



TIMOR-LESTE HEALTH DIAGNOSTICS PPP

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OBJECTIVE: TO ADDRESS KEY CHALLENGES IN HEALTH DIAGNOSTICS

Key Challenges

High prevalence of diseases

Lack of basic infrastructure and functional diagnostic system

Shortage of technicians and specialists doctors (i.e. radiologists & pathologists)

Diagnostic services in TL are highly under-served

Health Care Services

Sub District-CHC

District Referral Hospitals

National Hospital

Diagnostic Services

- Upgrade 7 CHCs to be able to:
- Provide basic **LAB SERVICES** covering the entire demand through a logistic network;
- Provide basic **IMAGING SERVICES**.

- Upgrade 5 Referral Hospitals to be able to provide relatively advance diagnostic services;
- Provide advance imaging services.
- Provide additional Lab services;

- Upgrade National Hospital to provide advance diagnostic services;
- Provide additional advance Lab services and advance **imaging services**

Objective

To provide Timor-Leste with high quality, and affordable health diagnostics infrastructure and services to serve the population in urban and rural areas (98.2%)

INSTITUTIONAL FRAMEWORK AND CONTRACTUAL STRUCTURE

Main Obligation of the Parties, Expected Benefits & Coverage

Concession model / Contract Term

- ❖ Build/Rehabilitate, Operate and Transfer/ 11 years

Parties

- ❖ The government representatives (MoH, MoF, MoSAd) & the private partner

Concessionaire's Scope

- ❖ Finance, refurbish, equip, operate and maintain **Lab and Imaging Centers**
- ❖ Provide **quality diagnostic services** to patients in TL
- ❖ Employ & train diagnostics **services staff**
- ❖ Procure **licenses** required to operate the project
- ❖ Comply with **local regulation and international best practices** in health care service delivery
- ❖ Adhere to **health & safety standards** for provision of diagnostic services
- ❖ **Return the assets** to the Authority at the end of the concession term

Role of the Gov

- ❖ Grant the concessionaire the right to use the existing diagnostics premises and other premises required under the scope of the project
- ❖ Monitor KPIs outlined in the CA
- ❖ Assure that payments to the C are made on time
- ❖ Assist the C in procuring international staff visas and health licenses required to develop and operate the project

Benefits / coverage

- ❖ Improve access & reach; equity; better services & efficiency; quality & resources/98.5 %

IMPACT ANALYSIS

Before

Access to service:

- Unreliable availability of diagnostic equipment
- Availability of limited number of diagnostic test (*No MRI, 1 CT Scan in the NH, USG in certain CHCs, Basic Hematology test in certain CHCs*)
- Shortage of skilled staff

Quality of Service

- No monitoring of quality of test result
- Low hygiene & safety at facilities

Equity of service

- Below private service providers



After

Availability of service

- Availability of diagnostic equipment
- Availability of almost all diagnostic test (*MRI, USG, X-ray and ACG in the upgraded CHCs, Primary and advance pathology test in all CHCs through upgrade and logistic network*)

Quality of service

- Third party monitoring of test result
- High level of hygiene & safety

Equity of service

- Public patients get quality diagnostic service of private sector standard

IMPACT ANALYSIS



Before

Affordability Patients:

- Service Free
- But have to access expensive diagnostic centers or fly out of country due to lack of service in Timor Leste

Availability of Skilled Workforce:

- Number of specialized skilled staff in health diagnostic in public health system: 27

After

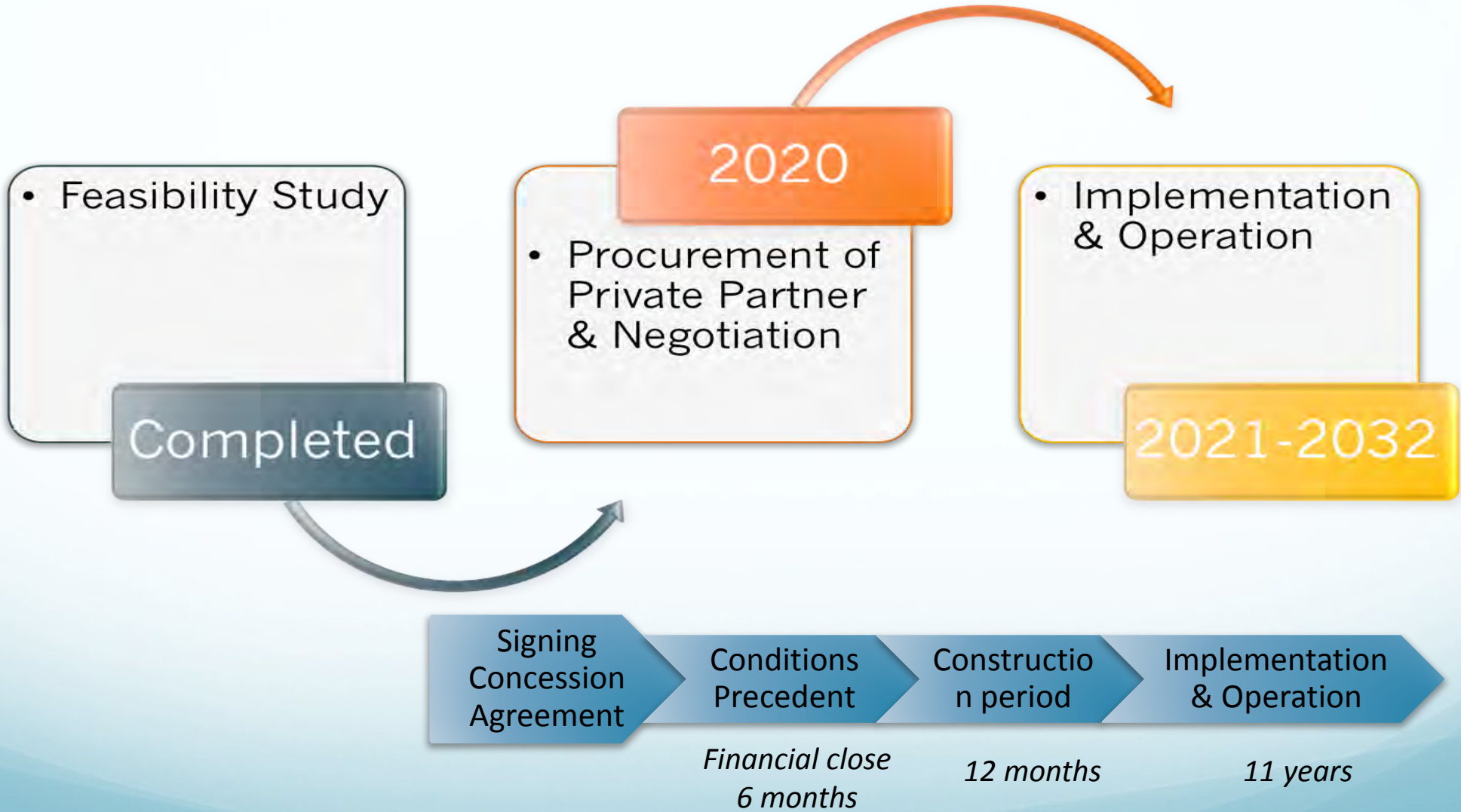
Affordability Patients:

- Services remain free but number of service increased and coverage expanded.

Availability of Skilled Workforce:

- Number of specialized skilled staff in health diagnostic in public health system: 118

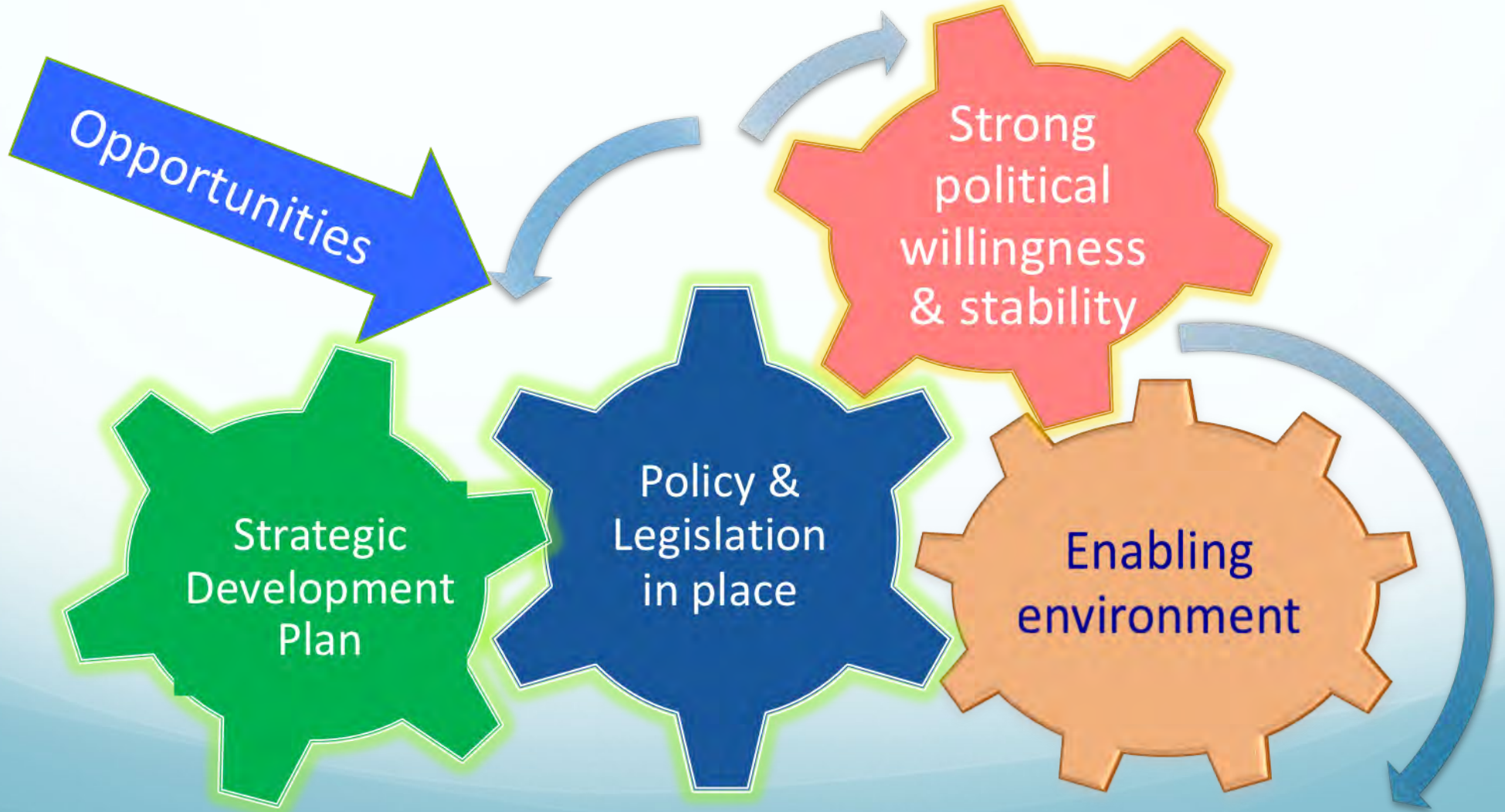
Timeline



CHALLENGES



OPPORTUNITIES





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