



## UY Non Communicable Diseases Prevention Project (P050716)

LATIN AMERICA AND CARIBBEAN | Uruguay | Health, Nutrition & Population Global Practice |  
IBRD/IDA | Specific Investment Loan | FY 2008 | Seq No: 16 | ARCHIVED on 22-Dec-2015 | ISR22120 |

Implementing Agencies: Ministerio de Salud

## Key Dates

## Key Project Dates

Bank Approval Date:28-Aug-2007

Effectiveness Date:09-Jan-2008

Planned Mid Term Review Date:06-Dec-2010

Actual Mid-Term Review Date:10-Dec-2010

Original Closing Date:31-Dec-2012

Revised Closing Date:31-Dec-2015

## 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 s 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 Objective?

No

## Components

Name

Strengthening of the MSP's Capacity to Address the Country's Changing Epidemiological Profile:(Cost \$5.50 M)

Improving Access to Quality Health Care Services for Prevalent NCDs in Public Care Facilities:(Cost \$15.70 M)

Implementation of the Previniendo Pilot Program:(Cost \$2.90 M)

Project Management:(Cost \$4.70 M)

## Overall Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	● Moderately Satisfactory	● Moderately Satisfactory
Overall Implementation Progress (IP)	● Moderately Satisfactory	● Moderately Satisfactory



---

Overall Risk Rating

● Low

● Low

---

## Implementation Status and Key Decisions

The Project has achieved its Development Objectives for the most part. The Project has expanded the accessibility and quality of primary health care services related to selected NCDs early detection and control by strengthening the capacity of public health providers through the acquisition of medical diagnosis and ITC equipment, the development of modern health management tools and training, as well as the capacity of the MOH to develop regulatory framework, including quality-care standards, and to ensure its adequate enforcement.

The Project has also expanded the provision of specialized medical care to avoid or reduce exposure to NCD risk factors and their health effects by: strengthening the epidemiological surveillance which allowed the MOH to make informed decisions about prevention and control priorities; and developing a National Health Promotion and Prevention Strategy consisting of public health programs aimed at promoting healthy lifestyles and NCDs preventions in the National Integrated Health System.

These accomplishments are reflected by the achievement of three out of the four PDO indicator's targets (PDO indicators 1, 3 and 4). However, one of the PDO indicators, related to increase coverage of mammogram in target ASSE population, will not be totally accomplished (reaching 12 % of a goal of 20%). Nonetheless, on balance, the project has achieved its main goals and is rated as Moderately Satisfactory for outcome.

The Project has disbursed US\$19.8 million out of US\$25.3 million (78.4 percent of the loan) and will close on December 31, 2015.





## Risks

### Systematic Operations Risk-rating Tool

Risk Category	Rating at Approval	Previous Rating	Current Rating
---------------	--------------------	-----------------	----------------



Political and Governance	--	● Low	● Low
Macroeconomic	--	● Low	● Low
Sector Strategies and Policies	--	● Low	● Low
Technical Design of Project or Program	--	● Moderate	● Moderate
Institutional Capacity for Implementation and Sustainability	--	● Low	● Low
Fiduciary	--	● Low	● Low
Environment and Social	--	● Low	● Low
Stakeholders	--	● Low	● Low
Other	--	--	--
Overall	--	● Low	● Low

## Results

### Project Development Objective Indicators

► Percentage of cases diagnosed and under follow-up by primary health care teams for the following NCDs: a. Hypertension; b. Diabetes; c. Obesity /overweight (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	--	--	--	--
Date	29-Dec-2006	--	--	31-Dec-2015

#### Comments

At the time of project design, combined indicators were allowed to be included into the Results Framework. However, as nowadays the system does not allow entering more than one value for this indicator, the latter was unfolded in three sub indicators: One for each pathology comprised in the original indicator. End target surpassed for each sub indicator. According to Project design, the information source for this indicator was the National Risk Factor Survey 2014. Therefore, no new updates are expected.

▲ Percentage of cases diagnosed and under follow-up by primary health care teams for Hypertension (Percentage, Custom Breakdown)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	54.70	62.60	62.60	60.00
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015

▲ Percentage of cases diagnosed and under follow-up by primary health care teams for Diabetes (Percentage, Custom Breakdown)



	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	63.90	77.60	77.60	73.00
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015

▲ Percentage of cases diagnosed and under follow-up by primary health care teams for Obesity/overweight (Percentage, Custom Breakdown)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	13.00	34.30	34.30	20.00
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015

▶ Percentage of women 50-69 covered by the public provider (ASSE), who has had a mammogram in any given year. (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	9.90	12.20	12.20	20.00
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015

Comments

No changes since last report. Provisional data for the first semester 2015 shows that 6.66% women covered by the public provider had a mammogram and a new update is expected to be available by End December. This performance should result in annualized value of around 12.5%. Therefore, it is expected that the End target for this indicator will not be achieved, hampered by at least three factors: (i) slow development of the digital network of mammography, due to delayed process of bidding of that equipment; (ii) a long public controversial technical discussion on effectiveness of breast screening and (iii) weakness in information systems to recover data in some public providers.

