

RECOMMENDATIONS

District/City has to govern an integrated and comprehensive referral system, involving the public and private health facilities in order to improve the effectivity and efficiency of the maternal and neonatal emergency referral.

WHY IS THIS IMPORTANT?

Without the availability of appropriate and functional referral system, the treatment for maternal and neonatal emergency cases are often late. The establishment of a formal and actively well-managed integrated and comprehensive referral system ensures the utilization of emergency service facilities in a district/city. Besides, it could also improve the collaboration and communication between public and private health facilities.



HOW DOES THIS SUPPORT THE MINISTRY OF HEALTH POLICIES?

Support the implementation of efficient and effective emergency referral system for maternal and neonatal in or between districts/cities

Support the implementation of integrated/collaborated primary service and referral, as well as related institution

Support the private public partnership in the referral network

Improve the technical medical capacity as well as programs in the referral network

Strengthen the availability of data and information, as well as performance in the referral network

Support the supply of blood

Support the availability of health insurance

WHAT DOES EMAS DO?

Facilitating the implementation of the referral network, which includes all maternal and neonatal emergency health service providers by identifying and governing at least 7 criteria (operating mechanism for referral, mapping of referral flow, data flow and mandatory audit, authority and function of each health service providers, facilities, institutions (BPJS/PMI/Red Cross, etc), communication mechanism, funding mechanism and assistance mechanism)



The referral system outlined in an MOU and signed by all relevant stakeholders and witnessed by the Regent/Mayor.

The function of the referral system will be supervised by the cross-program and cross-sectoral Working Group (POKJA) by using referral performance standards, clinical, society, in order to be improved based on the arising problems and agreed solutions.

DATA AND LESSONS LEARNT

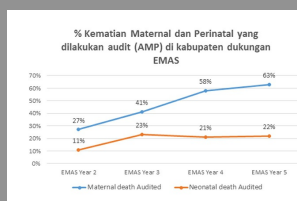
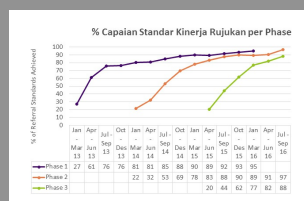
1.961 facilities

(511 public and private hospital and 1,450 puskesmas)

37.197 health workers

are in the network of referral system in 30 districts/cities

100% of EMAS districts signed the MOU



EMAS TOOL

Technical Guidelines "Facilitation of MOU between Facility"