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Institution Name	Pontificia Universidad Católica de Chile		
Name of Department, unit, section or area of the institution designated as WHO.CC	Escuela de Enfermería Pontificia Universidad Católica de Chile		
City	Santiago		
Country	CHILE	Country ID	CHI-19
Title	WHO Collaborating Centre for Primary Health Care		
Report Year	04/2009 to 04/2010		

I. Implementation of the work plan.

TOR 1: To develop innovative programs that improve care for patients with diabetes and other chronic conditions around Latin America

Activity 1.1: Incorporation of a telecare component in cardiovascular health care programs for patients with type 2 diabetes.

1.1.1 Technology transfer of ATAS UC, a tele-self-management support model. (Apoyo Tecnológico para el automanejo de condiciones crónicas en salud/ATAS UC)

- a) In the the public sector. Primary Care Centers of the Commune of Puente Alto are in the process of implementing this model for a selected group of patients with type two diabetes enrolled in the national cardiovascular health care program. (financed by the Ministry of Health and the Corporación Municipal de Educación, Salud y Atención de Menores de Puente Alto) . The technology transfer process included an intensive training program with individualized follow up, for primary care professionals committed to provide self management support to patients with diabetes and other cardiovascular health problems. 27 health professionals (nurses, nutritionists and psychologists) 5 primary care centers who are committed to incorporate tele/ selfmanagement support into their clinical role. Puente Alto is the first commune which has started to restructure health care delivery in order to incorporate remote self-mangement support as a component of chronic care. Presently the Family Health Care Center "Bernardo Leighton" has taken the lead to become a demonstration site for other communes.

Explanation: At the family health care center Bernardo Leighton each of the trained health professionals has selected 10 patients with diabetes who receive a combination of face to face and remote health care.

- b) In the Ambulatory Care Network at Pontificia Universidad Católica.(UC)

This process had three phases:

- Phase 1: Formation of an interdisciplinary team which had the responsibility to design a Comprehensive Chronic Disease Management Model for clients with type 2 diabetes and/or hypertension attended in one of the primary care centers of the Ambulatory Care Network of UC.
- Phase 2: A tele-selfmanagement support training program based on motivational interviewing, decision support and behavioral change theories for 10 health professionals of the Ambulatory Care Network UC.

- Phase 3 Demonstration of the “Software de Información, Gestión y Seguimiento para el Autocuidado Crónico/SIGSAC” (Software for Information, Management and Follow Up of Chronic Selfcare). This software is based on 3 years of nursing experience, providing self-management support to 2000 patients with type 2 diabetes of the commune of Puente Alto. It was developed with funds from the National Science Fund (FONDEF) for communes without electronic medical records which are interested in incorporating remote self-management support as part of their health care delivery system for patients with type 2 diabetes and other cardiovascular conditions.

Explanation: The implementation of this model is in process at the Centro Médico San Joaquín, which is the largest ambulatory care center of the Ambulatory Care Network UC.

- 1.1.2** Project: “Familiares Cuidadores, Funcionarios UC” (UC workers and family caregivers). This is a collaborative project between our Collaborating Center and Human Resource Department of the Pontificia Universidad Católica. The purpose is to provide effective support to administrative staff who have the double role of working in the university and being care givers of family members with disabling chronic disease.

Explanation: This pilot project was very well evaluated in January 2010 by participants and university authorities and has financial support to continue during 2010.

- 1.1.3** Presentation to the International Diabetes Federation (BRIDGES projects) of a full proposal “A primary health center-based self-management support program with a self monitoring station, for low income, insulin treated, type II diabetic patients”.

Explanation: after our pre proposal was selected, we send a full proposal in July 2009, which was not approved. This proposal was prepared in conjunction with Dr. Elizabeth Madigan from the WHO Collaborating Center at Case Western Reserve University, and Dr. John Piette, director of the Quality Improvement for Complex Chronic Condition Program, at University of Michigan. IN spite of the lack of financial support a self-monitoring station is being implemented with local funds at the primary care center Juan Pablo II by one of our coauthors of this project.

- 1.1.4** Participation in an advisory group to the Ministry of Health in the “Redesign of the Cardiovascular Health Care Program” to emphasize the social determinants to improve health equity.

Explanation: This advisory group worked between January 2009-November 2009.

