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Institution Name Pontificia Universidad Católica de Chile

Name of the relevant department, unit, section or area of the institution

Escuela de Enfermería Pontificia Universidad Católica de Chile

City Santiago

Country CHILE

Reference Number CHI-19

Title WHO Collaborating Centre for Primary Health Care

Report Year 04/2010 to 04/2011

1. Implementation of the work plan. For each main activity briefly explain how the activity was implemented, the outcome and impact and, if available, the results of the evaluation (e.g. evaluation of a course by the participants). Also explain difficulties (if any). Do not provide technical results in this form (technical results, if applicable, are to be sent directly to the WHO Department you work with).

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

Explanation

Activity 1.1 Innovations in health care (www.atasuc.cl)

1.1.1. Projects

a) "Mobile telephony: a tool for early diagnosis and self-care support for people with type 2 diabetes" (COSMOS PROJECT) September 2010- November 2011.

Place: Public Primary Care Centers in the commune of Puente Alto.

The purpose of this project is to develop and evaluate a "mobile phone-based communication and monitoring system" (COSMOS) which combines automated text messaging and voice, with personalized assistance via telephone (using the principles of Motivational Interviewing), to contribute to the activation of suspected DM2 patients and guarantee timely diagnostic confirmation, and early treatment. (according to the explicit guarantees stated in the AUGE Plan).

This project has financial support from the International Development Bank. (ATN/IP-11600-RG) . This is a feasibility study which incorporates, as part of the cardiovascular care program, a mobile telephone model which includes: tele counseling sessions (by trained nurses and nutritionists) , automated voice and text messages. This project is a continuation of our 5 year nurse managed tele support projects (MATS and ATAS UC projects 2005-2010), which were successful but difficult to disseminate due to the deficit and high cost of trained nurses in telecare, behavioral change and selfcare support theories. The COSMOS model (Modelo de Comunicación y Seguimiento Móvil en Salud) intends to facilitate the early diagnosis of DM2 in patients with high blood glucose levels who attend two primary care clinics in the commune of Puente Alto. To try out this model, 80 patients with suspicion of type 2 diabetes will be recruited and followed up until the final diagnosis is confirmed. During the pre-confirmation phase , all patients receive tele counseling sessions, text messages and automated calls. Those patients who have DM2 confirmed, will continue receiving tele self management support through tele counseling sessions, text messages and automated calls for the following three months plus a guide which provides additional information and motivation to improve eating habits , physical activity and adherence to medication.

Explanation: In Chile there is an explicit guarantee for patients with suspicion of type 2 diabetes that their final diagnosis has to be confirmed within 45 days. In the commune where we work (Puente Alto) approximately 40% of these patients do not come to the health center to confirm their final diagnosis, and around 15 % of those who are diagnosed with type 2 diabetes do not start their treatment. At present we have 17 patient recruited with suspicion of type 2 diabetes: 15 were confirmed with pre diabetes and 2 with type 2 diabetes. Considering that this project focuses on the pre confirmation phase, it gives us the opportunity to work during 45 days with patients with pre diabetes as well as those who already have diabetes. In Chile, until now, patients with pre diabetes are not aware that this is an important health risk factor which is reversible. This project will have and historical control group (patients attended in the two participating health care centers a year before our recruitment phase started) P.I.: Ilta Lange ilange@uc.cl

b) "A Remote care model for people with pre- diabetes". (January 2011-May 2012).

Place: Public Primary Care Centers in the commune of La Florida .

This project is a randomized control trial, which has funding from National Health Research and Development Fund (FONIS) .Its purpose is to evaluate the effects of a multi-component- remote health care model for overweight or obese people with pre-diabetes, on their knowledge regarding pre-diabetes , their self-care practices and the clinical and anthropometric parameters.

Explanation: patients diagnosed in the last two months with pre diabetes will be recruited as the intervention group from 4 health centers of the commune of La Florida and will be compared with patients of other health centers of the same commune. All patients in the intervention group will receive tele counseling sessions and text messages as well as a friendly guide to teach them about pre diabetes and motivate them to improve their eating habits and incorporate programmed physical activity as part of their daily activities. Every patient (intervention group as well as the control group) will be receiving a pedometer and a meter to measure their waist. (P.I.: Carola Perez jcperez1@uc.cl

c) "Prevention of overweight and obesity in Chilean schoolchildren: A bet on the enterprising capacity of children". (December 2010-May 2012) Place: Public schools in the commune of La Pintana.

