



**Pan American
Health
Organization**



**World Health
Organization**
Americas

INTEGRATED MANAGEMENT OF CHRONIC DISEASES IN THE AMERICAS



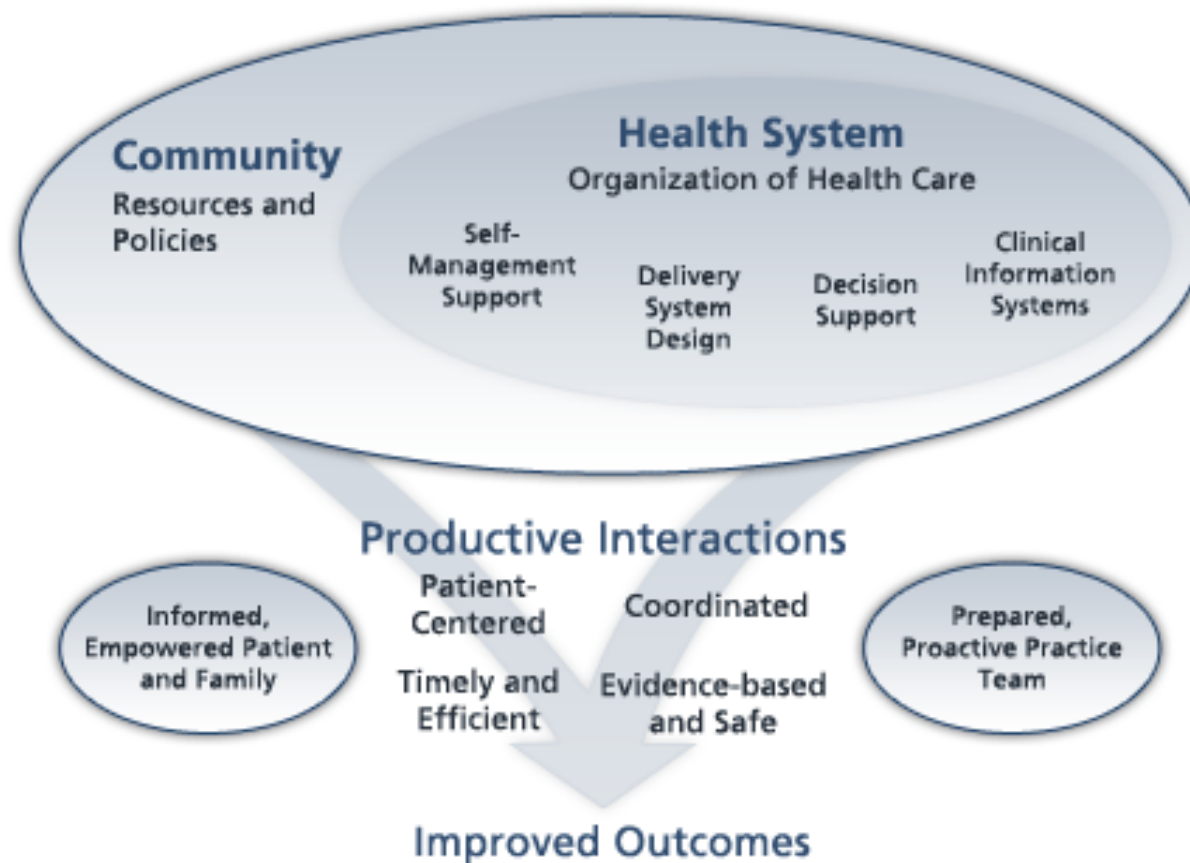
Cuidados Crónicos

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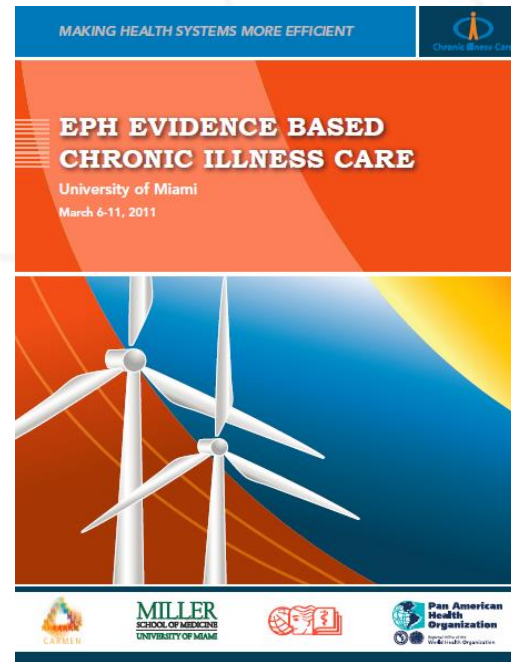
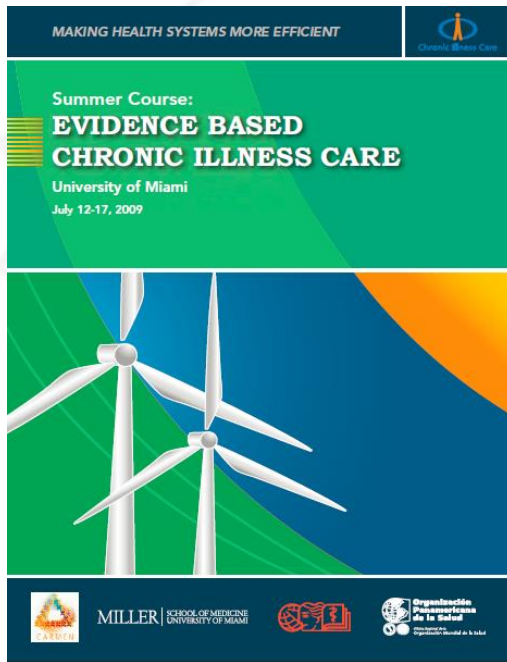
Program