- 1.1.5** Collaboration with the Health Authorities of the Commune of Puente Alto to participate in a contest to improve equity in cardiovascular health programs, organized by the Division of Prevention and Control of Non Communicable Diseases of the Ministry of Health. (“Concurso Cardiovascular para Todos”)

Explanation: The tele-selfmanagement support experience developed at the commune of Puente Alto was preselected as winners but the authorities of the health area of Puente Alto did not send a final proposal to compete in the last stage of the process.

- 1.1.6** Members of the organizing committee and presenter of a chapter of the WHO book “PHC Now more than ever” as part of the activities of the PHC observatory.

- 1.1.7** National Seminar “Chronic Disease Prevention and Management” co-organized with Case Western Reserve University, WHO Collaborating Center for Research and Clinical Training in Home Care Nursing. (October 2009)

Explanation: all participants in this seminar had contacted our Collaborating Center previously due to their interest in implementing telecare as part of their health care model. (12 different institutions)

1.1.8 Tele-support for chronic disease Management in the commune of Puente Alto: A 5 year experience "Apoyo al Automanejo de Enfermedades Cardiovasculares: 5 Años de Colaboración"
Explanation: This experience was presented to health decision and policy makers.

1.1.9 Presentation of the project "La telefonía móvil: una herramienta para al diagnóstico oportuno y apoyo al autocuidado de personas con diabetes tipo 2" (mobile phone: a tool for timely diagnosis and selfcare support for people with type 2 diabetes) to the Mobile Citizen program of the Interamerican Development Bank.(IDB)

Explanation: This was a contest to select problems rather than solutions. The problem that we presented was that only a low percentage of patients who receive a high blood sugar test result go through the process of confirming whether they have diabetes, within the time frame guaranteed by the Ministry of Health. This problem was selected among 120 proposals (only 4 problems were selected) and presently we are finishing the negotiation process with IDB to obtain the needed funds for to implement the solution.
<http://www.mobilecitizen.bidinnovacion.org/es/winners.html>

1.1.10 Presentation of a pre-proposal to FONIS, the National Contest of Projects for Health Research and Development (Concurso Nacional de Proyectos de Investigación y Desarrollo en Salud" FONIS/CONICYT) "Modelo de Atención Remota de Apoyo a las Personas con Pre-diabetes" (A remote selfmanagement support model for people with pre-diabetes).

Explanation: In June it will be known which projects are preselected. The authors of the preselected projects will be invited to prepare a final proposal and the winners will be announced in September 2010.

Activity 1.2: Implementation of tele- selfmanagement support for patients with type 2 diabetes and other chronic diseases in Latin America

1.2.1 Web page for the "Red Latino Americana de Investigación e Innovaciones para el Autocuidado de Personas con Condiciones Crónicas de Salud y sus Familiares Cuidadores (RIA)
<http://www.riauc.cl> (Latin American Network for Research and Innovations for Chronic Disease Management)

Explanation: the purpose of this network is to improve self-management support which is provided by health services to people with chronic conditions.

1.2.2 The RIA network was established after obtaining evidence of its need which appears in the following publication:

Sapag,J., Lange,I., Campos,S., Piette,J. (2010) Innovaciones para el Cuidado y Autocuidado de Personas con Enfermedades Crónicas en América Latina. Rev. Panam. Salud Pública 27(1):1-9

1.2.3 Web page for the WHO/ PAHO Collaborating Center in PHC, School of Nursing UC.
<http://www.aps-omsuc.cl>

1.2.4 Master of Nursing Science thesis: (Claudia Bustamante) Validation, in Spanish language, of an instrument to evaluate health decision support for patients with chronic diseases.