This project, funded by the National Health Research and Development Fund (FONIS), is a prospective quasi-experimental design, with non equivalent control group. (developed in school of the commune of la Pintana) It aims to empower students of 5 th and 6 th grade to take on the challenge of modifying their eating behaviors, towards a better nutritional status. To achieve this, schools will have access to a web based software which was specially prepared for this purpose and which will contribute to improve in children their self esteem , motivation and communication skills. The expected result is a positive change in self-care behaviors related to food, influencing as well, the children's families.

Explanation : The MeKuido software will be used in class, by students individually for 15 weeks during one hour with support of a school teacher. There will also be 5 group sessions in the use of this software. Through the use of the software the students will have the opportunity to understand and evaluate their eating habits and work together to create plans to improve their eating behaviors. (P.I. Cecilia Campos ccampos@uc.cl)

1.1.2 Presentations, consultations and publications

a) "The experience of providing self-management support through telephone counseling to patients with type 2 diabetes: An operational framework" presented at the 4th Latin-American Network Meeting on Chronic Care for Patients and Family Care Givers. June 16th and 17th, Bogotá, Colombia . Claudia Alcayaga. (caalcaya@uc.cl)

b) " The experience of providing self-management support through telephone counseling to patients with type 2 diabetes: A Strategic Framework" was presented at the 4th Latin-American Network Meeting on Chronic Care for Patients and Family Care Givers. June 16th and 17th, Bogotá, Colombia . Solange Campos (scamposr@uc.cl)

c) "Telecare for behavioral change of patients with type 2 diabetes attended in public primary care centers in a low income commune of Santiago, Chile" presented at the ICTD conference and workshop on mobile health and behavioral change held on 16 and 17 December 2010, respectively in London, United Kingdom, at Royal Holloway, University of London and the London School of Hygiene and Tropical Medicine. Invitation from Microsoft Research and the Earth Institute at Columbia University. A result of this meeting is the preparation of a book on use of mobiles for behavioral change that will be made accessible worldwide, and thus, available to a broad community of interested researchers and practitioners. Ilta Lange ilange@uc.cl

d) "The Mobile Citizen's COSMOS Project "A tool for the early diagnosis and selfcare support for people with type 2 diabetes in Chile" was presented at the First Symposium on "mHealth Strategy for Latin America" organized by the Inter- American Development Bank and the Andean Global Health Informatics Research and Training Center (QUIPU) in Lima, Perú. (25-27 of March 2011) Ilta Lange (ilange@uc.cl)

e) Consultation: "Incorporation of the chronic care model with a telecare component for patients who attend the diabetes, hypertension and arthritis clinics." Place: Ambulatory Health Care Center Network at Pontificia Universidad Católica de Chile. Ilta Lange ilange@uc.cl; Claudia Alcayaga caalcaya@uc.cl (March-April 2011)

f) Publication

Lange, I.; Campos, S., Urrutia, M. et al (2010) Efecto de un modelo de apoyo telefónico en el auto-manejo y control metabólico de la Diabetes tipo 2, en un Centro de Atención Primaria, Santiago, Chile
Revista Médica de Chile 138: 729-737

Activity 1.2 Establish systematic networking activities with Latin American partners who are interested in improving chronic disease management through incorporating telecare, peer support and informal care giver training as components of the traditional chronic care model.

1.2.1. Creation and maintenance of web sites which facilitate networking activities with Latin American partners.

- ? Collaborating Centre's website (www.aps-omsuc.cl) also relates to the sites:
- ? Community service innovations (www.familiarescuidadoresuc.cl)
- ? Innovations in health care (www.atasuc.cl)
- ? Research and innovation network for the self -management of chronic health conditions (www.riauc.cl)

Along with the creation of all web sites mentioned, in 2010 moved the site www.manoamano.cl towards the WHO Collaborating Center. This website covers the activities of TOR HIV-AIDS.

