

**Research Article**



## Analysis of Health Center Referral Ratio Based on Health Center Service Capability at the Meureubo Health Center, West Aceh Regency

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**Abstract:** Public health center serves as a *gatekeeper* in Health services. Meureubo Health Center has a high patient referral rate reached 27% in 2020 to March 2021. This study aims to analyze the referral ratio puskesmas based on the ability of puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021. This type of research uses a qualitative approach. There were 8 informants in this study. The data analysis technique uses the flow of data reduction, data presentation and data verification and drawing conclusions. The results showed that the referral clinic of the Meureubo Health Center in carrying out anamnesis, physical investigations and medical supporting examinations chose the main assessment and comparative assessment with provide pre-referral action according to the case, determine the service unit for referral purposes, then emergency patients must be accompanied by medical officers from the Puskesmas until the patient receives services at the intended health facility. The puskesmas referral administrative norm based on the ability of puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021 is carried out after the patient is given pre-referral action, produces patient medical records, provides *informed consent* (approval/rejection of referrals), forms patient referral letters, prepares transportation vehicles and wherever possible may establish communication with the referral as well as the submission of patients must be done after the completion of the administration concerned. It is recommended that the Meureubo Health Center can provide socialization to the people about the BPJS/JKN program, especially regarding the tiered referral system and regarding *gatekeepers*, as a result, patients can understand the referral procedure used there is.

**Keywords:** Ratio, Referral, Service, Health-Center

### Introduction

Regulation of the Minister of Health of the Republic of Indonesia Number 75 of 2014 concerning public health centers (Puskesmas) are health service facilities that carry out public health efforts and first-level individual health efforts, prioritizing promotive and preventive efforts, in order to achieve the highest health status of citizens. in their working area (Khairun, 2016).

The health efforts were carried out using an

emphasis on services for the wider community in order to achieve optimal health status without neglecting the quality of service to individuals (Latifah, 2015).

Gatekeeper is a concept of a health service system where first-level health facilities can optimize the health care system in sync using their competency standards in carrying out referrals, puskesmas have not carried out the benefits of being

gatekeepers optimally, this can be seen from the high number of national non-specialist case referrals in 2019 as many as 1.54 million came from 11.9 million cases referred or as much as 12.9%.

If further services are required by specialist doctors, BPJS health participants can be referred to a second level health facility or a secondary level health facility. This referral is only given if the participant BPJS. Health requires specialist health services, or if the primary health facility appointed to serve the participants, cannot provide health services due to limited facilities, services, or medical personnel. If the participant is still unable to be treated at a second-level health facility or a secondary-level health facility, then they can be referred to a tertiary-level health facility or a third-level health facility to be treated by a sub-specialist doctor who uses sub-specialist health knowledge and technology (Umami, 2017). To increase access to advanced health services, BPJS implements a medical referral system of health services, namely the implementation of health services that regulate the delegation of tasks and responsibility for reciprocal health services both vertically and horizontally that must be carried out by participants of health insurance or social health insurance and all facilities health

Referral system organized using the aim of delivering quality, effective and efficient health services, so that the objectives of health services are achieved without using high cost. Puskesmas is one of the choices of residents who are most in demand by the people in seeking health services due to sufficient access available, simple and affordable, especially in West Aceh district. As a result, this limitation causes the Puskesmas to make referrals to Advanced Health Facilities (FKTL) or equivalent health facilities but have better capabilities than their own. Meureubo Health Center has a high level of accum of patients, the number of referrals for BPJS participants is an average of 27% per month in 2021.

The high number of patient referrals shares that the Puskesmas has not been able to carry out their health services optimally to become the gatekeeper of health services in the people. The high number of referrals is an indication that the referral system at the Puskesmas has not been implemented properly, so it is important to

conduct a study on the implementation of the medical referral system by comparing it with the referral system guidelines from the Regulation of the Minister of Health of the Republic of Indonesia number 1 of 2012 and the guidelines for the National Referral System. (Latifah, 2015).

Based on the foregoing, the authors are interested in conducting scientific research on " **Analysis of the Health Center Referral Ratio Based on Service Capability at the Meureubo Health Center, West Aceh Regency Year 2021**".

