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Session 3 Linkages between PHC systems & communities: managerial and referral systems

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Stelio Dimande (MCSP Mozambique)

Peter Winch (Johns Hopkins University)

Session Objectives

 Understand successful community to facility referral systems and the supports needed to sustain them

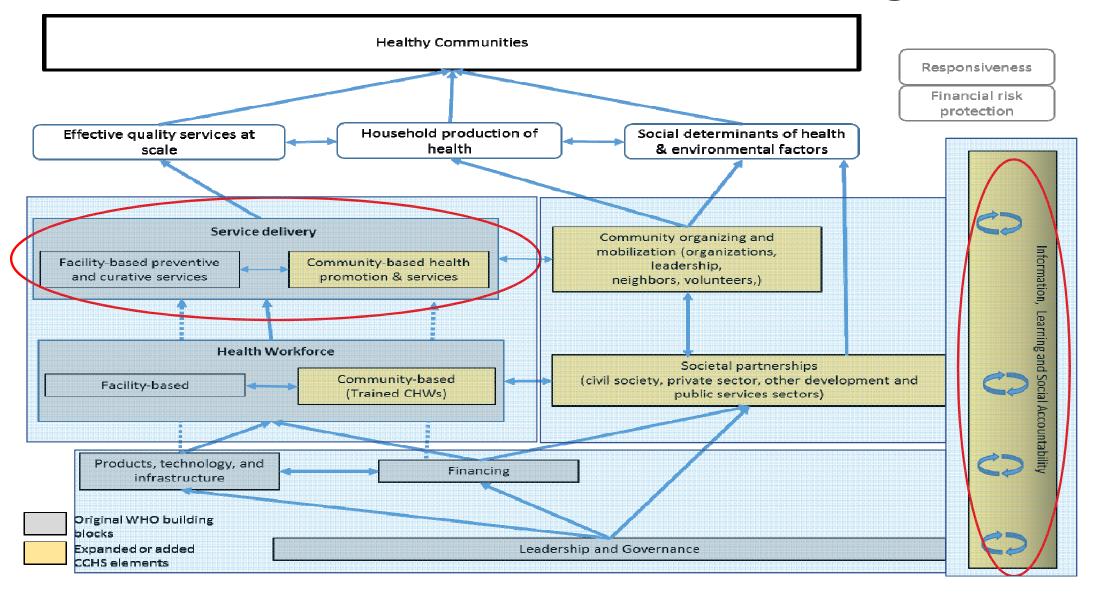
 Understand successful experiences to support CHWs and link them to facilities

 Understand successful experiences to include community voice and representation in PHC systems

Session Overview

- Research on maternal and newborn referral in Uganda Peter Waiswa, Makarere University
- Pilot of a community referral & counter-referral system in Liberia Mallika Raghavan, Last Mile Health
- Strengthening referral systems in rural Mozambique Stelio Dimande, MCSP Mozambique
- What are best practices in building systems to address broader needs? Peter Winch, Johns Hopkins University

Broader context for effective linkages



Determinants of Successful Referral

- Proximity of referral facility / No difficulty with transport
- Quality of referral messaging by CHW
- Using a written referral slip
- Taking account of need for permission from others (e.g., father and/or elders)
- Perception of quality and respectful care at referral facilities
- No cultural/linguist difference between client and provider at referral facility
- Personally knowing the provider at the referral facility

A paradigm for solid linkages?

Facilitated referral

- CHW counsels client on reason for referral
- Fills out a referral slip
- Records referral in register; tracks in HIS; and receives counterreferral information
- Inquires about and addresses a barrier (money, transport, need for accompaniment)

Characteristics of facilitated referral might inform us about the characteristics of good linkages in other areas

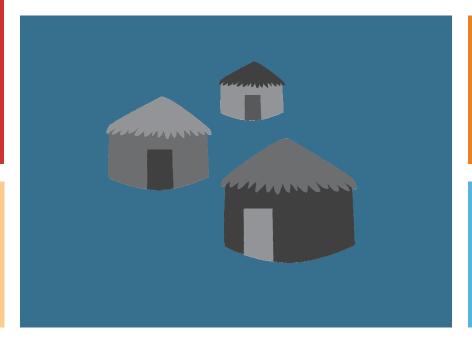








Institutionalizing







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