

# Strengthening the Monitoring and Evaluation of Referral Systems

## BACKGROUND

As one of the key programs at MEASURE Evaluation PIMA (MEval-PIMA), referral systems strengthening (RSS) focuses on strengthening the health referral system in Kenya to ensure continuity and cost-effectiveness of care. MEval-PIMA works with health sector stakeholders to create strategies that address gaps within the referral system in Kenya.



MEASURE Evaluation

The Kenyan health care system is hierarchical. There are six levels of care, starting at the community level, to primary care facilities that include dispensaries and health centers, to county facilities, which include level 4 and level 5 facilities, to the highest level of care, which includes tertiary facilities that offer highly specialized care. Despite the hierarchical health care system, for many years there were no policy documents or guidelines to monitor and guide the referral processes among the various levels of care.

This contributed to gaps in the referral system including, but not limited to:

- patients bypassing lower-level facilities
- lack of accountability by health care providers for their referral decisions
- inappropriate referrals
- overcrowding at higher-level facilities
- lack of coordination in the referral process

These gaps contribute to inequity in access to care, leading to delays in people being able to access appropriate levels of care and consequent poor health outcomes.

The RSS program aims to address these gaps within the health referral system by working with the national and county governments and other health stakeholders. A well-functioning referral system contributes to rational use of health services, improved continuity of care for patients, cost-effectiveness in health care provision, improved access and equity in access to care, and improved health outcomes.

## KEY ACTIVITIES AND SUCCESSES

In collaboration with key partners at the Ministry of Health (MOH), MEval-PIMA conducted a baseline survey across eight counties to analyze some of the problems facing referral systems in Kenya. Following that, we developed county-level action plans to strengthen the referral system and address identified gaps.

In collaboration with the MOH and other relevant stakeholders, we supported the finalization of a national referral strategy and the development of referral guidelines and tools that were launched in July 2014. These RSS guidelines are meant to guide how the referral system operates within facilities, between facilities, and between communities and facilities. The referral strategy and guidelines also guide the implementation, management, and performance appraisal of the referral system nationally and within the counties.

The project also supports the MOH in the training of health workers on the referral strategy and guidelines. MEASURE Evaluation PIMA is involved in the development and finalization of a standard orientation package to train health workers in targeted counties on appropriate referral practices, management, and performance monitoring of the referral system. This training focuses on appropriate referral processes, promoting referral linkages, and referral performance monitoring through collection, analysis, and use of referral data.

In addition, MEASURE Evaluation PIMA is supporting selected county health departments to promote referral linkages and collaboration through referral stakeholder forums and referral networks analysis. The referral forums provide avenues for collaboration, referral data sharing and use, and discussion of challenges affecting the given county's referral system.

The project supports counties in developing referral service directories to inform health workers and clients on the availability of services within a referral network.

A referral directory of services facilitates referrals by making information on the availability of services within a geographical area accessible to all.

Collectively, the RSS guidelines create proper linkages between health institutions on different levels at both county and national levels, improving the capacity of health workers to jointly provide high standards of quality medical care for better health outcomes.

## KEY PARTNERS

To strengthen the health referral system in Kenya, MEASURE Evaluation PIMA works with the following stakeholders:

The **Ministry of Health**, with a special focus on key divisions, including Referral and Ambulance Services Unit, National AIDS and STI Control Program (NASCO), Health Information Systems Unit and Community Health Services Unit.

**County governments**, starting with the political arms, including the Executive Committee, the County Assembly Health Committee, and health workers.

**International and local organizations** such as the World Health Organization and the U.S. Centers for Disease Control and Prevention (CDC).

**For more information**, see:  
[www.measureevaluation.org](http://www.measureevaluation.org) or  
<http://www.cpc.unc.edu/measure/countries/kenya>