- 1.2.5** Participation with PAHO/ Chilean Ministry of Health / INTA project "Evaluation of the efficacy of an e learning program for people with type 2 diabetes".
Explanation: 31 employees, family members, graduates and retired personnel from Pontificia Universidad Católica de Chile, with type 2 diabetes, participated in this project: 20 were in the intervention group (e-learning) and 11 in the control group (face to face teaching)
- 1.2.6** Application to the World Fair for South South Cooperation, 2009 "Feria Mundial Sobre Cooperación Sur-Sur" 2009. (WHO/PAHO/United Nations).
Explanation: Our team never received from PAHO confirmation of the reception of our application nor of the results of the contest, in spite of our frequent email requests.
- 1.2.7** Presentation of the Poster "Desarrollo de un Modelo de Apoyo Tecnológico para el Automanejo de Condiciones Crónicas de Salud (ATAS UC), Prototipo: Diabetes Tipo 2" (Development of a technological support model for chronic disease management: Prototype: Diabetes Mellitus type 2) at the CARMEN meeting organized by PAHO in October 2009, in Lima, Perú.
Explanation: Our collaborating center did not receive an invitation to participate in this meeting, however we send a poster with Dr. María Cristina Escobar, Head of Non Communicable Diseases at the Chilean Ministry of Health, to disseminate our work.
- 1.2.8** Collaborative Research "Soporte Social con Tecnología de Punta para Cuidadores Familiares de Personas con Enfermedad Crónica en Latinoamérica". (social support for family care givers of persons with chronic diseases in Latin America, using information technology). This project, lead by the research group CUIDADO AL PACIENTE CRÓNICO, Facultad de Enfermería, Universidad Nacional de Colombia has finalized.
Explanation: a research paper of the Chilean experience is in progress and a network meeting is planned for June 2010 in Bogotá Colombia where members from our collaborating center are invited as presenters.
- 1.2.9** Our experience in telecare will be published soon in the Revista Médica de Chile. Lange, I., Campos, S., Urrutia, M., Bustamante, C., Alcayaga, C., Tellez, A., Pérez, C., Villaroel, L., Chamorro, G., O'Connor, A., Piette, J. Efecto de un Modelo de Tele-cuidado como Componente de un Programa de Salud Cardiovascular, en el Auto-manejo de la Diabetes tipo 2, en un Centro de Atención Primaria.

TOR 2: To develop research based interventions to enhance community knowledge and preventive HIV/AIDS behaviors.

Activity 2.1: Establish *Mano a Mano* as an HIV/AIDS training program for professionals from the health and education sector, as well as a continuing education program for undergraduate and graduate students.

- 2.1.1 A training program on HIV prevention (*Mano a Mano*)** for health care workers in primary health care settings was implemented in Puente Alto. This is the largest neighborhood in the Metropolitan area of Santiago. The training was registered as a course for continuum education through the Ministry of Education. This registration allows any health care professional to be formally trained in the topic.

2.1.2 *Mano a Mano* for health care workers in primary health care settings was adapted and offered to health care workers and care givers at “Hogar Santa Clara”. This Institution receives children living with HIV or AIDS.

2.1.3 Publications:

Ferrer, L., Miner, S., Irrarrázabal, L., Lara, L., Bernales, M., Barrales, C. (2010). Cuidadores de Niños viviendo con VIH, sus conocimientos y autoeficacia. *Horizonte de Enfermería*, 20(2), 25-33.

Ferrer, L., Cianelli, R., Norr, K., Cabieses, B. 1, Araya, A., Irrarrázabal, L. & Bernales, M. (2009). Observed Use of Standard Precautions in Chilean Community Clinics. *Public Health Nursing*, 26(5), 440-448.

Three manuscripts were prepared with data from experiences with health care workers “Mobilizing Health Workers for Community HIV prevention in Chile”(R03TW006980). One was sent to the Panamerican Journal of Public Health, one to Revista Investigación y Educación en Enfermería and the other one to Revista Médica de Chile.

2.1.4 The *Mano a Mano* website (www.manoamano.cl) is now part of the WHO Collaborating Center.

Activity 2.2: Establish *Mano a Mano* as an HIV/AIDS prevention program tailored to Chilean men and women, with specific consideration of Hispanic cultural beliefs and values, so it become available as a starting point for other Latin American Countries or people working with the Hispanic communities in the United States.

2.2.1 As part of the NIH funded project “**Bringing Men into HIV Prevention in Chile**” (RO1TW007674) we have completed a database with 623 men from socioeconomically disadvantaged communities. Three hundred and thirty-seven of them were part of the intervention group and the rest belonged to the control group. The experience with this group is evidence proving that *Mano a Mano* was effective in changing knowledge, behaviors, and attitudes towards HIV prevention.

2.2.2 A **manuscript for publication** is being prepared with data from the NIH funded project “Testing an HIV/AIDS Prevention program for Chilean women” (RO1TW006977).

