



T1D PRACTICAL GUIDE FOR COUNTRIES

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T1D initiative aims to provide comprehensive care for children and adolescents with Type 1 Diabetes (T1D) in low- and middle-income countries. A critical component of this effort is the T1D e-Registry, a digital platform that helps countries track and manage diabetes cases, ensuring better patient care and more efficient use of healthcare resources.

As each country has unique healthcare systems, data needs, and regulations, the platform has to be adapted accordingly.

This document provides a clear and practical guide for countries looking to onboard the T1D e-Registry, explaining the key steps involved in tailoring the platform to fit their local context. The onboarding process involves assessments of current healthcare systems, adaptation of data and dashboards, and ensuring all elements from historical data to real-time case management, work effectively together.



Assessment and Country Workplan Development

Conduct detailed assessment of historical/existing data and map them to core indicators. Develop a BRD along with a workplan with timeline



Data management agreement Signing with Countries

Development of data sharing agreement draft, conduct review and final signing



Hosting and Deployment

Finalization of hosting environment with technical discussion and deployment of country instance



Adaptation of Platform

The platform is adapted based on the conducted assessment findings for the country and integration with the existing systems with historical data upload module. Followed up with UAT testing for review and sign-off



Implementation and Roll-out

In-country training (TOT) with training document followed up with roll-out of platform and continuous project governance and technical support

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KEY STEPS FOR ADOPTION OF T1D

The adoption of the CDIC T1D e-Registry involves several critical steps to ensure the platform meets the unique requirements of each country. This process aims to integrate the registry seamlessly into national health systems, allowing for better management of Type 1 Diabetes (T1D) cases. The steps include:



1. Country specific assessment:

The key steps for the adoption of the T1D framework begin with an assessment of existing historical data, followed by mapping current indicators with CDIC indicators to ensure alignment. Next, hosting and deployment needs are evaluated, along with adaptation requirements for data variables, indicators, dashboards, reports, and users. Once these assessments are complete, country-specific business requirement documents are developed for necessary approvals. Additionally, the process involves assessing integration with other data systems to ensure seamless data flow and compatibility.



2. Adaptation of CDIC T1D platform based on country specific needs:

The adaptation of the CDIC T1D platform involves tailoring the platform to meet country-specific needs by adjusting data variables, business rules, and workflows. Dashboards are also customized to align with local requirements. Additionally, historical data migration is carried out by configuring data upload modules specific to the country. The process concludes with thorough user acceptance testing to ensure the platform is fully functional and meets local expectations.



3. Development and integration of inventory management module:

The design and development of a comprehensive health product supply chain and inventory module ensures efficient management of medical supplies. This module tracks the entire supply chain process, from procurement to distribution, and helps monitor inventory levels, ensuring timely replenishment and preventing stockouts.



4. Development and integration of patient centric module:

Several countries have expressed interest in a patient-centric module to empower T1D patients and their caregivers. This module would provide access to vital information, allow appointment booking, locate nearby T1D health facilities, and send follow-up reminders. Key features include social behavior change communication (SBCC), a community forum, appointment scheduling, and automated follow-up reminders. Additionally, the module would integrate auto-stock deduction linked to prescriptions, ensuring seamless medication management for patients.



5. Hosting Deployment

The deployment of the CDIC T1D platform will be carried out on the designated country server, as agreed upon with the country implementation partner. This will be followed by remote technical support to manage regular upgrades, address change requests, and resolve any bug fixes. Additionally, the platform will adhere to all data security and privacy measures in line with the respective country's policies, ensuring compliance and safeguarding patient information.



6. Training and roll-out of the application

The development of training materials will encompass a range of resources, including training videos, eLearning modules, and comprehensive training manuals. In addition to creating these materials, ongoing training will be provided to key stakeholders in the country, both on-site and off-site, ensuring that all users are well-equipped to utilize the CDIC T1D platform effectively.



7. Ongoing Project Governance and Technical Support:

Comprehensive project governance support will be provided throughout the project lifecycle, encompassing assessment, design, development, testing, and hosting. This includes the establishment of project management tools like JIRA for efficient tracking and coordination. Regular updates on country progress will be shared, complemented by weekly meetings to ensure alignment. Additionally, ongoing management of change requests and technical support will be offered to facilitate smooth project execution and adaptation to any emerging needs.



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