



1.5 Existing Data Review



Name of Community/District:

GPS coordinates of center of district:

1. Potential RHD Burden

1.1 What is the total population* of the district?	Persons:	Year:
1.2 What was the number* of total ARF/ RHD cases at the district hospital?	Cases: ARF: Cases: RHD:	Year:
1.3 What was the number* of CV deaths** at the district hospital?	Deaths:	Year:
1.4 If you have a cardiologist or other relevant specialist, what is the proportion of RHD cases among the total cases that he/she sees?***	Number RHD / Total, (%):	Year (month):
1.4 If you have a cardiologist or other relevant specialist, what is the proportion of heart failure cases among the total cases that he/she sees?***	Number RHD / Total, (%):	Year (month):

* Provide numbers for the most recent year that data are readily available. (If this is not available, the worksheet within the NAT may be used.)

** CV deaths = cardiovascular deaths (ICD-9 codes 390-438, ICD-10 codes I00-I79).

*** Could be calculated as number of RHD cases / Total cases seen at clinics over a defined period (e.g. in a month) or as RHD cases / Total cases as major diagnosis on echo for all echoes done over a similar defined period.



*Name:

*Role:

* Key Informant of this section

Date:

2. Health System Capacity

2.1 How many dispensaries are in the site?	<input type="text"/>
2.2 How many primary health centers are in the site?	<input type="text"/>
2.3 How many secondary /district hospitals serve the site?	<input type="text"/>
2.4 Name of tertiary hospital serving the site:	<input type="text"/>
2.5 List all GPS co-ordinates of the health facilities (Please refer to Operations Manual for instructions.)	<input type="text"/>



*Name:

*Role:

* Key Informant of this section if different from previous section

Date:

3. Additional criteria

3.1 Is the district more than 6 hours by bus or car from a major town/city?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.2 Has there been any recent (or ongoing) natural disaster? Comments	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.3 Have there been any recent infectious disease outbreaks? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.4 Is the region affected by political unrest/violence or terrorism? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No



*Name:

*Role:

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Date:

4. Collateral information

4.1 Are measures of poverty and housing quality in the community approximately average for values for the district? List census data used:	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2 Is the size of the community size approximately average for the district? List census data used:	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3 Have there been any health interventions (education campaigns, incentive payments or large research projects) which may influence health literacy or how people seek care? Discuss with local ethics committee Details :	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.4 Has there been recent environmental or other disasters creating more immediate health priorities than RHD? Details :	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.5 Are primary and secondary care facilities available in the community?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.6 Do patients have some access to referral for tertiary care (not necessarily surgical)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.7 Are health care services provided to a defined, relatively geographically stable, population? (identifiable denominator).	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.8 Is there evidence of support, endorsement or interest from forefront health staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.9 Do primary schools exist in this community?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.10 Is health care delivered exclusively by international teams or agencies?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.11 Is the size of the community between 10,000 – 30,000 people?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.12 Is the community less than a 3-hour drive from a main center or airport?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.13 Does the community have access to translation or language support services?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Other considerations

Please outline any other factors which make this community more or less suitable for inclusion as a pilot site:
