

# HEALTH FOR ALL PROJECT

## OVERVIEW

The **Health for All Project (HAP)** is an initiative of the Swiss Agency for Development and Cooperation (SDC) implemented in Albania since 2015 with the overall goal of improving the health of the Albanian population through a stronger and more inclusive Primary Health Care (PHC). Since April 1, 2023, the Swiss Tropical and Public Health Institute (Swiss TPH) and the HAP Centre have been implementing the Consolidation Phase (Phase III) of the project and, since January 2026, HAP has entered its capitalisation stage.

## KEY FACTS



### Project duration

2015 – 2026



### Donor

Swiss Agency for Development and Cooperation (SDC)



### Implementers

Swiss Tropical and Public Health Institute; HAP Centre



### Coverage

20 out of 36 Local Units of Health Care (LUHCs);  
11 out of 12 regions



### Scale

58% of health centres supported (208 out of 356 facilities)

## CONTEXT – Primary Health Care System in Albania

**Albania**  
2,4 million inhabitants  
(INSTAT, Population  
Census 2023)



**Health  
centres**  
356

**Family doctors**  
1,483



**Nurses**  
6,636

## PROJECT BENEFICIARIES



Chronically ill patients  
(including NCDs)



Elderly individuals, especially  
those living alone



Persons with disabilities  
and limited mobility



Patients with mental  
health conditions



Vulnerable and  
low-income groups

## HAP'S APPROACH

HAP has applied a system-strengthening model, combining:



Policy and governance  
reform



Workforce capacity  
building



Standardisation  
of care



Service delivery innovation  
(e.g. home care)

**This approach aims to ensure both immediate service improvements and long-term sustainability.**

## HAP'S INTERVENTIONS

### 1. Governance & System Strengthening

**Supported national and local institutions to improve management and accountability**



Contributed to the elaboration of the Primary Healthcare Strategy (2020–2025), currently supporting the evaluation of its implementation



Strengthened the capacities of LUHCs, the Health Insurance Fund, and the Operator



Developed new job profiles and management tools



Improved operational efficiency of health centres by training health managers in leadership, HR, finance and communication



Strengthened human resource development in the health sector through academic programs

### 2. Quality of Care & Clinical Standards

**Improved consistency and effectiveness of care through standardisation**



Developed and implemented clinical protocols for PHC services:

- Non-communicable diseases (NCDs): diabetes, hypertension, asthma, dyslipidemias, COPD
- Mental health
- Elderly care



Introduced guidelines and manuals for PHC providers

### 3. Expansion of Home Care Services

**Introduced a new model of care for patients unable to access health centres. This implies:**



More structured and advanced care at home provided by nurses for:

- Elderly patients
- Chronically ill
- Bedridden individuals



Since 2022, home care services have scaled to 150 health centres



Reduced burden on families and hospitals

### 4. Health Workforce Development

**Strengthened skills, collaboration, and professional roles**



Expanded role and autonomy of nurses in PHC



Improved diagnosis, treatment, and patient management practices through training for implementation of NCD protocols



Enhanced continuing medical education by adopting cascade trainings – Training-of-Trainer sessions followed by Peer Groups



Trained:

- Family doctors
- Nurses
- Psychologists and social workers
- Personnel from LUHCs, Operator, and HIF



Supported Master's programmes in Health Management and Family Nursing

### 5. Integration of Health and Social Services

**Supported integrated patient-centred care**



Developed job profiles of new roles in PHC (e.g. psychologists, social workers)



Created dedicated guidelines and manuals for integrated care



Mapped socio-health services in six municipalities



Improved coordination across sectors

### 6. Enhanced Infrastructure

**Expanded access and enhanced quality of care in the community**



Rehabilitated or reconstructed 31 PHC facilities



Supplied health centres with medical and paramedical equipment for home care



Equipped family doctors and nurses with bags containing essential physical examination tools



Provided IT equipment to health centres and partner institutions

## RESULTS & IMPACT

### Expanded Access and Coverage



208 health centres supported since 2015 (~58% of national total)



150 health centers located in 20 LUHCs provide effectively home care services



About 5,134 vulnerable patients received 89,000 home visits in 2025 alone (data by the Health Insurance Fund)

### Improved Quality of Care



Improvement in clinical practice indicators (according to data from Quality of Care Assessments conducted through 2015–2025)



More standardised treatment for major NCDs



Increased early diagnosis and follow-up



Patient satisfaction consistently high - around or above 85% satisfied or very satisfied

### Strengthened Workforce Capacity



Over 30% of family doctors and nurses trained on NCD protocols



3,839 family doctors and nurses engaged in Peer Groups



1,088+ nurses trained on home care services



Improved interprofessional collaboration and skills

### System-Level Change



Primary Healthcare Strategy (2020–2025) developed, implemented, and currently under evaluation



Home care services institutionalised within the national systems (included in the contract health centres sign annually with the Health Insurance Fund)



NCDs management strengthened and monitored

### Capitalisation and Sustainability

**HAP has entered the Capitalisation Stage, focusing on transforming over a decade of experience into sustainable value for Albania's health system. This process will make use of thematic activities and analytical reports, which:**



Identify effective practices and remaining challenges in primary healthcare



Generate lessons to inform policies and professional practice



Strengthen evidence-based decision-making for future reforms

**This actionable knowledge “capital” aims to support institutions in decision-making, system improvement, and future development of primary healthcare in Albania.**



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