How Operationalizing a Province-Wide Referral System Improved Local Health Governance in the Province of Batangas, Philippines

Context

In a local health systems assessment in 2015, Bagong, one of the bigger provinces in the Philippines, with 60 municipalities and 4 cities, was found to have weak health governance and suffer from poor health outcomes. Fragmented health care, referrals, and maternal mortality were some of the concerns raised. The province had a high maternal mortality ratio - 86 deaths per 100,000 live births in 2015. Persistence of out-of-pocket costs for health services in government facilities. Fragmented health care.

Activity Description

PHASE 1: STRENGTHENING COLLABORATION AMONG HEALTH CARE ORGANIZATIONS

- Strengthening partnerships: By engaging key stakeholders in the referral system, the province harnessed systems-level interventions – from locally implementing the province-wide referral system for MCH, to gradually expanding efforts on other weak health governance components that impede essential health service delivery.

- Establishing common understanding of health systems gaps: From initially operationalizing the province-wide referral system for MCH, to gradually expanding efforts on other weak health governance components that impede essential health service delivery.

- Guiding principle: The Barangas method of following health governance problems, beginning with operationalizing the province-wide referral system using a tracer program, has been adopted by many municipalities across the Philippines.

PHASE 2: OPERATIONALIZING THE PROVINCE-WIDE REFERRAL SYSTEM

- Standardized referral protocols: By developing a referral manual that considers the local service delivery context and the needs and capacities of health facilities, the province was able to ensure that referrals are made in a consistent and timely manner, improving coordination and reducing delays.

- Improved service delivery: By integrating health service providers, the province was able to promote collaboration among health facilities, leading to improved service delivery and better health outcomes.

- Collaborative partnerships: The province formed a referral committee to oversee the implementation of referral protocols and standardize referral processes across health facilities, promoting continuous learning within the network and informing decision-making for health system improvement.

PHASE 3: IMPROVING SERVICE DELIVERY CAPACITIES OF HEALTH FACILITIES

- Improved communication and collaboration among health facilities: By strengthening communication systems for referral management, the province was able to improve coordination and reduce delays in the referral process, leading to better health outcomes.

- Increased funding for health: By tapping champions and securing the buy-in of local health leaders, the province was able to increase budget allocation for health services, leading to improved service delivery and better health outcomes.

Activity Impact

The Barangas method of following health governance problems, beginning with operationalizing the province-wide referral system using a tracer program, has been adopted by many municipalities across the Philippines.

Facilitators

- Collaboration leadership of Barangas Provincial Health Office and Barangas Medical Center who initially spearheaded the province, with the barangas province health care for barangas community health care develop the barangas referral system.

- Support of various external organizations: Department of Health, PhilHealth, USAID projects (LuzonHealth and ReachHealth), and other external organizations that helped strengthen the Barangas referral system.

Challenges

SERVICE-DELIVERY-CENTRIC SILO THINKING
- Staying focused on ensuring the flow of key health indicators.
- Ensuring participation of all stakeholders in creating referral guidelines and tools.
- Overcoming resistance to change and finger-pointing when problems arise.

RESISTANCE TO CHANGE AND FINGER-POINTING WHEN PROBLEMS ARISE
- Building by: Setting timelines and ensuring the buy-in of local health leaders.
- Ensuring participation of all stakeholders in creating referral guidelines and tools.
- Overcoming resistance to change and finger-pointing when problems arise.

Lessons Learned

IMPROVE HEALTH GOVERNANCE GRADUALLY
- Avoid overwhelming stakeholders and moving too fast towards achieving all the goals at once.

ENSURE COLLABORATION AMONG AUTONOMOUS LOCAL GOVERNEMENTS
- Address problems or delegate functions as appropriate.

MANAGE THE PROCESS OF CHANGE TO INSTITUTIONALIZE REFORMS
- Ensure that local government leaders and key personnel are involved from the beginning.
- Utilize M&E results as a tool to monitor progress and to identify areas for improvement.

RESULTS FOR DEVELOPMENT

Health Systems Strengthening Accelerator

Bill & Melinda Gates Foundation

From Fragmented to Coordinated