Q1. Since the Caricom Heads of Government declaration of Port-of-Spain: 15.09.07 “Uniting to stop the Epidemic of CNCD.”

Q2. Are there clear definitions of the roles and responsibilities of the many NGO’s involved in HCC?

Q3. Are accurate and reliable data on the “4 CNCD” available from all member states?

Q4. Do we have data on risk reduction for the shared risk factors?

Q5. Did we achieve the target of 80% of people with CNCD receiving best practice care and have access to preventive education based on regional guidelines by 2012.
Questions 6-10

Q6. Do we have listing of all civil society groups and their output activities under the Grouping: NGO’s, Churches, Unions, Social-Movement, Special Interest Groups?

Q7. (WANGO) World Association of NGO’s website shows over 400 associations in the Caribbean are members of WAGO, and others who are not. Have we documented them in each member State? Have we contacted them? If so what percentage?

Q8. Do we have a mechanism for documenting and collecting data on activities of Caribbean WANGO MEMBERS ON THE “4 CNCD’s” and the “4 shared risk factors”?

Q9. What is our strategy for preventing competition and promoting cooperation among civil society groups in the Caribbean?

Q10. Do we have accurate and reliable data on the “4 CNCD’s” in member states of Caricom?
Questions 11-15

Q11. How can civil society lobby government to collect and disseminate National data on the 4 CNCD’s where they did not exist?

Q12. The (IAHF) Inter American Heart Foundation is our strategic lead agency playing a coordinating role. Is this likely to continue 2012-2016?

Q13. Do we have audited accounts of finances and are we over or under budget for specific activities?

Q14. What is the current relationship between HCC and Caricom, PAHO, National Commissions on CNCD?

Q15. What is the current relationship between HCC and Cancer Societies, Diabetes Associations, Chest Foundations, Heart Foundations in the regions?
Questions 16-20

Q16. How many National Commissions on CNCD already exist in Caricom as of 2012?

Q17. How many communication instruments have been produced and how extensive are their distributions (5.3 (a) to (d))?

Q18. How many member states received copies of HCC 2008-2011 Action Plan and how many incorporated core elements into their National Action Plans?

Q19. How many Caribbean wide educational activities have been organized and executed 2008-2011 in alignment with “4 CNCD’s” and 4 shared “Risk Factors”?

Q20. How successful has been Caribbean Wellness Day and has the activity output increased between 2008-2011?
Questions 21-25

Q21. How many member states have ratified (FCTC) Framework Convention on Tobacco Control and how many have enacted Legislation? Target 95% by 2012.

Q22. Did the “Caribbean no Tobacco” FCTC Conference come off and how successful was it?

Q23. What percentage of Government buildings and Workplace in the Caribbean are now “smoke free”?

Q24. Has a relationship been established with Agita Mundo?

Q25. Do we have data on increasing physical activities in Schools and Workplace?
Questions 26-30

Q26. Do we have data on use of sugar, salt, trans fat in the Caribbean member states (CFNI)?

Q27. Do we have data on increase use of fruits and vegetables, reduction in salt use, reduction in use of trans fats in member states?

Q28. How many National Policy statements have been made and Programmes started on population salt reduction?

Q29. How many of the eleven (11) activities to enhance identification and management of CNCD’s in member states have been achieved?

Q30. How many meetings have taken place between National CNCD Commissions across the Caribbean with PAHO, CFNI and CHRC?
Questions 31-35

Q31. Did we achieve 80% of at risk population screened by 2012?

Q32. Did we achieve integrated evidence based guidelines, protocols for prevention and control of CNCD’s with on going audit by 2010?

Q33. Did we achieve production of an updated curricula and training for health care providers (80%) on management of hypertension and diabetes in all countries by 2012?

Q34. Was there implementation of chronic care model in 50% Health facilities, in 50% of member states by 2010, and 80% of health facilities and 80% of countries by 2012?

Q35. Were 50% of patients trained in self management by 2010?
Questions 36-40

Q36. Was there at least one quality of care improvement project/CMI applying Chronic Care Model (CCM) in each member state by 2010?

Q37. Was the prevalence of raised BP and Blood Glucose “among adults aged 25-64” determined in all member states by 2011?

Q38. How many persons had Height, Weight and Blood Pressure measured in Barber Shops across the region and distribution of CNCD Health Passports?

Q39. What are the sources of funds for HCC activities and how can funding be increased?

Q40. What are the Audit factors in the evaluation of HCC Action Plan 2008-2011?
Questions 41-42.

Q41. What has been the attendance record of the nine Organizing Task Force members at meetings and conference calls?

Q42. #375,000.00USD was budgeted for the first year. Was it spent and how much was spent in years 2 and 3 of 2008-2011 cycle?