1. Introduction to the Chronic Care Model
2. Course Evidence-based Chronic Illness Care
3. PAHO Resources. The Passport for a Healthy Lifestyle and the Manual on Health Technologies
4. Microclinic International (MCI), Leila Makarechi
5. Progress report Under Construction with the information gathered by Sandra Delon (Canada), Maria Cristina Escobar (Chile), and Ailton Alves (Brazil)
5. Chronic Disease Electronic Management System (CDEMS) And Ritter, L Intrebartoli, A Rafiqi
6. Improving NCD surveillance in the Americas, Ramon Martinez

The Care Model



Source: Pan American Health Organization. **Innovative care for the chronic conditions: Organization and delivery of high-quality care to the non-communicable chronic diseases in the Americas.** <http://bit.ly/11dld8C>



**More than a 1,000 health professionals
trained in 34 countries**

- 1. Or Miami 2009
- 2. Or Miami 2011
- 3. Or Catholic of Chile, 2011
- 4. Or Buenos Aires, 2012
- 5. Bogotá. 2012
- 6. Maceió, Brazil, 2013
- 7. OAS (on-line) 2013
- 8. Argentina (on-line) 2012
- 9. Argentina (on-line) 2013
- 10. Bogotá, 2013
- 11. San Juan, PR 2014
- 12. Panama 2014
- 13. Peru 2014
- 14. Paraguay
- 15. R Dominican
- 16. Mexico
- 17. Campeche, Mx
- 18. Colima, Mx

**On-line:
OAS, 2013;
2013: Ministry of
Health of Argentina**



Evaluation of the Implementation of the Chronic Care Model in 17 Countries, 2013-2016

Country	Year	N	ORGANIZACIÓN DE ATENCIÓN A LA SALUD	DISEÑO ENTREGA SERVICIOS	SISTEMA INFORMACIÓN CLÍNICO	APOYO DECISIONES	APOYO AUTO MANEJO	MODELO CUIDADOS CRÓNICOS
Argentina	2016	24	5.8	5.1	5.1	6.2	6.2	5.7
Brazil	2013	20	4.9	5.5	5.8	4.2	4.0	4.9
Belize	2014	2	6.0	5.3	7.3	5.4	3.5	5.5
Bolivia	2014	2	3.0	4.4	3.9	2.7	5.0	3.8
Chile	2016	84	7.4	6.5	8.1	7.9	4.9	7.0
Colombia	2013	3	6.1	6.2	5.4	1.2	5.5	4.9
Costa Rica	2014	4	6.5	4.7	8.2	8.6	6.3	6.8
Cuba	2014	4	6.5	7.8	7.9	6.3	8.6	7.4
R Dominic	2016	1	10	9.1	5.0	6.0	4.3	6.9
El Salvador	2014	2	4	5.9	2.9	1.3	3.3	3.5
Honduras	2014	3	0.0	3.4	1.3	0.0	0.6	1.1
Mexico	2016	9	6.7	7.0	7.5	8.4	7.1	7.3
Panama	2014	69	4.7	4.4	2.2	1.7	1.5	2.6
Paraguay	2016	3	6	6.1	2.9	8.0	6.2	5.8
Peru	2014	8	3.0	4.4	2.2	1.7	1.5	2.6
Puerto Rico	2016	1	3	5.5	6.3	10.0	7.1	6.4
Uruguay	2014	1	6.0	5.6	4.6	4.5	6.7	5.5

Source: survey of structure completed by participants of the courses EBCIC. Data do not represent official information

Programs of incentives aimed at chronic care in Latin America

1. Program for conditioned transfer (Argentina)
2. Individual monetary bonds (R Dominican, Chile)
3. Collective monetary bonds (Argentina, Chile)
4. Bonds by achievement of quality goals, effective coverage
5. Trainings as award (Argentina, Chile, Colombia, Mexico)
6. Economic incentive by productivity, punctuality, and assistance (Mexico)
7. Congratulation charter (Chile)
8. Compensation on days of rest or administrative days (Chile)
9. Annotation of merit, public recognition (Chile)



