

UTILIZING HUMAN RESOURCES FOR HEALTH DATA FOR DECISION MAKING IN TIMOR-LESTE

PROGRAM OVERVIEW AND COURSE CONTENT

Local Health System Sustainability Project
Task Order I, USAID Integrated Health Systems IDIQ

Local Health System Sustainability Project

The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ helps low- and middle-income countries transition to sustainable, self-financed health systems as a means to support access to universal health coverage. The project works with partner countries and local stakeholders to reduce financial barriers to care and treatment, ensure equitable access to essential health services for all people, and improve the quality of health services. Led by Abt Associates, the five-year, \$209 million project will build local capacity to sustain strong health system performance, supporting countries on their journey to self-reliance and prosperity.

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ACRONYMS

DGCS Directorate General of Corporate Services

HRH Human resource for health

ICA Institutional Capacity Assessment

INS Instituto Nacional de Saúde (National Institue of Health)

Local Health System Sustainability Project **LHSS**

Ministry of Health MoH

NDHR National Directorate of Human Resources

NSPHRH National Strategic Plan for Human Resources for Health 2020

I. BACKGROUND

The National Strategic Plan for Human Resources for Health 2020-2024 (NSPHRH 2020-2024) has identified the health workforce information system as one of five strategic priorities. To date, human resources for health (HRH) planning for facility staffing and health worker allocation is not data-driven; HRH data is fragmented, limiting its perceived usefulness in decision-making. The Ministry of Health (MoH) and National Directorate of Human Resources (NDHR) maintains data in an Excel-based registry of public sector health workers, the Health Quality Assurance Cabinet on the other hand maintains health professionals' registration in an access database, while Instituto Nacional de Saúde (INS) is maintaining a Training Management Information System that needs further enhancement and improvement to include reporting and dashboard to present meaningful data.

The preliminary findings of the Institutional Capacity Assessment (ICA) conducted by the Activity in Q3 of FY22 confirmed that HRH data is incomplete and of poor quality. Additionally, the Ministry of Health staff have limited capacity to use HRH and other health systems data for evidence-informed decision-making. To respond to the ICA findings and to address the issues noted above, USAID's Health System Sustainability Activity (the Activity) worked with the NDHR and INS to develop training on health workforce data use for decision making. The training will use a problem-based, hands-on approach to train mid-level managers within the Directorate General of Corporate Services (DGCS) to use HRH data to identify challenges; conduct analysis; engage relevant stakeholders in the collection and sharing of HRH data; use of HRH data to support decision making. Most importantly, it will ensure equitable allocation of workforce and improve training and professional development opportunities for the health workforce across the country especially at the primary health care level.

I.I OBJECTIVES OF THE TRAINING

The objective of the training is to develop participants' capacity to use HRH data to make decisions and take action to improve the availability of quality health services. Specifically, the training will result in:

- Enhanced managerial competency of participants on use of HRH data to take action
- Improved ability to conduct data analytics and ensure the data is presentable for making strategic decisions
- Increased availability of high-quality HRH data
- Improved ability to engage stakeholders in collection and sharing of data, and in the provision of feedback, and
- Improved skills and knowledge of participants on use of data for decision making.

1.2 OVERVIEW OF THE TRAINING

The training will run for three consecutive days starting from 8:30am-5:30pm with a 1.5 hour lunch break. On the first day, participants will be introduced to a basic understanding of health workforce issues and the role of data in decision making, identification of HRH data needs and common data quality issues, and engagement of stakeholders in the collection and sharing of data. Participants will gain hands on practice with improvement of data quality, be introduced to a stakeholders' engagement tools that help identify stakeholders, define their roles and resources, as well as map information flows. The participants will also be introduced to a case study which will be used throughout the training.

Day two will cover the development of basic skills in analysis and conducting calculations in HRH data, develop an understanding of how determinants and barriers to use HRH data and establish an understanding and importance of feedback loops. To help with data analysis, a practical activity for basic data analysis using excel will also be offered. Participants will also develop action plans to addressing barriers to data use and discuss feedback loops in Timor-Leste. Participants will continue applying learnings from the day to their case study.

SESSION DESCRIPTIONS 1.3

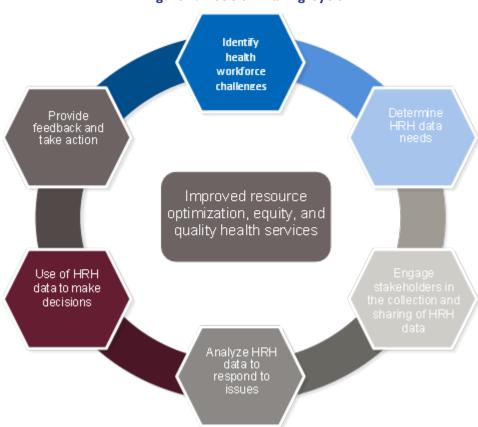


Figure 1: Decision-Making Cycle

1.3.1 SESSION ONE HEALTH WORKFORCE CHALLENGES AND USE OF HRH DATA TO MAKE DECISIONS

- Session Objectives:
 - Understand common health workforce challenges globally and in Timor-Leste
 - Understand common health workforce challenges globally and in Timor-Leste
 - Raise awareness of the importance of using health workforce data to inform decisions
 - Understand the importance of improving data-informed decision making to optimize the health workforce

Session Overview: This session will focus on improving participant knowledge on health workforce challenges and how HRH data can be used to make decisions and take action on these challenges. An overview of data use for decision making will be provided, and the decision-making cycle will be introduced.

