



# Situation Analysis Report Immigration & Border control, Suai



**Pillar 6  
Ministry of Health  
Timor-Leste**

**Background:**

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**Team members for the conducting the situation assessment:**

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The Pillar 6 team visited the Suai border to accomplish 2 major objectives: conduct analysis for overseeing the border situation in line with the Infection Prevention and Control (IPC) activities and organize a workshop on IPC for the border staffs. A team was assigned for conducting the situation of IPC implementation in the border. The team focused to observe IPC interventions and discussed with several focal persons on current IPC practices.

Below are the details of the IPC assessment findings and scope of improvement in specific area for improving the IPC practices.

**I. IPC practices at the arrival point:**



The visit was structured around discussing and observing major areas of operation in border related to COVID-19 practices. The first day was dedicated on discussing with the immigration staffs on their IPC practices. The pillar 6 team observed the available IPC materials there and asked for the IPC practices they usually follow during their work. Since the pandemic situation, the Ministry of Health team has

been providing support in the border control offices and engaged for IPC activities for COVID-19 prevention.

Normally the immigration office has a separate designated area where the passengers come, but during the emergency there is a separate area where the passengers comes, undergo screening but do not enter the actual immigration area. However, since the beginning of the emergency activities, the number of the passengers has become very limited and a separate entry area has been designated for



receiving the passengers instead of allowing them to enter into the main building. Therefore, now the immigration, customs team do not come in direct contact with the passengers, instead the Ministry of Health team conduct screening for the arrivals first. The passports are asked to be kept on the table without any direct contact with the passenger. They said that they clean only the outer side of the passport using sanitizer

in a way that does not damage the passport. Thereafter, after initial screening, their passports are taken by the immigration officers and brought inside the main building. In general, immigration officer at the time of collecting the passport use PPEs (except the boot) for protection. One of the immigration officers is assigned to go and collect the passport and that is done on a rotation basis. The passport is received by hand but they use the gloves. At the time of receiving, the passport the passenger stays far, does not come into close contact with the immigration or customs team. Usually the commander-in-chief, immigration oversees the process of receiving the passports by the immigration officers. There are 4 immigration officers working there in the border immigration office. Usually, before arrival of passenger/passengers, the team is informed and prepared with the relevant precautions.



In summary, the sequence of receiving the patient is as follows:



1. The patient comes, asked by the Ministry of health team (nurse and cleaners) to wash hands at the Handwashing stations
2. Disinfection process followed for the passengers which is aided by the nurses or the cleaners
3. The health team checks all the documents of them and fills up some forms on their behalf.
4. The immigration team and the customs team performs their part of activities after the passport has been given to them, however they wear complete PPEs (without the boot which they donot have). At the time of customs checking, the passengers open their respective bags.
5. Then the passengers are sent to the quarantine centres by ambulance.
6. Ambulance driver uses the PPEs while transporting passengers to the quarantine places. Normally, one ambulance has one driver, currently there is not rotation shift for the ambulance drivers.

#### **Scope of improvement for IPC at arrival point:**

- When the passengers arrive at the separate entry area, they must wash hands correctly. There requires to be a focal person assigned for showing them the correct practice of handwashing. And when the passengers wash hands they should be observing from a distance if done correctly.
- A quick orientation on handwashing can be done at the place before the passengers initiate the handwashing.
- Designated person/s from the health team can act as focal/s for the above activities
- Additional chairs are to be arranged for the waiting passengers and the chairs that are used by the passengers require to be disinfected regularly
- Cleaner's working frequency and schedule is to be prepared and followed

## II. IPC Orientation

Regular IPC orientation (internal orientation for border staffs to refresh the IPC awareness and practices) do not happen always, few orientations are done by the external teams. Usually the staffs are careful about the IPC and safety. There is no operational manual in place for outlining the IPC prevention and control practices. Normally they just remind each other. The staffs received an instruction from MOH on using masks. Usually staffs depend on MOH team for anything related to the IPC practices based on situational need.

