WORKSHOP REPORT COSTA RICA 2019

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Executive summary

As a follow up to the 4th Regional Meeting of St. Jude Global – Central America and Caribbean held in Costa Rica in February 2019, a two-day workshop was held in July 2019 in San José, Costa Rica. The workshop was organized in collaboration with the Pan American Health Organization (PAHO) Regional Office with the goal to guide and facilitate the development of national pediatric cancer plans (NPCP) in Central America, Dominican Republic, Haiti, and Cuba.

Teams invited to the workshop consisted of a pediatric oncologist, a representative from their local foundation, a representative of the Ministry of Health and the local PAHO office. Other participants of the meeting were representatives from the Council of Ministries of Health of Central America and the Dominican Republic - Secretariat (SE-COMISCA), PAHO regional office, and St. Jude Children's Research Hospital. Countries represented included Guatemala, Belize, El Salvador, Honduras, Nicaragua, Costa Rica, Panama, Dominican Republic, Haiti and Cuba.

In preparation for the workshop the participants were asked to complete a situational analysis of the health systems in the context each of the building blocks for pediatric cancer. To facilitate the situational analysis a tool was developed and shared with the participants (Annex 1).

During the first day of the workshop participants were organized by country and were given time to review and fill in any gaps of the situational analysis they had prepared in advance. As part of the situational analysis the participants had to describe the current state and the goal for each of the components within the building blocks. As a second activity participants were introduced to the methodology to develop an action plan and were given time to work within their country team to create an action plan to achieve the goal for a component of one of the building blocks identified as a national priority.

On the second day the participants were organized in six mixed teams. Each team was assigned to work within a specific health system building block and identify a maximum of 5 regional initiatives. All participants voted and the two top initiatives per health system building block were selected to be presented at the annual COMISCA meeting. The selected initiatives are:

Service Delivery

- Standardized protocol for the integral management of pediatric cancer (TW, ALL, LB, Hodgkin lymphoma, Retinoblastoma and Glioma)
- Develop a regional strategy for the Early Diagnosis of Childhood Cancer

Health Workforce

- Establish a continuing education program for health personnel at all levels
- Develop a regional health staff training program: standardize the university curriculum in professional training for all health programs, include in the postgraduate curriculum the topic pediatric oncology

Health Information Systems

- Regional monitoring and evaluation system, validation of recorded data
- Develop a regional information registry with access to country information

Medicine and Technology

- Update of therapeutic guidelines to standardize patient management and have the list of medications necessary for the treatments applied in the region, based on the fees proposed as priorities by WHO
- Write a regulation defining the mechanisms to facilitate loans, donations and swaps between the parties at the regional level

Finance and Governance

- Establish a pediatric cancer and cancer policy for Central America and Dominican Republic
- Request the Ministers of Health to include the foundations they manage pediatric cancer in the mechanisms of joint purchase of COMISCA

Family and Community

- Generation of educational campaigns for early detection of intersectoral childhood cancer (Ministry of Education, Health, Foundations)
- Agreement between countries for the care of children with cancer, that lives at border points and is closer to the unity of another country.

As follow up items from the workshop, St. Jude, COMISCA and PAHO wrote a the document to be presented during COMISCA's annual meeting; each country team will continue to work on completing their situational analysis; and St. Jude will facilitate monthly WebEx working group meetings to support and facilitate the development national pediatric cancer plans in the region.

Background and Objectives

In the United States most children with cancer and life-threating diseases now survive with their diseases. Through research and treatment St. Jude Children's Research Hospital has made this possible. The outlook for children that live in low- and middle- income countries (LMICs) is far less optimistic.

The collaboration between St. Jude Children's Research Hospital and the hospitals in Central America and Caribbean started with the children's hospital in El Salvador, Hospital Benjamín Bloom in 1991. Today we have active programs with all countries in Central America, Haiti and Dominican Republic. This initial collaboration was one-on-one with each hospital, and the main task was to support resource capacity and development of treatment guidelines. Although, there was improvement in the survival rates of children with cancer this was not enough.

The prioritization of pediatric cancer and strengthening of the health system supported by local legislation is fundamental to be able to build the capacity needed to improve the continuum of care of children with cancer in LMICs. To this end we have conducted regional meetings with pediatric oncologists, representatives of the Ministry of Health, foundations and administrators of the hospitals in Central America, the Dominican Republic and Haiti since 2017. These meetings have been focused on identifying initiatives that strengthen health systems.

