iv) 19 health prevention projects at community level are under implementation; (v) national health promotion strategy is being implemented at departmental level; (vi) NCD Quality Standards for first level facilities had been developed; and (vii) almost US\$10 million of medical equipment (including mammography equipment) was acquired to strength first level facilities capacity to work with NCD patients.

Locations

No Location data has been entered

Results

Project Development Objective Indicators

Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
Percentage of selected NCDs cases (hypertension; diabetes; and obesity/overweight) diagnosed by primary care teams under follow-up.	<input type="checkbox"/>	Text	Value	a. Hypertension 54.7; b. Diabetes 63.94; c. Obesity/overweight: 13.5		a. Hypertension: 85; b. Diabetes: 93; Obesity/overweight: 65
			Date	29-Dec-2006	06-May-2011	31-Dec-2012
			Comments	Data from National Survey of Risk Factors 2006.	The new National Survey of Risk Factors is planned to be carried out during 20121	
Percentage of the estimated number of newborns with disabilities under folow-up by Early Detection Treatment Units.	<input type="checkbox"/>	Text	Value	0 %	75.6 %	60%
			Date	29-Dec-2006	29-Dec-2010	31-Dec-2012
			Comments		Indicator achieved. There are nine new operational Early Detection and Treatment Units increasing coverage of newborns with disabilities.	
Percentage of population being screened for NCDs risk-factors in participating departments.	<input type="checkbox"/>	Text	Value	0%	13.5 %	65%
			Date	29-Dec-2006	31-Mar-2011	31-Dec-2012
			Comments		Implementation agency is providing technical assistance to help increase the speed of screening.	

Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
Percentage of women between 50 and 69 years of age having had a mammogram in any given year.	<input type="checkbox"/>	Percentage	Value	8.11	14.10	45.00
			Date	29-Dec-2006	29-Dec-2010	
			Comments	The baseline value was corrected in 2007 to 8,11 % for total population whose mammograms were reported to the Cancer Prevention Committee and to 21.09%, corresponding to the percentage of women 50 - 69, ASSE beneficiaries.	Indicator updated annually. Mammography equipment was acquired by MOH to expand the supply of mammogram services. It is expected that new equipment will enter into production ending 2011.	

Intermediate Results Indicators

Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
1. Regularly report of consolidated data on number of patients diagnosed with specific NCDs and currently under treatment	<input type="checkbox"/>	Number	Value	0.00	3.00	9.00
			Date	29-Dec-2006	29-Dec-2010	31-Dec-2012
			Comments		In 2010, 3 departments under the Previniendo pilot program began reporting. Now, an informatics system to report the information is being implemented in other departments. Thus all departments are expected to submitted regular reports in 2012.	
Primary health facilities uses regularly the diagnosis s and monitoring system	<input type="checkbox"/>	Number	Value	11.00	14.00	205.00
			Date	29-Dec-2006	29-Apr-2011	31-Dec-2012
			Comments	Diagnosis s and monitoring system is called "SGS"	The equipment needed for the SGS installation is currently being procured and expected to be delivered end 2011.	
Main health sector databases virtually integrated into the National Health Information System	<input type="checkbox"/>	Text	Value	0	4	Four (4) : BPS, RUCAF, ASSE beneficiary and FNR beneficiary databases are virtually integrated into the National Health Information System.

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Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments	Data base are not integrated	Indicator successfully reached: Data base are virtually integrated and functioning.	
Information reporting of the health surveillance system requirements are comply by the health public units	<input type="checkbox"/>	Percentage	Value	10.00	69.20	85.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments	Notifiable diseases, (timely weekly) using hepatitis as tracer	Notifiable diseases, (timely weekly) using hepatitis as tracer	
Data definitions and coding standards for pathologies issued.	<input type="checkbox"/>	Number	Value	24.00	35.00	34.00
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments		Reviewed 24 existing guidelines. 11 new diseases were incorporated. Their guides will be developed in October 2012. Indicator successfully reached.	
Public Health Bulletins and Surveillance Bulletins published according to norms in any given year.	<input type="checkbox"/>	Number	Value	0.00	5.00	2.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments		Indicator achieved and surpassed.	
Additional DIGESA staff trained in #Data for Decision-Making.#	<input type="checkbox"/>	Number	Value	5.00	6.00	20.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments			
DIGESA key personnel trained in SEVES.	<input type="checkbox"/>	Number	Value	0.00	144.00	50.00
			Date	29-Dec-2006	06-May-2011	31-Dec-2012
			Comments	SEVES: Surveillance System	Indicator achieved and surpassed.	
10 key staff trained in laboratory safety.	<input type="checkbox"/>	Number	Value	0.00	10.00	10.00
			Date	29-Dec-2006	30-Jul-2010	31-Dec-2012
			Comments		Activity underway and will be completed by end 2011.	

