

What are USAID's NTD projects? ^[1]

USAID's NTD projects include ENVISION, END in Africa, END in Asia, USAID-funded APOC, and USAID-funded OEPA. ENVISION is led by RTI International, in partnership with CBM International, The Carter Center, Helen Keller International, IMA World Health, Sightsavers International, Tulane University and World Vision. END in Africa and END in Asia are led by FHI360. For more information, go to [USAID's NTD Program](#) ^[2], the [ENVISION](#) ^[3] website, the [END in Africa](#) ^[4] website, and the [END in Asia](#) ^[5] website.

What is USAID's NTD database, managed by ENVISION? ^[6]

USAID's NTD Database, managed by ENVISION, [hereafter, referred to as the "USAID NTD Database?"] is a password-protected, web-based platform where USAID-supported NTD data are managed, reviewed, and stored for all USAID-supported NTD mechanisms, in order to improve secure accessibility by multiple users in different locations.

What data are in the USAID NTD Database? ^[7]

The USAID NTD Database stores the following data, captured by countries supported through USAID's NTD projects:

- Districts endemic above treatment threshold, targeted and treated through preventive chemotherapy (PC), by disease
- Persons at-risk, requiring PC, targeted and treated through PC with all funding and with USAID support, by disease
- Coverage (geographic, program, epidemiologic, national), disaggregated by all funding and achieved with USAID support
- USAID-supported training activities and results
- Disease mapping activities and results, including progress towards mapping completion
- M&E assessment activities and results
- Serious Adverse Events (SAEs) reported during PC
- Implementation of best practices for integrated NTD control/elimination, such as conducting a situation analysis, development of a multi-year plan of action, appointment of a national NTD focal person, etc.
- Summary of activities, diseases, and districts supported by USAID

ENVISION's M&E team is drafting forms to capture additional results from other USAID-supported activities, such as disease-specific assessments, post-MDA coverage surveys, and morbidity management. Once these forms are finalized and utilized, the data will also be stored in the USAID NTD database.

Who owns the data stored in the USAID NTD Database? ^[8]

Country data are owned by the MOH in countries that are supported through USAID's NTD projects. However, project primes, as well as their respective sub-partners, have contractual obligations to USAID to report NTD data on USAID's NTD projects. All database users will be required to acknowledge how the data stored in USAID's NTD database will be (and will not be) used.

Is the USAID NTD Database intended to be MOH-owned? [9]

No. However, the country data within the database are owned by the MOH; therefore, it is important that the MOH is aware and approves of what is being reported for its country. Furthermore, the MOH is encouraged to utilize the database for analyzing and reporting data as needed.

Who in the MOH can utilize the database? [10]

Representatives of the national NTD programs within the MOH in USAID-supported countries will be able to view and/or utilize the database. These individuals will be able to view and export data in the form of generated reports. One designated person within the MOH will be requested to approve the data that are submitted for USAID's NTD projects. (See "How can I get access to the database?" for more details.)

Will any organization have automatic access to data without MOH approval? [11]

The only organizations that will have automatic access to data are the MOH and those with contractual obligations to report the data to USAID. These are: 1) the lead coordinating NGO in the country for the USAID-funded NTD project, 2) the USAID-funded NTD project prime, 3) RTI/ENVISION through its data management role, and 4) USAID.

The MOH is requested to specify other organizations that they wish to have access to the data. These could include other NGOs that are working in the country, WHO regional offices and headquarters, APOC, drug donation programs, etc. Once the MOH grants approval, these organizations will be required to sign a User Registration and Acknowledgement Form before they will have read-only access to the data. (See "How can I get access to the database?" for more details.)

How can I get access to the database? [12]

Designated MOH representatives should send a completed Registration and Agreement Form for the Designated MOH Representative to NTDdatabase@rti.org [13]. Other MOH staff should send a completed MOH Staff Registration Form to NTDdatabase@rti.org [14]. The lead coordinating NGO (i.e., sub-partner) in the country will have automatic access to the database for planning, monitoring, evaluating, and reporting purposes, and should send a completed User Registration and Acknowledgement Form to NTDdatabase@rti.org [13]. Other organizations working with MOH, such as in-country NGOs, WHO Regional Offices, WHO-Headquarters, and drug donation programs, should discuss potential access with the MOH. The MOH may indicate its explicit approval for a specific organization to have access by sending an email to NTDdatabase@rti.org [13].