1.3.2 SESSION TWO: DETERMINING HEALTH WORKFORCE DATA NEEDS

- Session Objectives:
 - Understand what health workforce data is and the importance of the data to respond to health workforce challenges
 - Understand the difference between good vs bad quality HRH data and strengthen the ability to manage these data
- Session Overview: This session will focus on explaining what constitutes health worker data and what are the attributes of high-quality data. Specifically, the session will dive into the difference between good and bad quality data, understand attributes to data quality, data quality challenges, and measures for data quality control and assurance. At the end of the session, there will be a hands-on activity where participants will be asked to review health worker training data for quality.

1.3.3 SESSION THREE: ENGAGING STAKEHOLDERS IN COLLECTING AND SHARING OF HRH DATA

- Session Objectives:
 - Identify key stakeholders and understand how to engage these stakeholders to make strategic decisions on health worker optimization
 - Identify opportunities for improving production and use of HRH data
 - Identify points where analysis & data could support HR planning and decision making
- Session Overview: This session will start of by defining the concept of stakeholders, HRH data users and data producers. Then, it will explain the importance of involving stakeholders throughout data usage in the decision-making cycle. This session will also discuss information use flows. At the end of the session, participants will have to complete a stakeholder analysis matrix for them to understand, who the stakeholders are, the decisions they make, information they need, and the best way to present that information. Participants will also be asked to map information flows to better understanding the link between data and the end-users.

1.3.4 SESSION FOUR: ANALYZE HRH DATA TO RESPOND TO **CHALLENGES**

- Session Objectives:
 - Turn raw data into useful information
 - Provide answers to questions being asked, by using basic data analysis in Excel
- Session Overview: This session will focus on key concepts in data analysis by reviewing the most common data analysis terms and techniques used for descriptive data analysis and provide examples for doing some analysis with health worker data. This includes calculating average, median, ratio, proportions, percentage, and rate to name a few. Participants will also be required to demonstrate practical knowledge in basic data analysis by completing a given activity.

1.3.5 SESSION FIVE: USE OF HRH DATA TO MAKE DECISIONS

- Session Objectives:
 - Identify opportunities for improving use of HRH Data
 - Identify opportunities for feedback mechanisms
 - Identify points where analysis & HRH data could support HR planning and decision making
 - Highlight the determinants of HRH data
 - Understand potential barriers and solutions to use HRH data
- Session Overview: This session will explain the context of decision making, data demand and use, the role of any HRH database in decision making, and how to strengthen the decision-making process. It will also explore ways how to increase the use of data, working toward building a culture of data use. It will further share strategies for overcoming barriers to data use ensuring that healthrelated data are being used to make decisions at all levels. Participants will also learn strategies for using data in program management, implementation, and decision-making.

1.3.6 SESSION SIX: PROVIDE FEEDBACK AND TAKE ACTION

- Session Objectives:
 - Identify opportunities for feedback mechanisms
 - Understand how to link analysis of HRH data with taking action
- Session Overview: This session will review key factors in effectively developing and using feedback loops and how to turn data into action. To assist understanding of this session, a small group activity will be included to discuss framework for linking data with action.

1.3.7 OTHER SESSIONS

- Case Study: Participants will be assigned to different groups and provided with a Case Study scenario that they will use each day of the training to apply learnings from daily sessions. At the end of the training, participants will present their Case Study under the themes of each session.
- Evaluation of the HRH Data Use Training: The evaluation will allow facilitators to understand how the HRH data use training has affected the way the participants treat HRH data in the future. In the session, participants will be distributed with some questionnaire to evaluate the process and the training for data use.

2. METHODOLOGY & MATERIALS

The training will be an instructor-led, in-person training that includes presentations, group discussions, activities, role playing, and hands on "practice" through the use of a case study. There will be a pre-test and post-test evaluation to assess the change in the skills and knowledge in using the data for making decisions.

Materials developed will include technical PowerPoint presentations, worksheets, a calculator for activities, and the case study. Participants will also need pen and paper for taking notes, as well as access to a laptop for the case study.

3. PARTICIPANTS

Training will be divided into two major groups. The first group will be the National HR Directorate, Head of Departments under the NDHR and trainers from the INS. These participants will attend as participants for Training of Trainers (TOT) training, who will then cascade the training to the municipalities. The second group will be mid-level managers at the national level and municipality health directors.