**Barriers and opportunities for NCD management in Primary Health Care: Lessons from a clinical workflow analysis in diabetes and hypertension clinics**

**Caroline Gitonga1, Sarah Kedenge1,Alice Tarus1, Albert Orwa1, Caroline Kyalo1, Eddine Sarroukh1.**

**1Philips Research Africa**

Non-communicable diseases (NCDs) are the leading cause of death globally. In 2015, NCDs accounted for 39.8 million (71.3%) of the 55.8 million deaths reported globally. In recent decades, low and middle income countries (LMICs) have experienced an epidemiological transition from majority of deaths and disability being caused by communicable diseases to an increase in NCD deaths. The inability of the health systems in the LMICs to cope with the NCD burden is evident as higher rates of premature deaths from NCDs. Response to the NCD epidemic in LMICs will need structured NCD services at the primary health care (PHC) level.

To examine the readiness of the PHC facilities to offer NCD services and identify opportunities for NCD management in PHC facilities, we undertook an assessment of the clinical practices and clinical workflows in the outpatient clinics for diabetes and hypertension in 3 PHC facilities and 3 higher levels facilities in Kiambu County in Kenya. Results from the analysis showed the facilities lacked policies on NCD management at the PHC level, experienced frequent drug stock-outs, lacked information on management of the conditions at the PHC level and the health information systems were insufficient or absent for the documentation of the NCD data. Additionally the facilities were understaffed with high workload in the NCD clinics and the staff lacked specialized training in NCD management. The study identified barriers and opportunities in improving diabetes and hypertension management at PHC level.