The news of the launch of this virtual platform, spread across the University and the Chilean Journal of Nursing UC (<http://www.uc.cl/enfermeria/html/boletines/boletin20.html>). The University also provides equipment, a system for sending mass e-mails, allowing sites to present each of the members of RIA.

The maintenance of each site is part of the work of the Collaborating Centre. The update task is possible because a portion of each site was developed with the operating system Prontus. This allows us to upload the information without informatic support. Each website has a register of its respective domain and is on a server in the Informatics Department of our University.

One of the most important activities of RIA in July 2010, was the participation from the team at the VIII Conference Global Network of WHO Collaborating Centres (WHOCs) for Nursing & Midwifery, "Research network and innovations for self-management of Chronic Illness, presenting the poster: "Research and Innovation Network for self-management of Chronic health conditions" .

1.2.2. Community service innovations (www.familiarescuidadoresuc.cl)

a) Family Care Giver Program for employees at Pontificia Universidad Católica de Chile who are informal care givers of family members with chronic illnesses. This project is one component of the Health promoting University Program that has been implemented at our university since 2001. Its framework is the provision of a healthy, humane and respectful environment to work and study. Its purpose is to provide support to employees who are workers and family care givers to contribute to the reduction of stress, depression, hypertension and other health problems related to burnout.

Explanation: during 2010 we provided a comprehensive program to a second cohort of employees who are family care givers with the peer support of the first cohort. This is a program that has financial support from the Human Resource Department of our University and the technical support from our WHO/PAHO Collaborating Center for PHC. The face to face activities of the program take place during 3 weekly protected working hours and continuity of peer support as well as nursing advice is provided through a web page and emails with participants. This program is highly valued by the family care givers as well as by the university authorities.

b) Participation at the 4th Latin-American Network Meeting on Chronic Care for Patients and Family Care Givers. Universidad Nacional de Colombia, June 16th and 17th , 2010

<http://www.gcronico.unal.edu.co/objetivos.php> Presentation: "The experience of employees and family care givers at Pontificia Universidad Católica de Chile" Claudia Alcayaga caalcaya@uc.cl

c) Participation in the project "Use of information and communication technology to provide social support to family care givers of persons with chronic health conditions. Univ. Nacional de Colombia, Bogotá. A research paper is in progress where the experience is discussed of providing continuous and comprehensive support to family care givers who are workers at Pontificia Universidad Católica de Chile.

1.2.3. Innovations in health care www.atasuc.cl . The information was included in point 1.1

1.2.4 "Research Network and innovations for Self-management of Chronic Illnesses" (Red de Investigación e Innovación para Autocuidado de Personas con Condiciones Crónicas de salud y sus Familiares Cuidadores (www.riauc.cl))

a) One of the most relevant activities of the "Research network and innovations for self-management of chronic illnesses" (RIA) was its participation in the VIII Global Network Conference of WHO Collaborating Centres for Nursing & Midwifery, with its poster presentation "Research and Innovation Network for self-management of chronic health conditions" Bustamante, C (cqbustam@uc.cl) .; Alcayaga, C., Campos, S., Marquez, F., Urrutia, M., Lange, I. WHO/ PAHO Collaborating Centre in Primary Health Care, School of Nursing, Pontificia Universidad Católica de Chile

Activity 2 Implementation in Latin America

Explanation

2.1. Lessons learned through the work with Dr. John Piette, Director of the Program "Quality Improvement for Complex Chronic Conditions" at the University of Michigan, were very useful to be able to incorporate automated calls in the project "Mobile telephony: a tool for early diagnosis and self-care support for people with type 2 diabetes" described in 1.1.

