

Evaluation of Referral System Barriers at Dr. Pirngadi Hospital, Medan City: Qualitative Study of In-depth Interviews

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ABSTRACT

The referral system plays an important role in ensuring the continuity of health services, especially in advanced referral hospitals such as RSUD dr. Pirngadi Medan City. However, its implementation still faces various obstacles, ranging from coordination between health facilities, limited facilities, to administrative issues. The purpose of this study was to analyze the obstacles in the implementation of the referral system at RSUD dr. Pirngadi Medan City and evaluate its impact on the effectiveness and quality of health services. The study used a qualitative approach with a case study method and in-depth interview techniques with key informants, consisting of specialist doctors, nurses, and administrative officers. Data were analyzed thematically using the Braun & Clarke method (2021). The results of the study showed that internal hospital coordination was effective, but obstacles still emerged when making external referrals to other hospitals, especially related to slow responses and bed availability. Several units at RS Pirngadi also experienced limited medical personnel and equipment. However, administrative procedures were considered not to be a significant obstacle because they were supported by an electronic medical record system and BPJS/UHC policies. It was found that there were obstacles in the referral system at RSUD dr. Pirngadi Medan generally came from external factors and certain resource limitations. Strengthening external coordination, provision of facilities, and optimization of information systems are needed to increase the effectiveness of referrals.

Keywords: Referral System, Hospital, Barriers, Coordination, Healthcare Services, Qualitative Study

INTRODUCTION

The health referral system is an integral part of the provision of effective and efficient health services, designed to ensure that patients receive care that is appropriate to their medical needs. In Indonesia, the referral system is one of the important elements in implementing the National Health Insurance Program. Regional General Hospitals (RSUD), such as Dr. Pirngadi Hospital in Medan City, play an important role in this referral system, by acting as type B hospitals that accept patients from first-level health facilities (community health centers) and other hospitals. The implementation of the referral system at Dr. Pirngadi Hospital, Medan City is not free from various obstacles and constraints. Based on data from the Medan City Health Office (2023), there was a significant increase in the number of patients referred to Dr. Pirngadi Hospital, but in practice, the existing referral system still faces various problems. Data shows that around 40% of patients referred from health centers experience delays in receiving services due to various factors, such as limited hospital

capacity, obstacles in administrative procedures, and ineffective coordination between health centers and hospitals.

Coordination issues between health facilities are one of the main obstacles to an effective referral system. Based on the results of a previous study by Siregar et al. (2023), it was found that poor communication between health centers and hospitals often results in incomplete medical information for referred patients. This causes delays in medical treatment and sometimes affects the quality of patient care.

Administrative procedure factors also often slow down the referral system. Data obtained from interviews with hospital staff showed that long and complicated administrative processes often cause delays in the process of accepting referral patients, especially in terms of document management and medical records. In addition, there are also problems related to patient accessibility, where most referred patients come from areas far from the hospital and experience difficulties in terms of transportation and costs.

In line with the data and findings, this study aims to analyze the obstacles in the referral system that occurs at Dr. Pirngadi Hospital, Medan City. With a qualitative approach through in-depth interviews, this study will dig deeper into the factors that influence the implementation of the referral system, including coordination between health facilities, limited medical facilities, administrative obstacles, and patient accessibility. It is hoped that this study can provide a clearer picture of the obstacles in the referral system and provide useful recommendations for improving the referral system at Dr. Pirngadi Hospital, so that it can improve the quality of health services for the people of Medan City.

This study is important because Dr. Pirngadi Hospital has a very strategic role in handling referral patients from various areas in Medan City and its surroundings. By identifying barriers in the referral system, it is hoped that this hospital can improve the effectiveness and efficiency of health services, thereby reducing patient waiting times and improving the quality of care received by referred patients.

METHODS

Evaluation of Referral System Barriers at Dr. Pirngadi Hospital in Medan City uses a qualitative approach with the aim of understanding the phenomena that occur in the referral system at Dr. Pirngadi Hospital in Medan City in depth. In this study, the researcher used a case study with an exploratory descriptive research design. This design allows researchers to collect in-depth information about the barriers that exist in the referral system at Dr. Pirngadi Hospital through in-depth interviews with relevant informants. This study will explain the existing problems and explore more deeply the factors that cause these barriers, as well as how they affect the quality of health services at the hospital.

The data collection method in this study uses in-depth interviews, which allow researchers to dig deeper into information about the obstacles in the referral system at Dr. Pirngadi Hospital. This in-depth interview will be conducted using a semi-structured interview guide, where researchers have a list of questions that have been prepared, but still provide space for informants to explain further according to their experiences. This interview will be conducted face-to-face with the selected informants. Each interview is estimated to last for 30 to 60 minutes, depending on the depth of the informant's answers. This interview will be recorded with the informant's permission, then a transcript of the interview will be made to facilitate data analysis. Researchers collected data using the Historical comparative research instrument. Primary data collection was done by observation 14 and in-depth interviews related to the obstacles in the referral system at Dr. Pirngadi Hospital, Medan City.