### Research Methods

This type of research is a research that uses a qualitative approach method that aims to clearly and more deeply understand the analysis of the ratio of Puskesmas referrals based on the ability of Puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021. The informants in this study consisted of the head of the Meureubo Health Center, the General Head of Health Services, the head of the referral Health Service, and BPJS participants. Data analysis used a qualitative descriptive method, where the discussion of the research and the results were described in terms based on the reality data obtained

### Research Result

#### 1. Clinical Procedures for Referrals to Health Centers Based on Service Capability at Meureubo Health Center, West Aceh Regency in 2021

The outpatient referral application means the delegation of tasks by the Puskesmas to an advanced level due to the inability of the Puskesmas to handle patients. Referrals are carried out in stages. According to Permenkes number 001 of 2012 concerning a tiered referral system, patients are not entitled to ask for a referral but must be based on a disease diagnosis or medical indication from the examining doctor, according to the Minister of Health regarding the referral system if the referral is not appropriate sign medical treatment and still having at 155 diagnoses means the hospital will refuse the patient. The Meureubo Health Center has been able and trying to carry out the duties of the Puskesmas as the First Level Health Facility for FKTP. However, from the officers at the Meureubo Health Center, there were many patients who did not understand the function of

the puskesmas, and only went to the puskesmas to take them reference.

## 2. Public Health Center Referral Administrative Procedures Based on Service Capability at Meureubo Health Center, West Aceh Regency in 2021

Puskesmas is a health service facility that works as a technical implementing unit for the district or city health service that is responsible for carry out health development in the work area. referrals must receive approval from patients and or their families, and authorized health workers are required to provide information to patients about the assessment and therapy or medical actions needed by the patient, the reason and purpose of the referral, the risks that may arise if the referral is not made, transportation of referrals, and the risks or complications that may arise during travel.

Administrative mechanism for the referral of puskesmas based on the ability of puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021 is the medical referral patient registration process starting from the registration stage to receptionist, examine the patient, and then make a destination.

### Discussion

#### A. Clinical Procedures for Referral to Health Centers Based on Service Capability of Puskesmas at Meureubo Health Center, Aceh Barat District in 2021

The clinical mechanism for puskesmas referrals based on the ability of puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021 is based on the origin of the Minister of Health Number 001 of 2012 regarding the tiered referral system. The officers at the Meureubo Health Center try to treat the patient, but if the puskesmas cannot handle the patient due to the limitations of the puskesmas, both in terms of equipment and medicines, the puskesmas will refer to the place of residence sick.

The referral system based on the Regulation of the Minister of Health No. 001 of 2012 is the implementation of health services which regulates the delegation of tasks and responsibilities of reciprocal health services both vertically and horizontally. Based on the results of interviews using two primary informants, namely the Head

of Health Services and the Head of Health Services Medical referral, the doctor carried out a procedure that started from the patient's history, did a physical diagnostic examination, then planned to treat or refer. The doctor's consideration in referring is if: after

The investigation of the disease could not be handled at the puskesmas, so the patient was referred.

Based on the informant's statement the doctor also conveyed a referral if the patient did not recover on 3 treatments. The terms refer to according to the Ministry of Health of the Republic of Indonesia in 2012 that is:

1. As a result of the investigation, it is certain that it cannot be completely resolved at the service facility health.
2. As a result of the physical examination using medical supporting investigations, it turned out that the patient could not be treated completely or could not be served due to limited competence or limited infrastructure.
3. The patient requires a more complete medical investigation and the investigation must be accompanied by the patient concerned.
4. If the patient has been treated at the puskesmas, it turns out that he still needs investigation, treatment and or treatment at a referral facility that is more capable of solving health problems.

This is inversely proportional to the results of research by Parman (2017), and Lisnawaty (2016), that the Perumnas Public Health Center has understood the function of gatekeepers as referrals. Puskesmas as gatekeepers serve as the patient's first contact, referral screen and control qualitative well as port. The Puskesmas has four main functions as gatekeepers, namely:

1. First-level health facilities are the first areas that participants visit whenever they have a health problem.
2. The correlation of first-level health facilities with participants can take place on an ongoing basis as a result of which disease management can run optimal.
3. First-rate health facilities provide comprehensive services, especially for promotive and preventive.

