



## Re: Comprehensive Diabetes and Non-Communicable Disease Educator in the Low-Resource Settings -As NCD Primary Care Assistant with One Year Training

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Dear Editor,

The concept and outline of the Comprehensive Diabetes and Non-Communicable Disease (CDNCD) Educator training in the low resource settings has been published in the recent issue of the journal considering the global context of such training and the situation of the diabetes and NCD.<sup>1</sup> A few points needs further elaboration while applying such concept anywhere, viz. the local context, duration and nomenclature of the training.

The medical professionals take care of the more immediate problems of the patients<sup>2</sup> in different situations. The medical graduates and MDGPs in district hospitals, rural health centers and urban clinics and the internists in the hospitals and outdoors mostly provide the general health care of the patients. Other medical professionals in different sub-specialties take care of the respective units, like diabetes and endocrinology, pulmonology, oncology, cardiology and others, utilizing the ever increasing technologies, procedures and therapeutics. Task-shifting to non-doctors is also recognized globally as necessary to improve service delivery, especially in rural areas.<sup>3</sup> The task-shifting is the rational redistribution of tasks among health workforce teams to make more efficient use of existing human resources and ease bottlenecks in service delivery.<sup>3,4</sup> The staff nurses and health assistants provide general health care of the patients in the hospitals and primary health care under the supervision of the medical professionals. The anaesthesia assistant course is of one-year duration intended for previously qualified staff nurses, health assistants and others. There are similarly different levels of non-doctor health care workers in the required fields like maternal and child health, ophthalmology, primary health care, public health and others. The implementation of the WHO Package of Essential Noncommunicable (WHO PEN) Disease Interventions which can be delivered by primary care physicians and non-physician health workers in primary care<sup>5</sup> is now being planned in our country also. Thus there is need to produce adequately trained compassionate mid-level non-doctors health care workers for the optimum implementation of the interventions of the non-communicable diseases within the hospital and in the community particularly for the longitudinal health care and education of the people with such chronic health problems. The objectives are to support medical professionals in providing services at the secondary/tertiary level, to deliver primary services independently at primary care centers, to supervise other health care workers at health post level and community levels, to provide technical and managerial support at all levels of the health institute, to train health care workers, to educate NCD patients, and to plan and carry out community programmes.

The training of the mid-level health care professionals in NCD requires the fulfillment of the

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sufficient hours of practice experience of working under supervision as well as of the achievement of the various essential competencies. It thus needs at least six months of intensive training schedules to be eligible to appear in the certifying examination.<sup>1</sup> In the routine clinical workload of the patients with the regular diabetes and other outdoor service in our setting, it may thus entail one year of training period. Such duration of training will also be consistent for their recognition, posting and career as in case of other trainings of similar health care workers like anaesthesia assistant. The duration of training of anaesthetic assistants was increased from six months to one year and it is consistent with the global recommendations on health worker training and task shifting and the qualification is registered by the Nepal Health Training Council.<sup>3</sup> If the training in the NCD is done as part time basis or with once a week diabetes patient outdoor service, the duration will be longer.

The other point is the nomenclature of the training. The terminology like the CDNCD Educator<sup>1</sup> in our settings may give the impression of being related with the field of health education alone, rather than with the broader role as of such health care workers in the health care delivery. NCD Primary Care Assistant or other similar nomenclatures of the training may be used considering the local health system practice. The terminology of the NCD Primary Care Assistant is consistent with the nomenclatures of the existing other health care workers like Aanesthesia Assistant, Ophthalmic Assistant and others in our health care system as well as of the WHO Package of Essential Noncommunicable (WHO PEN) Disease Interventions for primary care<sup>5</sup> and the global NCD Alliance founded by the four non-governmental organization federations of diabetes, tuberculosis and lung disease, cancer and heart.<sup>6</sup>

**Conflict of Interest: None.**

## REFERENCE

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