Meanwhile, secondary data collection used instruments including; namely data sources from related literature to support research results. Data obtained from in-depth interviews and observations were analyzed using thematic analysis introduced by Braun and Clarke (2021). The analysis stage includes data coding, identification of main themes, and interpretation of findings based on research objectives.

In conducting the validity and analysis of this research data, the researcher conducted several examination methods. This is stated as the value of validity and data analysis. The validity value is carried out using triangulation, where this triangulation is carried out by using more than one data collection method, namely interviews and observations. Meanwhile, data analysis is carried out using data obtained from interviews and observations analyzed using thematic analysis introduced by Braun and Clarke (2021). The analysis stage includes data coding, identification of main themes, and interpretation of findings based on research objectives.

RESULTS

This study applied thematic analysis (Braun & Clarke, 2021) and identified eight major themes from the interview and observational data. These themes reflect key barriers and facilitators in the hospital referral system at RSUD Dr. Pirngadi Medan.

1. Effective Internal Coordination

Participants reported that communication among medical staff within the hospital was well-established, especially in managing incoming referral patients. Informants P1 and P2 emphasized that support from hospital management ensured a swift response in most cases.

2. Communication Barriers with External Institutions

Delays were often encountered when coordinating referrals to other hospitals. Informants described difficulties in obtaining timely responses and securing bed availability in destination hospitals, leading to delayed patient care.

3. Patient Safety Measures

Medical referrals from other hospitals generally came with complete medical documentation, allowing for appropriate triage and treatment. This indicates that safety protocols related to referral information were largely followed.

4. Accessibility and Affordability

All informants agreed that BPJS and TUSOR programs significantly improved patient access to referral services, reducing financial and logistical barriers.

5. Limited Facilities and Human Resources

Several departments at RSUD Dr. Pirngadi reported lacking essential medical equipment and specialists, especially in high-demand units like KGEH. These limitations hindered the hospital's ability to accept or refer complex cases effectively.

6. Administrative Procedures

While hospital staff believed the administrative process functioned smoothly, administrative informants noted challenges such as referral mismatches and incomplete documents from primary health centers, requiring follow-up clarification.

7. Medical Records and Technology Integration

The implementation of electronic medical records (EMR) helped streamline referral processes and improved inter-departmental data sharing. Informants reported minimal issues related to patient information access.

8. Policy and Insurance Support

National health insurance policies like BPJS and UHC were acknowledged as key enablers of a functional referral system, particularly in supporting patient costs and simplifying inter-facility coordination.

DISCUSSION

This study aimed to explore the effectiveness and challenges of the hospital referral system at RSUD Dr. Pirngadi Medan from the perspectives of healthcare professionals. The research contributes to the understanding of referral dynamics in a regional public hospital, particularly in the context of universal health coverage implementation in Indonesia.

The findings indicate that internal coordination within RSUD Dr. Pirngadi is functioning effectively. Health workers reported smooth communication, consistent documentation, and rapid response mechanisms, which support safe and timely patient management. These results are consistent with previous studies that emphasize the role of internal coordination in improving patient outcomes and service efficiency (Wulandari et al., 2022; Suharti & Andayani, 2023).

However, significant challenges persist in external referral processes. Barriers such as delays in receiving confirmation from other hospitals, limited availability of specialists, and mismatches between referral requirements and hospital resources were frequently reported. These issues align with studies conducted by Prasetyo et al. (2021) and Mahardika & Sulistiyowati (2020), which highlight systemic bottlenecks in Indonesia's multi-tiered referral system.

An unexpected finding was the presence of incomplete referral documents from primary health facilities, despite the availability of standard operating procedures. This suggests a potential gap in training or oversight in lower-level healthcare institutions. Managerially, the study emphasizes the need for stronger inter-facility communication protocols and investment in both human resources and medical infrastructure to ensure referral effectiveness. Optimizing the digital referral system (e.g., through SISRUITE integration) and strengthening feedback loops between primary and secondary care providers may help mitigate existing barriers.

The study's limitations include its single-institution focus and reliance on qualitative data, which may limit generalizability. Nevertheless, the in-depth insights gained offer a valuable basis for further investigation. Future research should include comparative studies across multiple hospitals and incorporate quantitative assessments to evaluate referral efficiency metrics. Exploring patient perspectives on the referral experience could also provide a more comprehensive understanding of service delivery quality.

CONCLUSION

The referral system at Dr. Pirngadi Medan Regional Hospital shows quite good implementation, especially in terms of receiving referral patients, internal coordination between medical personnel, and efficient administrative support. The use of technology such as electronic medical records and online queuing systems also facilitates services. In addition, the administration also shows a quick response in addressing referral constraints, such as polyclinic incompatibility. However, there are several obstacles that still need to be fixed, including late confirmation from the referral hospital, limited facilities and medical equipment in certain units such as KGEH, and repeated referral cases that do not match the

patient's clinical needs. These obstacles can affect the effectiveness of handling and slow down the service process for referred patients.

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