4. First-level health facilities coordinate services with other health providers in delivering health services to participants according to their needs. *Gatekeeper Concept* BPJS Health.

#### **B. Administrative Procedures for Referral to Health Centers Based on Service Capability of the Health Center at the Meureubo Health Center, Aceh Barat District in 2021**

The administrative procedure for a puskesmas referral based on the ability of puskesmas services at the Meureubo Health Center, West Aceh Regency in 2021 is the process of registering a referral patient starting from the registration stage to the receptionist, examining the patient, and then making an appointment. The patient is referred based on the doctor's consideration and the request from the patient. The reason for the patient to go to the Meureubo Health Center is because the Puskesmas Meureubo close to the informant's house, the nearest health facility referred by BPJS, and does not issue cost.

The obstacle to the health service process at the Meureubo health center is the internet network, because the Pcare application is used for registration for treatment. Furthermore, there are services from health workers who still do not satisfy patients and the next obstacle is the lack of health facilities in the Puskesmas Meureubo.

In accordance with the results of the study, patients from the Meureubo Health Center were referred if they had been treated three or three times by the puskesmas but did not improve, but if they were still able to be handled, the puskesmas would handle them completely.

According to Ratnasari (2017), the analysis of the implementation of the referral system at Puskesmas X Surabaya City based on the National Referral System guidelines was obtained as a result that the requirements for referring patients to Puskesmas X Surabaya City had met the conditions for referring patients in sync with the guidelines for the National Referral System, namely clinical mechanisms and administrative mechanisms.

However, there are things that do not meet the requirements, where the patient who is given a referral should come personally to the puskesmas to be examined and the patient's medical requirements are known by the puskesmas doctor before the medical referral is carried out, but only

the patient's family comes. From the statement of the head of the puskesmas, the patient has no right to ask for a referral from the head of the doctor because only a doctor can declare a patient to be referred, if there is no sign then it is not allowed to refer. medical cases that can be referred as well as medical cases which are the competence of the FKTP must be completed completely in the FKTP.

Meanwhile, in practice, according to several informants, there are still many patients who ask doctors to be referred. If this happens, the doctor tries to explain to the patient that the disease can still be treated at the puskesmas. However, there are still many patients who do not accept it and strongly demand that doctors give medical referral, especially for BPJS participants who pay dues because they feel they have the right to be referred.

The reasons for the patient being referred for better treatment at the hospital, and the drugs available at the puskesmas are not as good and complete as where the hospital is. Based on the results of Ali's research (2015), the reason the patient asked to be referred to the hospital was because the patient was more satisfied when treated by an expert doctor and was not satisfied with using the lack of supporting equipment and medicines available at the puskesmas, so they decided to be referred to a more advanced facility good. Closing Conclusion

1. Referral clinic procedures based on service capability of the Puskesmas in Meureubo Health Center, West Aceh Regency in 2021 is based on the Minister of Health Regulation Number 001 of 2012 concerning a tiered referral system. The referral clinical procedure for the Meureubo Health Center is by taking anamnesis, physical examination and medical support to determine the main diagnosis and differential diagnosis. Providing pre-referral measures according to the case, deciding the service unit for the referral destination, then for emergency patients must be accompanied by medical officers from the Puskesmas until the patient gets service at a health facility that aimed.
2. The administrative procedure for the referral of puskesmas based on the ability of the puskesmas service Health Center, Aceh Barat Regency in 2021, is carried out after the

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**Current Opinion**


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patient is given pre-referral action, makes patient medical records, gives informed consent for rejection of referrals, makes patient referral letters, prepares transportation facilities and as much as possible establishes communication with the referral place. and next delivery patient should be carried out after completion of the administration concerned.

**Suggestion**

1. It is hoped that the puskesmas can provide socialization to the public about the BPJS JKN program, especially about the tiered referral system and about *gatekeepers*, so that patients can understand the referral procedure used. there is.
2. It is hoped that the Head of the Puskesmas can propose the completeness of the facilities that are still lacking at the Meureubo Health Center, such as otoscopes, ear examination tools, dental scaling tools, and examination tools. eye.

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