

Needs Assessment on Quality in Timor-Leste

Step 2 of the Twinning
Partnership for Improvement
between Timor-Leste and
Macao SAR China



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CONTENTS

4	Acronyms
5	Executive summary
8	Introduction
13	Approach to the needs assessment
16	Rapid desk review: Timor-Leste National Health System – Quality Focus
19	Needs assessment country visit
22	Needs assessment findings
45	Key themes - stakeholder interviews, facility visits and desk review
48	Key challenges and needs
51	Conclusion
55	Next steps
57	Annexes
63	References

ACRONYMS

ABHR alcohol-based handrub

APPS African Partnerships for Patient Safety

CHC community health centre

CQAH Cabinet of Quality Assurance in Health
CQI comprehensive quality improvement
HNGV Hospital Nacional Guido Valadares

INS Instituto Nacional de Saúde

IPC infection prevention and control

MOH Ministry of Health

NHSSP National Health Sector Strategic Plan

POCQI point of care continuous quality improvement

PPE personal protective equipment SAR Special Administrative Region

SEARO WHO Regional Office for South-East Asia

SDG Sustainable Development Goals

TPI Twinning Partnerships for Improvement

UHC universal health coverage
WASH water sanitation and hygiene

EXECUTIVE SUMMARY

Without quality care, universal health coverage (UHC) cannot be achieved. The Ministry of Health of Timor-Leste, in pursuit of UHC, is working with partners, including WHO, to place a renewed emphasis on improving the quality of care provided across the health system.

As part of this effort, Timor-Leste and Macao SAR China have entered into a partnership arrangement using the WHO Twinning Partnerships for Improvement (TPI) approach. This approach aims to build sustainable, trusting partnerships; identify opportunities for technical collaboration to spark improvements in care; and facilitate spread of best practice across the system, ensuring that the national direction on quality is informed by implementation experience. Within the systematic TPI approach, a needs assessment has been carried out jointly between the Ministry of Health of Timor-Leste, the Macao SAR China Health Bureau and WHO. The codeveloped needs assessment approach involved a desk review of key documents, stakeholder interviews and facility visits. This report outlines the needs assessment findings and recommendations resulting from these.

There are several important assets across the Timorese health system for improving quality. For example, there is a dedicated Cabinet of Quality Assurance within the Ministry of Health with a mandate for improving care, which has started implementing various initiatives. There have been initial efforts to build capacity in quality improvement methods, with pilot sites currently implementing improvement interventions. Saúde na Família, the flagship community health initiative, represents a potentially important platform for engaging communities. There have also been successful efforts at the national hospital to build capacity and understanding about quality of care, supported by a development partner. Indeed, several development partners are working to support improvements in quality, notably WHO and UNICEF. Importantly, there is clear enthusiasm to improve patient care among health professionals and health system leaders.

However, challenges remain. In terms of leadership and governance, the Cabinet of Quality Assurance in Health requires further support to deliver its ambitious quality agenda, both in terms of human resources and facilitating engagement with key health system reforms. The systems environment for quality could be strengthened by a national strategic direction on quality of care, to engage stakeholders, clarify governance and accountability structures, prioritize interventions and facilitate effective measurement and monitoring. Human resource capacity requires improvement to provide standardized quality care, and there are opportunities to optimize the skills and role of nurses. There appears to be inconsistent knowledge and use of clinical guidelines and standards for common clinical conditions which should be addressed to enable *improvements in clinical care*. Building quality improvement capability across the country could support this effort. Priorities relating to reducing harm include effective provision and practice related to IPC and WASH across the health system, with many facilities lacking provision of reliable, safe water supplies and basic supplies like soap and personal protective equipment. Finally, systems are not yet in place for enabling the meaningful engagement of patients, families and communities in planning, delivering and assessing care.

Within the Timor-Leste—Macao SAR China TPI, the results of this needs assessment will now be used by both countries to identify action areas that can be addressed through technical collaboration. The process has also played an important role in advancing the conversation on health care quality in Timor-Leste. WHO will work with the Timor-Leste Ministry of Health to develop national direction for quality and improve overall health system quality to enable providers to deliver better quality care.

INTRODUCTION

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