Does MOH submit data to the USAID NTD Database? [15]

The MOH will not submit data to the USAID NTD Database at any point. The MOH will only be responsible for collaborating with the sub-partners to compile data, and to review and approve data submitted to the database. This is to reduce the reporting burden on the MOH as well as to ensure that any issues with the data are understood by all associated organizations (e.g., MOH, sub-partner at country and HQ levels, etc.).

Why does MOH need to approve the data in the USAID NTD Database? [16]

The MOH needs to approve the data in the USAID NTD Database because MOH bears the primary responsibility for all NTD activities, and therefore is the owner of the NTD data. It is essential that MOH is aware of and approves what is being reported for its country.

Who should provide MOH approval? [17]

Though multiple people in MOH may have read-only access to their country's NTD data in the USAID NTD Database, only one designated MOH representative who is familiar with data for NTD activities should provide MOH approval. Possible designated MOH representatives include the NTD Focal Person, NTD M&E Specialist or NTD Data Manager.

What does MOH approval mean? [18]

MOH approval means that the database data are accurate and in line with MOH data, and that data can be used for planning, monitoring, evaluation, and reporting at the project level under USAID's NTD projects. After MOH approval, data aggregated to the national level can be shared with the public, typically through USAID-project specific websites or in reports submitted to USAID.

What does MOH approval NOT mean? [19]

MOH approval does NOT mean that district-level data will be available for public use, without explicit approval by the MOH on a case-by-case basis. (Such District-level data may be utilized internally by USAID's NTD projects for planning, monitoring, evaluating, and reporting, and through read-only access by MOH-approved partners, prior to MOH approval of data, with a disclaimer that data have not yet been approved by the MOH.) Even with MOH approval of the data in the USAID NTD database, district-level data cannot be used, disclosed, sold, licensed, published, reproduced, or made available to any third party without prior MOH permission. All users, including those with read-only access to a country's data, will be required to sign a User Registration and Acknowledgement Form.

When is MOH approval necessary? [20]

MOH approval will only be requested once the data have been assembled through USAID's data capture tools by partners at all the levels in the USAID-supported project (including the sub-partner at the country and HQ levels, the appropriate individuals at FHI 360 or RTI, and the ENVISION M&E team). MOH approval is requested

approximately 2 times/year, at the time of work-plan development (typically in July/August) and at the 2nd semi-annual reporting period (typically late November of the next year). However, it is important to note that the sub-partner at the country level will collaborate with the MOH throughout the entire data acquisition, submission and review process.

How does MOH indicate approval? [21]

MOH can indicate their approval of NTD data either online or using the Workbooks. Once data are gathered and assembled through USAID's data capture tools for the USAID-funded project, a notification email is sent to the MOH (with a copy to the sub-partner at the country level) for data review and approval by the designated MOH representative. The MOH representative logs in with a unique username and password that is assigned to that individual. After reviewing the data, the MOH indicates its approval in the online database. Alternatively, once data are approved by ENVISION M&E team, the country-level sub-partner may print Summary worksheets from the Disease and Program Workbooks. The designated MOH representative reviews the data and indicates approval by signing the Summary worksheet. The sub-partner is responsible for scanning the printed, signed Summary sheet and sending it to the ENVISION M&E team via email. The ENVISION M&E team will indicate the MOH's approval in the database on the MOH's behalf.

What if MOH doesn't agree with the data in the USAID NTD Database? [22]

The designated MOH marks the item(s) that they don't agree with and indicate the reason for disapproval. The MOH and the country-level sub-partner responsible for data submission should then begin a dialogue to address the issue(s). Once the sub-partner updates/edits data, where necessary, and the data are again ready for the USAID NTD Database, the MOH can log in to the database to indicate its approval for the final data. Alternatively, Summary worksheets can be printed, signed, scanned, and sent to ENVISION M&E team to indicate MOH approval.

Why can't MOH make changes directly to the data in the USAID NTD Database? [23]

The database is set up so that the sub-partner should make the changes to any data, rather than the MOH. This is for two reasons:

1. The burden of reporting should be on the sub-partner and project primes in USAID-supported projects, and not on the MOH.
2. The sub-partner should be aware of any concerns the MOH may have with the data, so that the concerns can be appropriately addressed.

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Links

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- [2] <http://www.neglecteddiseases.gov>
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