

PWR: Trinidad & Tobago	TCC PROJECT FINAL REPORT INFORME FINAL DE PROYECTO CTP	No.	Date: January, 2006 Fecha:
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	
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			
<input type="checkbox"/> Assessment of port health system in project countries <input type="checkbox"/> 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. <input type="checkbox"/> Sharing of experience and challenges among the project countries in order to develop competence in port health surveillance. <input type="checkbox"/> 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. <input type="checkbox"/> Basic policies and guidelines for port health surveillance system developed.			
3. PROJECT EXECUTION / EJECUCIÓN DEL PROYECTO			
a) Achievement of the expected results / Logros de los resultados esperados			
All expected results were all achieved, however adaptation of the basic policies and guidelines have not been completed in all countries. In Trinidad and Tobago the adaptation workshop took place on 23-24 November 2005.			
b) Specific products / Productos específicos			
Draft Guidelines for Port Health Surveillance Systems were produced for the participating countries, and draft guidelines were also produced for Trinidad and Tobago based on the former.			
c) Additional achievements / Logros adicionales			
At the country guidelines development workshop in Barbados held on 25-29 July 2005, participation from CDC/Miami Port Health and WHO/IHR experts, provided valuable advice on improving port health surveillance systems guidelines. 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)			

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<p>e) Total budget and amount spent / Presupuesto total y ejecutado Resourced US\$18,245.69 Expended US\$18,054.90 Un-obligated US\$190.79</p>			
<p>4. STAKEHOLDERS INVOLVED, E.G. MINISTRIES, INSTITUTES, FOUNDATIONS, NGOS / ACTORES INVOLUCRADOS, EJ: MINISTERIOS, INSTITUTOS, FUNDACIONES, ONGS.</p>			
<p>Public Health Inspectors from the participating countries were part of the ICTT expert committee that traveled to each country to assess existing port health systems. In addition, the Trinidad and Tobago Ministry of Agriculture, Land and Marine Resources, also contributed a veterinarian with responsibility for animal quarantine, and the Bahamas representative was a physician. This additional participation provided a good balance of skills to the ICTT.</p>			
<p>5. LESSONS LEARNED / LECCIONES APRENDIDAS</p>			
<p>All the participating countries experience similar problems of lack of appropriate and limited staff to conduct port health surveillance, lack of proper facilities, and lack of computerized documentation systems.</p>			
<p>6. CONCLUSIONS AND RECOMMENDATIONS / CONCLUSIONES Y RECOMENDACIONES</p>			
<p>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.</p> <p>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.</p>			