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DIGESA additional key staff members trained in outbreak investigation.	<input type="checkbox"/>	Number	Value	10.00	28.00	30.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments		Indicator on track.	
Communicable disease outbreaks reported by surveillance system are managed at local level according to norms.	<input type="checkbox"/>	Percentage	Value	10.00	96.20	90.00
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments		25 of 27 outbreaks	
Municipalities carry out #healthy spaces# campaigns	<input type="checkbox"/>	Percentage	Value	0.00	52.60	50.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments		Indicator achieved and surpassed.	
Health promotion subprojects related to NCDs are implemented in participating healthy spaces and are evaluated.	<input type="checkbox"/>	Percentage	Value	0.00	100.00	95.00
			Date	29-Dec-2006	15-Aug-2011	31-Dec-2012
			Comments			
Students in public schools participating in #healthy school# campaigns.	<input type="checkbox"/>	Percentage	Value	0.00	52.70	20.00
			Date	29-Dec-2006	31-Mar-2011	31-Dec-2012
			Comments		Indicator achieved successfully	
Disability, Early Detection and Treatment Units are developed.	<input type="checkbox"/>	Number	Value	0.00	10.00	5.00
			Date	29-Dec-2006	06-May-2011	31-Dec-2012
			Comments		Indicator achieved and surpassed.	
Personnel in health promotion unit are trained.	<input type="checkbox"/>	Number	Value	0.00	121.00	100.00
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments		Indicator achieved and surpassed.	
Annual Tobacco media campaign is developed in any given year.	<input type="checkbox"/>	Number	Value	0.00	9.00	5.00
			Date	29-Dec-2006	15-Aug-2011	31-Dec-2012

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			Comments		Indicator successfully reached. From 2007 to 2010 had been developed 5 national stop smoking campaigns, plus 4 national pictograph campaigns, totaling 9 annual media campaigns.	
A National Promotion Advocacy group is conformed.	<input type="checkbox"/>	Text	Value	The National Promotion Advocacy group does not exist.	Advocacy group created, with 98 members.	A National Promotion Advocacy group is conformed.
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments		Indicator reached	
Regulatory framework affecting essential NCDs and risk factors is review to assess their effectiveness.	<input type="checkbox"/>	Text	Value	n/a	In progress, on track.	Regulatory framework affecting essential NCDs and risk factors reviewed.
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments		Literature review was conducted of the regulatory framework. It is spreading through a CD. MOH' Website is being set to provide free access to the regulations.	
Primary health care establishments are certified and quality accredited on NCDs medical care ambulatory procedures.	<input type="checkbox"/>	Number	Value	0.00		200.00
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments	There was not legal framework neither accreditation guidelines	Legal framework for accreditation process and Guidelines for accreditation at primary care level were developed and a pilot test is under development.	
1. Percentage of reduction in hospital admissions for treatments more appropriately provided at lower levels: a. Hypertension crisis b. Stroke c. Ketoacidosis diabetic	<input type="checkbox"/>	Text	Value	a) Hypertension Crisis - 100 cases. b) Stroke 571 cases c) K A Diabetic - 107 cases	a) HTA crisis. (-)54% b) Stroke: 13 % c) K A Diabetic: 41.2 %	a. Hypertension crisis 30% b. Stroke 30% c. Ketoacidosis diabetic 50%
			Date	29-Dec-2007	31-Dec-2010	31-Dec-2012

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			Comments	year 2007. Upon 20208 ASSE hospital discharges.	Results may affected by very low number of cases. Increases in number of HTA crisis admissions may be a consequence of early HTA crisis detection, as % of stroke admissions are declining.	
2. Percentage of reduction in the number of advanced-stage cases for specific NCDs assisted under the FNR relative to all cases in the same NCDs category: a. Cardiovascular disease by hypertension and	<input type="checkbox"/>	Text	Value	Angioplasty 72.4 % (as consequence of hypertension) Dialysis 74.3 % (having hypertension as risk factor)	Angioplasty 2,8 % Dialysis (-) 5.6 %	5 %
			Date	29-Dec-2006	31-Dec-2010	31-Dec-2012
			Comments	Angioplasty 601/830 cases Dialysis 150/200 cases	To be updated in Dec 2011	
Health personnel receiving training	<input checked="" type="checkbox"/>	Number	Value	100.00	1371.00	4000.00
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments		To be updated in December 2011	
Percentage of population of pilot departments screened for NCDs risk factor.	<input type="checkbox"/>	Percentage	Value	0.00	13.50	65.00
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments	The program did not exist.		
Percentage of cases diagnosed and under follow-up by primary care teams for the following NCDs: a. Hypertension b. Diabetes c. Obesity / overweight	<input type="checkbox"/>	Text	Value	a.Hypertension: 49.1% b.Diabetes: 73% c.Obesity/ overweight: 0%	HTA; diabetes and Obesity: 11 % of risk population under control	a.Hypertension 85% b.Diabetes 93% c.Obesity / overweight 65%
			Date	29-Dec-2006	30-Jun-2011	31-Dec-2012
			Comments	Data from 2006 Risk factor Survey. It would be not totally consistent at departmental level.		
3. Percentage of reduction in hospital admissions for treatments more appropriately provided at lower levels:a. Hypertension crisisb. Stroke c.Ketoacidosis diabetic	<input type="checkbox"/>	Text	Value	Hypertensive Crisis 75 cases Strokes 47 cases Diabetic ketoacidosis 7 cases	Hypertensive Crisis 11.1 % Strokes (-) 27.3 % Diabetic ketoacidosis 100 %	a.Hypertension crisis 70% b.Stroke 70% c.Ketoacidosis diabetic 70%
			Date	29-Dec-2006	30-Dec-2010	31-Dec-2012
			Comments	Total hospital discharges due to related illness.	Results are affected by very low number of cases.	