### Scope of improvement for IPC Orientation

- An operational manual need to be in place for IPC implementation for border areas
- Regular IPC orientation can be organized internally and be focused on more practical ways of using the PPEs and use of the logistics. This can be linked with the orientation given by the pillar 7
- Internal IPC orientation schedule require to be prepared and the local health team can provide necessary support in those orientations

## III. Infrastructure for the arrivals



A container-made infrastructure is built for isolating the passengers who are suspected of having COVID-19. There are 2 rooms (with examination bed) 2 adjacent bathrooms for use by the suspected patients. But at present they are not used for the above. Rather, the rooms are used by the health team for keeping the logistics in cupboards. The masks and other PPEs are kept in an almirah, which they usually give to the border force whenever they ask. But there was no proper inventory on these logistics. Just a sheet is maintained. A row of well-built, new bathrooms are in place there for the general passengers, but they do not use it.

### Scope of improvement for Infrastructure for the arrivals

- Separate place to keep the IPC logistics and supplies requires to be identified.
- Inventory system requires to be established for keeping track of the IPC logistics and the supplies
- Regular requisition based on the available status of PPE and logistics are recommended
- The container-based infrastructure and bathrooms need to be used for the passengers as prepared.

#### IV. IPC logistics and supplies



The logistics and supplies come from several channels. Sometimes they are directly been distributed to the immigration staffs. In other instances, the health teams arrange the supplies and logistics for the border teams that they receive from national and municipal channel. There is no particular space to keep those supplies and logistics anywhere in the compound. In some cases, the PPEs and other logistics were found scattered on the

tables or kept here and there.

There were 4 face shields found provided from the PNTL which were unused and kept on the table. Immigration staffs said that they use those and clean after using. The immigration staffs in their stocks have quite a few boxes of masks and gloves (supplied from national level). But they do not maintain any inventory on these. Usually when they find shortage, they ask the health team to provide them the PPEs or logistics.



The handwashing facilities at the point of entry of the passengers have running water supply and adequate handwashing materials. Before moving for the health assessment they conduct the handwashing there. However, the availability of enough disinfectants was not confirmed.

#### Scope of improvement of IPC logistics and supplies

- Ensure adequate stocks of PPE, disinfectants and logistics for relevant officials/departments
- Inventory system to be developed at each point where PPE, logistics are distributed.
- Disinfectant availability are to be confirmed
- Cleaning schedule are to be prepared and followed.

#### V. Community engagement for IPC

At present, the community works in close coordination and collaboration with the police, immigration and also MOH staffs. The Chefe Sucos usually take initiative to raise awareness amongst the community. The major profession of the community is agriculture. The general people in



community are aware on the COVID-19 situation. When they come to know about an illegal entry, they contact the Chefe Alda, Chefe Suco and other relevant authorities including police, immigration, MOH. Usually 80 percent of the community follows the practice of wearing the mask and practice handwashing. Usually, the elderly people are not comfortable using masks.



Normally when the border police meet an illegal person, they are not in the complete uniform. Some of them are afraid as well at that time. The border police force carries the sanitizers and masks with them. They recommended raising the issues such as controlling the illegal persons in the high level meeting. They also said that they need more PPEs, logistics. Couple of orientations has been held already. They suggested that organizing regular workshop at the border to aware the community may prove to be very effective. They also suggest engaging a health focal point with the border police team. The immigration team realized that it is important to prevent the illegal entry and also to ensure that the covid-19 transmission is prevented during that illegal entry timing. They suggested engaging Chefe

Sucos in these efforts. They feel that the Chefe Sucos are may contribute a lot more effectively when managing the communities for building the awareness.

### Scope of improvement in community engagement

- Organize awareness orientations for the border community
- Ensure required logistics and supplies for IPC in the community
- Better coordination with the Chefe Sucos for improving the IPC practices in the community
- Health focal point can be engaged for ensure IPC practices, appropriate linkage with the CHCs/health post is recommended.

### VI. Monitoring IPC intervention

There is no as such monitoring plan to oversee the IPC practices in the border. At present a lot of areas require improvement including maintaining inventory, correct practices of handwashing, orientation and post-orientation follow up, skill observation of the cleaners, develop proper cleaning schedule etc. There was suggestion to appoint IPC focal person/s, preferably from the health team to monitoring the IPC status of the border areas. Also, at present there is no reporting template available for monitoring IPC.

### Scope of improvement for monitoring IPC intervention

- Reporting template is to be developed for monitoring
- Focal/s to be assigned for monitoring IPC activities in border areas

Photos from visit:

