

PWR: Barbados	TCC PROJECT FINAL REPORT INFORME FINAL DE PROYECTO CTP	2005 No. 67	Date: Fecha: January 31,2006
Pan American Health Organization/Organización Panamericana de la Salud TCC FINAL REPORT / INFORME FINAL DE PROYECTO CTP SUMMARY SHEET / RESUMEN			
Report Date / Fecha del Reporte:			
1. GENERAL INFORMATION / INFORMACIÓN GENERAL			
Project title/ Título del proyecto:		Country Leader / País Líder:	
PORT HEALTH SURVEILLANCE SYSTEM FOR SELECTED CARIBBEAN STATES		Barbados	
Participating countries/ Países participantes		Start date / Fecha de inicio:	
Dominica, The Bahamas, Jamaica,Trinidad & Tobago, St. Lucia, St Kitts & Nevis		June 2005	
		End date / Fecha de finalización	
		Ongoing - Interim Report	
2. PROJECT BACKGROUND AND ORIGIN / ANTECEDENTES Y ORIGEN DEL PROYECTO			
a) Context/ Contexto			
<p>The continuing increase in world-wide travel has led to an increased threats and risk factors that are of public health concern. Foreign travel often gives rise to problems associated with food safety or water safety, vector borne infections and exposure to certain foreign communicable diseases and occupational hazards. To this end, Barbados, The Bahamas, Trinidad & Tobago, Saint Lucia, Dominica and St Kitts and Nevis decided to cooperate between themselves to develop competence in port health surveillance. The main areas of review include: disease surveillance at airports and seaports; control of food trade, importation of animals, plants and other biological materials; vector control management at ports to prevent transmission of diseases spread by insects and rats; human resource needs and skills required for effective surveillance at ports; occupational health risks (related to activities/exposures at ports).</p> <p>Jamaica was later for inclusion as a project country. Its inclusion comes from the fact that the Government of Jamaica has requested that PAHO/WHO, through its Country Representative, provide technical support for strengthening Port Health Surveillance in Jamaica.</p>			
b)Purpose/ Propósito			
To reduce the potential risks to the public's health posed by movement of persons and goods, and other trade activities at ports of entry.			
c) Expected results/ Resultados esperados			
<p>Assessment of port health system in project countries.</p> <p>Practical training provided on design and operation of port health surveillance systems to selected health related personnel (e.g. Environmental Health Officers, veterinarians, and nurses, medical officers of health / epidemiologists, occupational health & safety officers, and plant health officers) of project countries.</p> <p>Sharing of experience and challenges among the project countries in order to develop competence in port health surveillance.</p> <p>Partnership and network between the project countries in order to strengthen enforcement mechanisms regarding statutory control laws, thereby improving port health control and surveillance systems in the region.</p> <p>Basic policies and guidelines for port health surveillance system developed and implemented.</p>			
3. PROJECT EXECUTION / EJECUCIÓN DEL PROYECTO			
a) Achievement of the expected results / Logros de los resultados esperados			
Three quarter of the expected results are already achieved. All the other expected results are in process to be achieved. This includes adaptation of the basic policies and guidelines and their implementation in countries. To date, except Jamaica, all other project countries have already held their national consultation to adapt and adopt the basic guidelines and are in different stages of implementation.			
b) Specific products / Productos específicos			
<p>Draft Guidelines for Port Health Surveillance Systems were produced for all the participating countries, and country guidelines on port health surveillance system were also produced for Trnidad & Tobago, Barbados, Dominica, St Kitts and Nevis and Dominica, with the adoption by the TCC countries of the basic framework developed in Barbados in July 2005 and its implementation.</p> <p>Phase I of the project is completed with the adoption by the TCC countries of the basic framework developed in Barbados in July 2005. As result, phase II of the project begins with the implementation of the guidelines (referred to the implementation chart attached in the project document). Phase II includes also refinement of the guidelines through a sub-regional consultation after piloting implemenation in countries and adoption of the final guidelines by CARICOM.</p>			

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c) Additional achievements / Logros adicionales Participation from CDC/Miami Port Health and WHO/IHR experts at the sub-regional consultation in Barbados on 25-29 July 2005. These experts provided valuable advice on improving the recommendations for port health surveillance systems made by the inter-country team. Linkages were also made to the new IHR (2005) and this has given the TCC participating countries a good start for putting systems in place for the implementation of IHR(2005) within the 5-year stipulated period.			
d) Limitations / Limitaciones Project time-frame was very intense and demanding of the Inter-country Task Force Team (ICTT). Another constraint which may affect implementation is the fact that all the participating countries, except Barbados, had noted problems related to limited staff to conduct port health surveillance, and lack of proper facilities and computerized documentation systems.			
e) Total budget and amount spent / Presupuesto total y ejecutado Resourced : US\$76,699.00 Obligated : US\$ 71,501.59 Un-obligated : US\$ 5,197.41			
4. STAKEHOLDERS INVOLVED, E.G. MINISTRIES, INSTITUTES, FOUNDATIONS, NGOS / ACTORES INVOLUCRADOS, EJ: MINISTERIOS, INSTITUTOS, FUNDACIONES, ONGS.			
This TCC has been very successful to date. The level of cooperation between Team Members, the participating countries and the PAHO/PWR Offices, is commendable. The final success of this TCC will be determined by the level of implementation of the Guidelines in the participating countries. This will require support from the governments/ministries of each country and the Technical Officers in the PWR Offices to follow-up and provide encouragement.			
5. LESSONS LEARNED / LECCIONES APRENDIDAS			
The implementation of the TCC Port Health Surveillance Project has been recognized by all the stakeholders as a success which should be attributed to the following circumstances considering in this case as lessons learnt or best practices: This project was conceived, in the first place, to respond to a felt need in the sub-region especially after September 11, 2001. The demand was specifically made to CPC office by two of the project countries: St Lucia and St Kitts. St Lucia sent two letters to PAHO: one in December 2003 requesting assistance in this area and the second letter in 2004 proposing PAHO facilitation to organize a study tour of visit Barbados Port health programme. St Kitts included this activity in the BPB 2002-03, but CPC office failed to facilitate the achievement of this activity. Jamaica Government in the same period requested assistance to PAHO to provide technical support for strengthening Port Health Surveillance in Jamaica, issue arisen due to the findings that the disease agent Salmonella was associated with imported eggs, in the last two major food-borne disease outbreaks in Jamaica. The Trinidad Port Health system was so weak that everyone in this country was in agreement for a re-assessment of the Port Health protection. The technical study of the project was conducted by an inter-country team composed of national professionals of the TCC countries who had vested interest in Port Health management. The funding for the project was sourced from the TCC pool of PAHO resources using an innovative approach to TCC funding – as there was no country sole provider of knowledge but the TC was based on the sharing of knowledge between countries and sharing of expertise toward the development a common tool which, in this case, was the development of the basic guidelines for Port Health Surveillance System. Therefore, the project was funded exclusively by PAHO (with a total of US \$ 115,647.00). This has allowed the necessary flexibility to adjust project strategy when it was necessary in the mid-term of the project. The project planning and support was well orchestrated under the leadership of the CPC office and the support of the PWRs of Trinidad and The Bahamas. The embracement of the project by the PAHO SDE Advisor of Trinidad was critical in its success.			
6. CONCLUSIONS AND RECOMMENDATIONS / CONCLUSIONES Y RECOMENDACIONES			
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