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4. Percentage of reduction in the number of advanced-stage cases for Cardiovascular disease and Chronic Kidney Failure by hypertension assisted under the FNR relative to all cases in the same category	<input type="checkbox"/>	Text	Value	Angioplasty 80% Dialysis 77.3%	Angioplasty 5,2 % Dialysis (-) 12.9 %	10% of reduction
	Date		29-Dec-2006	31-Dec-2010	31-Dec-2012	
	Comments		Angioplasty 85/ 112 cases Dialysis 17/ 21 cases	Results are affected by very low number of cases.		
5. Primary care providers under Annual Performance Agreements with DHIE	<input type="checkbox"/>	Percentage	Value	0.00	81.20	85.00
	Date		29-Dec-2006	30-Jun-2011	31-Dec-2012	
	Comments			In progress, on track		
To develop and apply a methodology to assess the financial impact on public finances and household budgets of alternative health care reform strategies.	<input type="checkbox"/>	Text	Value	n/a	It is in the process of defining the methodology to implement	Methodology has been developed in conjunction with the Ministry of Finance and is being implemented in any given year
	Date		29-Dec-2006	30-Jun-2011	31-Dec-2012	
	Comments			In progress, it is expected to be defined end 2011.		

Data on Financial Performance (as of 26-Aug-2011)

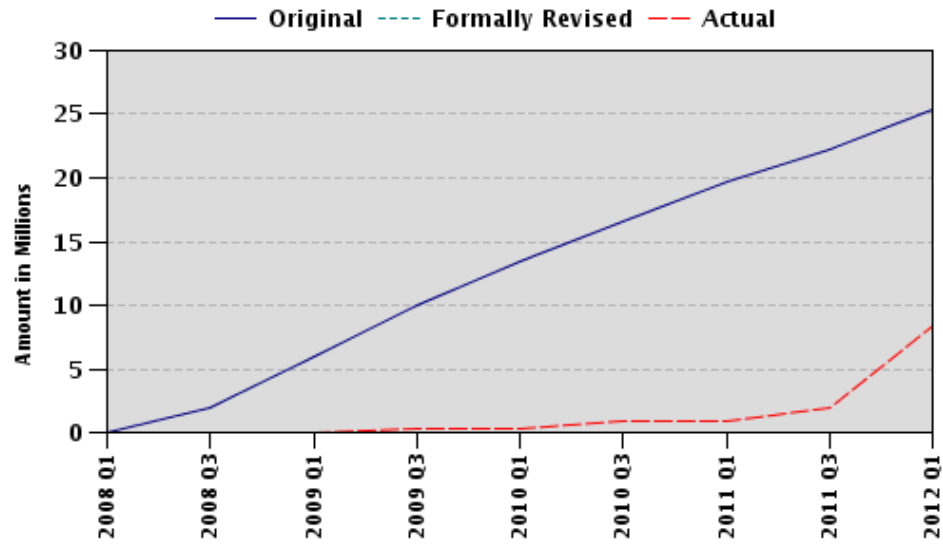
Financial Agreement(s) Key Dates

Project	Loan No.	Status	Approval Date	Signing Date	Effectiveness Date	Closing Date
P050716	IBRD-74860	Effective	28-Aug-2007	13-Dec-2007	09-Jan-2008	31-Dec-2012

Disbursements (in Millions)

Project	Loan No.	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P050716	IBRD-74860	Effective	USD	25.30	25.30	0.00	8.36	16.94	33.00

Disbursement Graph



Key Decisions Regarding Implementation

There are not key decisions for disclosure.

Restructuring History

There has been no restructuring to date.

Related Projects

There are no related projects.