2. Other information related to the Collaboration between the centre and WHO. Briefly describe visits by WHO staff to the centre, visits by the centre staff to WHO (HQ and/or Regional Office), use of the centre staff by WHO, support provided by centre staff for courses cosponsored or organized by WHO (HQ and/or Regional Office), WHO financial support to the centre through contractual or Technical Services Agreement or other type of support provided by WHO, any other collaborative activities. Please mention any difficulties encountered in the collaboration and suggestions for increased and improved collaboration with WHO.

this is our TOR 2 :

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

In the past year, Mano a Mano has continued its research based HIV prevention initiative; It has finalized two research projects and applied to other grants in Chile and the US. The results of the work done by this team have been published in two original research articles in addition to three literature reviews. The final intervention sessions of the project entitled HIV and AIDS Prevention Intervention among Socially Disadvantaged Chilean Men and Women, funded by DIEE 2008, were completed in 2010, and the results are currently being analyzed and have received students from Chile and the US in research practicums. The project, Evaluation for the Rapid HIV test in Oral Secretion, funded by Pontificia Universidad Católica through its Interdisciplinary RFA, was finalized at the end of 2010 and its results are now used to negotiate incorporating this technique in community clinics. In addition, the final results of the studies Future Health Professionals: Strengthening their Knowledge, Attitudes and Behaviors facing HIV/AIDS, and Bringing Men into HIV Prevention in Chile have been written and will soon be submitted for publication at the PAHO journal, in order to have them available for the Pan American Region. Finally, Proyecto Mano a Mano recently won a new Interdisciplinary award from Pontificia Universidad Católica, to begin a qualitative research project called The needs of children living with HIV or AIDS and their families, from the caregivers' perspective, which will commence in mid 2011.

All the work done by this team is done towards providing information and innovation in working with HIV primary and secondary prevention in Chile, with strategies that are sustainable and built with participatory and research based approaches.

Our Collaborating Center has maintained strong linkages with the Chile PAHO office, through the PAHO representative, Dr. Ruben Torres, as well as through the consultant Dr. Jacques Girard and Dr. Roberto Del Aguila. We have received permanent advice and technical support whenever we have needed it.

We have meetings every two or three months with PAHO authorities to keep them informed about our collaborating center activities. They have participated in all the inaugurations of our projects and programs and sponsored the III International Conference on Selfcare and Health Promotion: Interdisciplinary Innovations in HIV/AIDS . This conference was co organized between the School of Nursing WHO/PAHO Collaborating Center Mano a Mano Project with the University of Miami. Place: Santiago, Chile. 2-3 of December 2010.

We have had communication problems with the Department of Non Communicable Diseases at PAHO Washington. During 2009, a decision was made that our Collaborating Center should be changed from Dr. Hernán Montenegro to Dr. James Hospedales, as our focus was really non communicable diseases. However, when we received this evaluation form from WHO, we realized that our Collaborating Center is still for PHC and dependent from Dr. Hernan Montenegro. This lack of clarity has been very confusing to us although it has not interfered with our productivity.

The second difficulty that we have had with our TORS, is that TOR 2, which is HIV /AIDS prevention is of no interest either to Dr. Montenegro nor to Dr. Hospedales and that there has been no facilitation from PAHO Washington to connect with Dr. Lilian Ferrer, who is in charge of that TOR with the authorities of the HIV/AIDS Department. We are including again information of TOR 2 , which does not appear in the evaluation sent by WHO although it is recognized as part of our Collaborating Center responsibility.

I would highly appreciate, however, to receive an official information, as soon as possible, if we will maintain our status as Collaborating Center for PHC or if it will be changed to Prevention and Control of Non Communicable Diseases.

3. Collaboration with other WHO Collaborating Centres: Briefly describe the nature and outcome of the collaboration and the name(s) of the other WHO collaborating centre(s) with which the centre has collaborated. If applicable, please mention the name of the network of WHO CCs to which the centre belongs. Also include suggestions for increased and improved collaboration with other WHO CC

3.1 Participation as delegate in the Annual Meeting of the Global Collaborating Center Network for Nursing and Midwifery as well as in the Pan American Network of Collaborating Centers for Nursing and Midwifery- PANMCC (Sao Paulo, Brasil, 28-30th of July, 2010. Paz Soto (pesoto@uc.cl)
She was named Subrogate Director of the Executive Committee of the PANMCCs for the period 201-2014.

3.2 Translation into Spanish of the document "Nursing and Midwifery Services: Strategic Directions 2011-2015 (in process) Ilta Lange ilange@uc.cl