Organización
Panamericana
de la Salud



Organización
Mundial de la Salud
Américas

Pasaporte para una **Vida Saludable**



PLATO DEL
BUEN COMER
INTERCAMBIO
DE ALIMENTOS

ESTILO DE VIDA

SALUDABLE

ACTIVIDAD

FISICA

CONTROL DE DIABETES

CUIDADO **DE LOS PIES**

CONTROL DE LA **PRESION**

ARTERIAL

Llevar a cada consulta



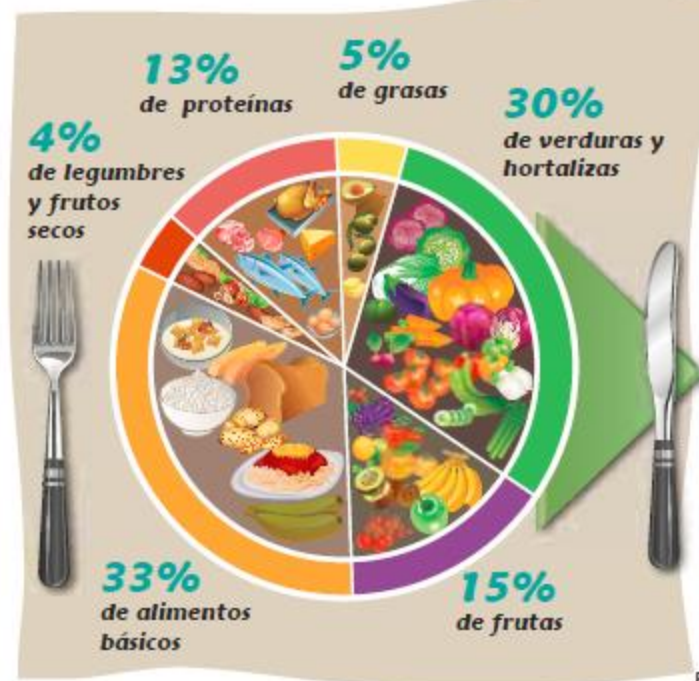
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Plato del buen comer

Para conservar la salud, es necesario bajar de peso y mantenerse en un peso adecuado. Fijese en el peso ideal para usted que figura en su Pasaporte de Cuidados Crónicos y converse con su médico sobre la forma en que puede llegar a ese peso. También es importante que deje de fumar. Si no sabe cómo, pídale ayuda a su médico.



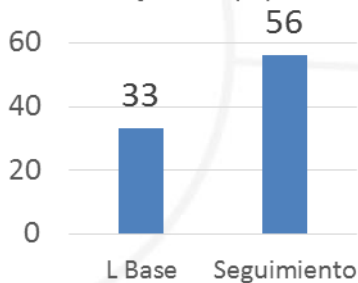
Chronic Care Passport

- Promotes patient centered care
- Implementation of preventive measures as those related to breast cancer, cancer of the cervix and prostate
- Implementation of measurement of global cardiovascular risk
- Education on healthy lifestyle
- Establishes a care plan: reminder for suppliers & patients
- Promotes patient participation on care
- Contains a meal plan with exchange list
- Strengthens medication control
- Establishes integration between different levels of care
- Contributes to data collection and monitoring of care

Result of the Project of Improvement of Quality of Care to Diabetes using the Passport of Cared for Chronic, 2012

* in percentage

Cumplimiento de 3+
Objetivos (%)



		BASILENE	FOLLOW-UP	
PATIENTS	TOTAL (N)	953	405	
ANTIGUA		30	27	
ANGUILLA		55	77	
JAMAICA		70	27	
ST LUCIA		345	274	
GENDER	FEMALE*	72.8%	80.5%	
AGE	MEAN	60.1	63.5	
	60+*	81.8%	65.1%	
A1c	MEASURED*	26.3%	53.6%	
	MEAN	8.4%	7.6%	
	<7%	32.7%	40.3%	
FASTING BLOOD	MEASURED*	65.8%	80.2%	
GLUCOSE	MEAN	153.2	143.2	
	<130 MG DL*	42.6%	41.5%	
BLOOD PRESSURE	MEASURED*	86.4%	97.0%	
	SBP (MEAN)	141.3	136.6	
	DBP (MEAN)	82.0	79.9	
BP CONTROL	<140/90 MM HG*	44.5%	49.0%	
BMI	MEASURED*	52.5%	79.0%	
	MEAN	29.6	29.8	
BMI	<25 KG M ² *	22.3%	15.9%	
CLASSIFICATION	25-29 KG M ² *	34.3%	36.9%	
	>29 KG M ² *	43.4%	47.2%	
MEAL PLAN	YES*	13.0%	52.1%	
FOOT EXAM	YES*	31.3%	68.1%	
EYE EXAM	YES*	22.6%	61.0%	
QI MEASURES	3+*	33.1%	56.5%	

Muchas Gracias

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