2.2.3 Publications:

Miner, S., Ferrer, L., Cianelli, R., Bernales, M., & Cabieses, B.(2010) Intimate partner violence and HIV risk behaviors among socially disadvantaged Chilean Women, *Violence Against women (in press)*

2.2.4 A new proposal was successfully submitted to intramural funding to work in piloting an intervention with both men and women together.

2.2.5 A supplementary fund was request to work with a Mapuche community in Santiago. The intervention on HIV prevention was adapted and given to a group of indigenous people, both men and women.



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- 2.2.6** A manuscript from a thesis related to “Intimate partner violence and HIV risk behaviors among socially disadvantaged Chilean Women” was made and published in the Journal Violence Against Women. Another thesis on HIV prevention and drug use in women is being prepared for publication and a third thesis is being developed in 2009-2010.
- 2.2.7** Presentations at international conferences for dissemination of this initiative, inside and outside the country, are listed in the following table:

X Coloquio Panamericano de investigación en Enfermería, Panamá				
GRIP Mujeres RO1TW006977	Cianelli, R., Ferrer, L., Villegas, N., Miner, S., Irrarrazabal L.	Educación en enfermería: Conocimientos de VIH en mujeres con desventaja social	2009	Oral presentation
FIRCA RO3TW006980	Ferrer, Molina, Lara, Cianelli, Irrarrazabal & Norr	De una intervención en prevención de VIH y SIDA en trabajadores de la salud	2009	Oral presentation
16th International conference of the Nursing Network on violence against Women International, USA				
GRIP Mujeres RO1TW006977	Cianelli, R., Miner, S., Ferrer, L., Irrarrazabal, L., Villegas, N	Partner Violence and Gender Roles among Low Income Chilean Women	2009	Oral presentation
Congreso Municipal de atención primaria de Concepción, Chile				
GRIP Mujeres RO1TW006977/ GRIP hombresRO1TW007 674	Molina, Y., Miner, S., Lara, L., Irrarrazabal, L.,Ferrer, L. & Sanhueza, S.	Violencia en la pareja: diferencia entre sexos	2009	Poster presentation
GRIP hombresRO1TW007 674	Lara, L., Molina, Y., Sapag, J., Irrarrazabal, L., & Ferrer, L.	Capital social en hombres en situación de vulnerabilidad social	2009	Poster presentation
GRIP Mujeres RO1TW006977	Irrarrazabal, L., Cianelli, R. &Ferrer, L. Molina, Y., Miner, S.	Vulnerabilidad para la adquisición de VIH en mujeres que consumen sustancias	2009	Poster presentation
20th International Nursing Research Congress Focusing on Evidence Based Practice, Canada				
GRIP Mujeres RO1TW006977	Miner, S., Ferrer, S., Cianelli,R., & Villegas, N.	Increasing HIV/AIDS Knowledge among Chilean Women: An example of an effective, culturally-adapted, nursing intervention		Oral presentation

Activity 2.3: Establish *Mano a Mano* at the School of Nursing, PUC, as an HIV/AIDS research center open to students/professionals from countries in America, giving priority to undergraduate /graduate students and professionals from Latin American countries.

- 2.3.1** Ten **international undergraduate students**, from different Universities in the United States, worked on the projects as part of their research internship. All of them spent at least 30 hours participating in research related activities, particularly data collection and delivery of the intervention.
- 2.3.2 Undergraduate students from PUC**, School of Nursing, have worked in elaborating systematic literature reviews in topics related with HIV prevention or health care workers and HIV. Two of them are listed under publications. The other one is related to Attitudes from pregnant women in relation with HIV universal testing during pregnancy.
- 2.3.3** Two **graduate students** from the United States and México have spent 4 months working on the projects.
- 2.3.4 Publications:**
Bravo, V., Valdebenito, F., Cianelli, R. & Ferrer, L. (2009). Terapias Alternativas y complementarias en VIH/SIDA. *Ciencia y Enfermería*, 15(2).