▶ Crude mortality rate from Diseases of the Circulatory System ( I00-I99) in the population under 70 years (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	75.18	61.50	60.30	67.50
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015



## Comments

Provisional data for December 2014. End target surpassed.

► Percentage of population 45-64 years of age covered by the NIHS and screened for NCD risk factors. (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	34.59	34.59	30.00
Date	29-Dec-2006	31-Dec-2014	31-Dec-2014	31-Dec-2015

## Comments

No change since last report. New update is expected to be available in February 2016. End target surpassed.

## Overall Comments

## Intermediate Results Indicators

► BPS, RUCAF, ASSE and FNR beneficiary databases and internal MSP databases are integrated into the National Health Information System. (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	BPS, RUCAF, ASSE and FNR beneficiary databases and internal MSP databases are not integrated into the National Health Information System.	Indicator on track.	The main databases on beneficiaries (BPS, RUCAF, ASSE and FNR) are integrated and internal MOH databases are in process of integration.	BPS, RUCAF, ASSE and FNR beneficiary databases and internal MSP databases are integrated into the National Health Information System.
Date	29-Dec-2006	31-Dec-2014	11-Dec-2015	31-Dec-2015

## Comments

Advances on the process of integrating internal MOH databases are the followings: (i) a diagnosis of the internal MOH databases was completed; (ii) a Data Warehouse on Epidemiology was designed; and (iii) a Data Warehouse for Vital Statistics, hospital discharges and reportable events (DEVISA) was developed. However, the system has not been totally used. Currently, a new Electronic Government Area of the MOH has taken the lead to add external database on NCD to the DWH of the health information system in coordination with AGESIC, the National Agency in charge of the e-government strategy. Given that Project's closing date is close, it is highly likely that the



End target for this indicator will be partially achieved.

► Proportion of Epidemiologic Surveillance Units (ESUs) in compliance with information reporting requirements of the health surveillance system (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	10.00	55.60	72.20	85.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

The performance of this indicator has been affected by the resignation of 9 Epidemiologic Surveillance's coordinators. While 3 vacancies have already been filled, the rest is still pending. There is an ongoing process to cover the vacancies. However, given that Project's closing date is close, it is highly likely that the End target for this indicator will not be achieved.

► Number of DIGESA key personnel trained in SEVES, outbreak investigation and data for decision making. (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	110.00	110.00	50.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.





► Proportion of communicable disease outbreaks reported by surveillance system that are managed at local level according to norms. (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	10.00	90.00	99.70	90.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.

► Number of Health Departments that carry out “healthy municipality strategy”, including (a) health promotion subprojects related to NCDs and (b) development of healthy spaces (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	15.00	16.00	15.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.

► Proportion of public schools implementing ‘healthy school’ strategy. (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	16.20	16.20	20.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

No changes since last report. Given that Project's closing date is close, it is highly likely that the End target for this indicator will not be achieved.



► A National Promotion Advocacy group is conformed. (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	The National Promotion Advocacy group does not exist.	A National Promotion Advocacy group is conformed and there are 60 additional working groups in health Promotion, articulated by the MOH.	A National Promotion Advocacy is conformed and there are 60 additional working groups in health Promotion, articulated by the MOH.	A National Promotion Advocacy group is conformed.
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments  
End target met.

► Regulatory framework affecting essential NCDs and risk factors is reviewed to assess its effectiveness. (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Regulatory framework affecting essential NCDs and risk factors has never been reviewed.	Regulatory framework affecting essential NCDs and risk factors reviewed.	Regulatory framework affecting essential NCDs and risk factors reviewed.	Regulatory framework affecting essential NCDs and risk factors reviewed.
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments  
End target met.

► Number of primary health care establishments that are certified and quality accredited on NCDs medical care ambulatory procedures. (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	120.00	122.00	100.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments  
End target surpassed.



► Health personnel receiving training (number) (Number, Core)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	100.00	2426.00	2579.00	2000.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.

► Development of a National Training Network in ASSE for primary healthcare workers (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Technical Team and training contents have not been developed and central training room has not been equipped and is not functioning.	Technical Team and contents for 4 annual training courses. There are 64 training rooms equipped and operating.	Technical Team and contents for 4 annual training courses. There are 64 training rooms equipped and operating.	Technical Team and training contents developed and 60 training rooms equipped and functioning.
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target met.

► Percentage of ASSE beneficiaries registered in electronic medical records (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	81.10	82.20	30.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.



► Percentage of population between 45 to 64 years with ASSE coverage screened for NCDs risk factor. (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.17	1.15	22.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

Action Plan to improve Previniendo's performance did not succeed in achieving this objective within Project's timeframe. Therefore, it is expected that the End target for this indicator will not be achieved.