In May of 2018 (need to check date) St. Jude Children's Research Hospital officially launched St. Jude Global, an initiative to improve the survival rates of children with cancer around the world. In July 2018 the World Health Organization (WHO) and St. Jude Children's Research Hospital signed an agreement were St. Jude was designated as WHO first Collaborating Center for Childhood Cancer. As part of being a collaborating center, St. Jude will work together with WHO and local authorities to prioritize childhood cancer to be included in the national cancer control plans. The prioritization of pediatric cancer and strengthening of the health system supported by local legislation is fundamental to be able to build the capacity needed to improve the continuum of care of children with cancer in LMICs.

To this end we have conducted regional meetings with pediatric oncologists, representatives of the Ministry of Health, foundations and administrators of the hospitals in Central America, the Dominican Republic and Haiti since 2017. These meetings have been focused on identifying initiatives that strengthen health systems. During the meeting in February 2019 in Costa Rica all the stakeholders unanimously recognized the need and expressed their commitment to develop national pediatric cancer plans.

As a follow up in collaboration with WHO/PAHO was decided to organize a workshop to guide and facilitate the process for the development of national pediatric cancer plans.

The objectives of the workshop were:

- Provide the tools and guide the completion of the situational analysis of the health system in each country within the context of the six building blocks of the health system specifically for pediatric cancer
- 2) Provide the tools and guide the development of an action plan to be included as part of the national pediatric cancer plan
- 3) Identify regional priorities to be included in the roadmap for the approach of pediatric cancer in Central America, Haiti and Dominican Republic, and to be presented during the Council of Ministries of Health of Central America and the Dominican Republic (COMISCA) annual meeting

Agenda



CTCC, OPS, SE-COMISCA

CTCC y SE-COMISCA

Reunión PRESENCIAL de los miembros de la

15:00 - 18:00

Activities

- 1. Participants were grouped together by country and tasked to continue working on their situational analysis that had previously been sent to them for completion (Annex 1).
- 2. Participants grouped per country started working on their action plan (Annex 2) to achieve one goal set for one of the building blocks which had previously been identified as a national priority
- 3. Groups were randomly divided in 6 groups, each representing one building block and each group was tasked with identifying regional priorities within their given block. At the end all participants voted on the two top priorities to be selected at the annual COMISCA meeting.



Results

Top Regional Initiatives for Childhood Cancer

1. Service Delivery

- a. Development of standard treatment guidelines for the most common pediatric cancers nationally and regionally
- b. Support for the national and regional implementation of an early detection program (AIEPI Atención Integral de Enfermedades Prevalentes de la Infancia)

2. Health Workforce

- a. Implementation of a continuous education program for health care workers
- b. Development of a regional training program for health care workers: standardization of a university curriculum in the training of health care workers and the addition of pediatric oncology in post graduate education

3. Health Information Systems

a. Strengthen cancer registries in the SICA countries through technical cooperation, horizontal cooperation, and on-line training in basic principles of cancer registry.

4. Medicine and Technology

- a. Update therapeutic guidelines that allow standardization of management of patients and provide the needed medications listed for the treatments in the region, based on WHO priorities
- b. Promote access, availability, and provision of medications and medical devices through the Joint Negotiation Mechanism of COMISCA® for Public institutions including also foundations involved in pediatric cancer

5. Finance and Governance

a. Boost budget allocation for the sustainability of strategies for the comprehensive care of pediatric cancer

6. Family and Community

- Generate educational campaigns for early detection of pediatric cancer with intersectoral support that includes Ministry of Education, Health, Foundations, among others that are identified.
- b. Promote the creation of agreements or agreements between countries for the attention of the pediatric population with cancer, who live at border points.

Conclusions

The Regional initiative for Childhood Cancer was presented December 10th, 2019 in San Salvador at the LI COMISCA meeting and was unanimously approved by the authorities. Next step is to form working groups for the initiatives as the individual countries continue to work on their national cancer control plans. Aim is that every country in Central America (Guatemala, Honduras, El Salvador, Nicaragua, Costa Rica, Panama) and Dominican Republic and Haiti, will have their National Pediatric Cancer Plan by the end of 2020.



Annexes

- Situational Analysis Excel (general SWOT and situation of each of the building blocks)
- 2. Action Plan (per building bock)
- 3. List of participants
- 4. Presentations
- 5. COMISCA report

St. Jude Covered the airfare for the Pediatric Oncologist, Representative of the foundation and Ministry of Health. Total \$19,122