Ruiz, C., Torres, V., Cianelli, R. & Ferrer, L. (2009). Método de Prevención en VIH/SIDA controlado por Mujeres. *Ciencia y Enfermería*, 15(2).
- 2.3.5** During 2009-2010, 3 **theses** associated with HIV topics and data from our projects are being prepared. They are specifically related to: HIV and women, standard precautions, and health care workers training.
- 2.3.6** As part of the contribution to HIV prevention in our country, a research proposal was developed and funded with intramural funds to evaluate a rapid HIV test. This technology has never been used in Chile before, and the evidence internationally has shown to be a good prevention strategy for HIV.
- 2.3.7** The third "**International Seminar on Self care**" is being organized with emphasis in interdisciplinary innovations on HIV and AIDS (III Encuentro Internacional de Autocuidado y Promoción de la Salud: Innovaciones Interdisciplinarias en VIH y SIDA). This Conference will bring together people from different areas and countries in order to analyze the work done in relation with prevention and treatment of the disease. (December 2010)

II Other information related to the Collaboration between the centre and WHO.

- Ilta Lange and Monica Muñoz acted as PAHO Consultants at the Universidad del Norte de Santo Tomas de Aquino (UNSTA) in Tucuman, Argentina, to provide institutional support in the implementation of a strategic plan to become a Health Promoting University. (May 26-30th 2009). Recently a book was published UNSTA Saludable "Estilos de Vida y Conocimientos Acerca de la Salud de los Estudiantes Universitarios".

- Meetings with Dr. Ruben Torres, PAHO Chile Representative, July 23rd 2009
- Participation of Dr. Rubén Torres, PAHO, Chile Representative in activities described in the items: 1.1.2; 1.1.7; 1.1.8 (above).
- Participation of Dr. Jacques Girard, Consultant for Health Services at PAHO, Chile, in activities described in the items: 1.1.2; 1.1.6 (above).
- Interviews with: Dr James Hospedales, Dr. Alberto Barceló, Dr. Hernan Montenegro, Dr. Juan Manuel Sotelo, Dr. Silvina Malvares, Washington DC, September 24th 2009.
- Attendance as observer at the PAHO's 49th Directing Council September 28th, 2009, Washington D.C.

III Collaboration with other WHO Collaborating Centres

- Participation in the Panamerican Nursing and Midwifery Collaborating Center Network Meeting. Washington DC, September 29th, 2009
- National Seminar "Chronic Disease Prevention and Management" co-organized with Case Western Reserve University WHO Collaborating Center for Research and Clinical Training in Home Care Nursing. (October 2009). Three faculty from Case Western Reserve University consulted with different teams at the school of nursing in the areas of : home care, chronic disease management, elderly care and cardiovascular health. (Dr. Elizabeth Madigan, Dr. Shirley Moore and Dr Diane Morris)
- The third "International Seminar on Self care and Health Promotion: interdisciplinary innovations on HIV and AIDS (III Encuentro Internacional de Autocuidado y Promoción de la Salud: Innovaciones Interdisciplinarias en VIH y SIDA) is being co-coordinated with the WHO collaborating Center at the School of Nursing and Health Allies, University of Miami to take place in December 2010.

IV Comments and Suggestions

Comments: Our Collaborating Center TORS are related with different departments of PAHO:

Human Resources, Non Communicable Diseases and HIV/AIDS: Both TORS have a strong component of Human Resource Development (Dr. Hernán Montenegro) specially training of nurses.(Dr. Silvina Malvares)

TOR 1 focuses on chronic disease management, specially on cardiovascular disease and risk factors ("To develop innovative programs that improve care for patients with diabetes and other chronic conditions around Latin America") which is of interest to the PAHO team lead by Dr. James Hospedales

TOR 2 focuses on HIV and AIDS prevention. ("To develop research based interventions to enhance community knowledge and preventive HIV/AIDS behaviors".)

The fact that our TORS are not aligned with **ONE** of the units of PAHO has limited the information and opportunities that PAHO provides to the collaborating centers, because nobody is actively following our work, providing feedback or feeling really responsible for the work that our collaborating center is doing in the attainment of TOR 1 and 2.

Suggestion: It would be very helpful to have Dr. James Hospedales as our counterpart at PAHO for TOR 1 and have a counterpart from the HIV and AIDS Unit of PAHO for TOR 2 in charge of Dr. Lilian Ferrer.

As we consider that our Collaborating Center has contributed to all mentioned PAHO units, we will be sending a copy of this report to Dr. Hernán Montenegro, with copies to Dr. Silvina Malvares, Dr, James Hospedales and to the HIV /AIDS unit.

Thank you.



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May 19, 2010