► Percentage of ASSE beneficiaries with risks for NCDs detected that is receiving follow up under Previniendo guideline (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.26	2.60	10.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

Action Plan to improve Previniendo's performance did not succeed in achieving this objective within Project's timeframe. Therefore, it is expected that the End target for this indicator will not be achieved.

► 5. Primary care providers under Annual Performance Agreements with DHIE (Percentage, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	100.00	100.00	85.00
Date	29-Dec-2006	30-Jun-2015	11-Dec-2015	31-Dec-2015

Comments

End target surpassed.



► To develop and apply a methodology to assess the financial impact on public finances and household budgets of alternative health care reform strategies. (Text, Custom)


	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	--	Methodology has been developed.	Methodology has been developed.	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-2015	11-Dec-2015	31-Dec-2015

Comments  
End target met.

Overall Comments

## Data on Financial Performance

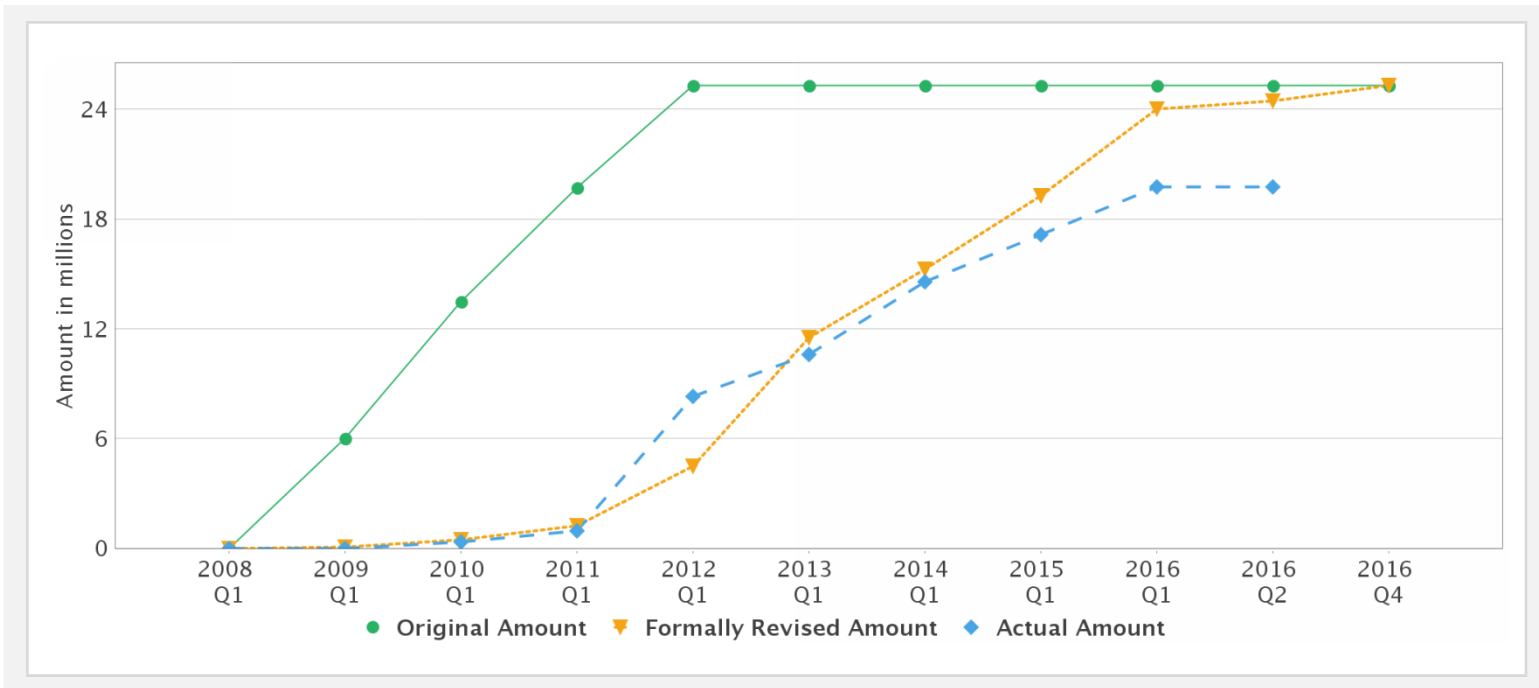
### Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	Disbursed
P050716	IBRD-74860	Effective	USD	25.30	25.30	0.00	19.82	5.48	 78%

### Key Dates (by loan)

Project	Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P050716	IBRD-74860	Effective	28-Aug-2007	13-Dec-2007	09-Jan-2008	31-Dec-2012	31-Dec-2015

### Cumulative Disbursements



### Restructuring History

Level 1 Approved on 08-Nov-2012 ,Level 2 Approved on 13-Aug-2014

### Related Project(s)

There are no related projects.