

# Inter-Agency Referral Analysis



Report covering January - March 2021 (Q1 2021)  
Health

This analysis provides an overview of referral trends across all sectors, and in such a way informing the understanding of people's needs in order to strengthen the humanitarian response in Lebanon. The Inter-Agency Referral Analysis is designed to foster greater efficiency of referral pathways and contains recommendations for improved coordination and access to services for vulnerable communities. It guides sectors in the identification of any gaps and blockages in the response, and contributes to the discussion on how to respond to the affected populations, as well as how people's needs are changing with the current context.

This dashboard presents data compiled from two data sources: Inter-Agency Referral Monitoring System (developed by the Inter-Agency Coordination) and Referral Information Management System (RIMS, developed by the Danish Refugee Council). It is a product of collaboration of partners in the field, the Danish Refugee Council, UNHCR and the Inter-Agency Coordination.

Total number of Referrals to All Sectors

31,392

Total number of Referrals to Health

3,883 (12% of total)

## Results Analysis

The volume of referrals to health services decreased by 7% in Q1, yet, it still constituted around the same proportion of the overall number of referrals to all services (12%). Governorates with the highest volumes of health referrals included North (27%), Akkar (24%) and Mt Lebanon (21%).

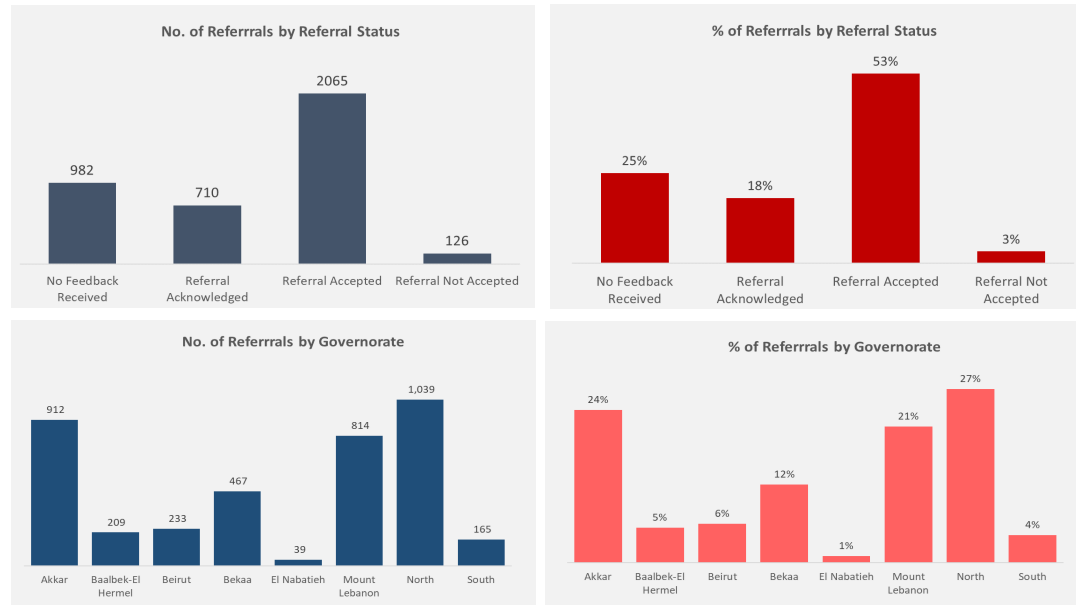
While the proportion of health referrals not receiving any kind of feedback increased in Q1 (25%, up from 14% in Q4), the rate of referrals accepted has improved, reaching 53% in Q1 (up from 43% in Q4). Governorates with the highest health referral volumes also had some of the highest acceptance rates, including Akkar (76% accepted) and North (53% accepted). Improvement in acceptance rates was also registered in Beirut (46%, up from 17%).

Referrals for health services were made from a variety of sector partners, including Protection, Child Protection, Education, SGBV and Livelihoods, in line with Q4. While most health referrals were for Syrians, referrals for vulnerable Lebanese were also made, in Beirut constituting over a half of referrals. In terms of age profiles, while most health referrals were for adults, a significant proportion was also created for children (0-17), and elderly beneficiaries (60+) were also included. There was no discernible pattern among the male-to-female ratios of referrals across regions.

In terms of response speeds, around two thirds of referrals were acknowledged within the timeframes stipulated by the Minimum Standards (48h for regular- and 24h for fast track referrals), marking a positive trend. In terms of the time needed to close a referral, around two thirds of health referrals were closed within the stipulated timeframes (14 days for regular- and 24h for fast track referrals), with delays being experienced in Mt Lebanon and the South.

## IA Referrals:

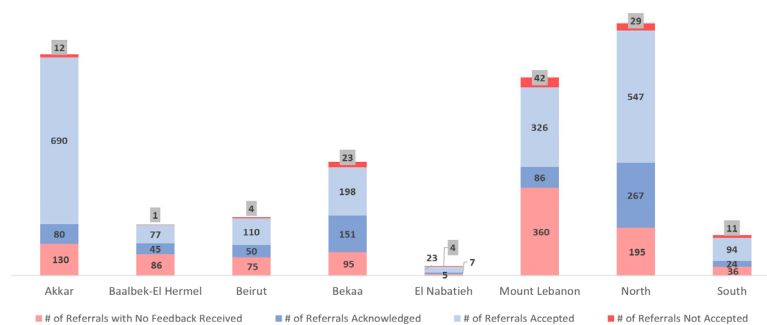
### Overall Response to Referrals to Health



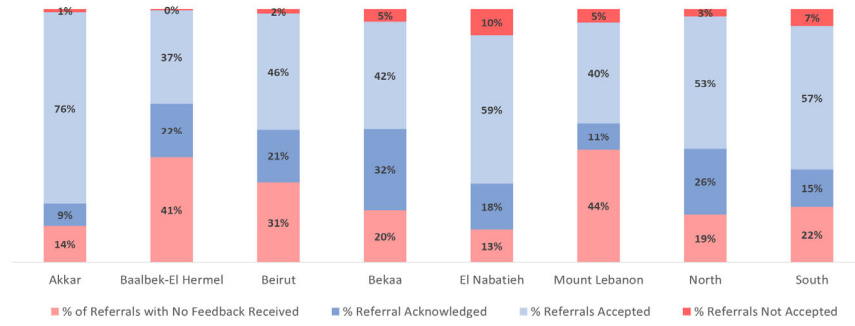
## IA Referrals:

### Response Rate to Referrals to Health by Governorate

#### No. of Referrals according to Status Category per Governorate

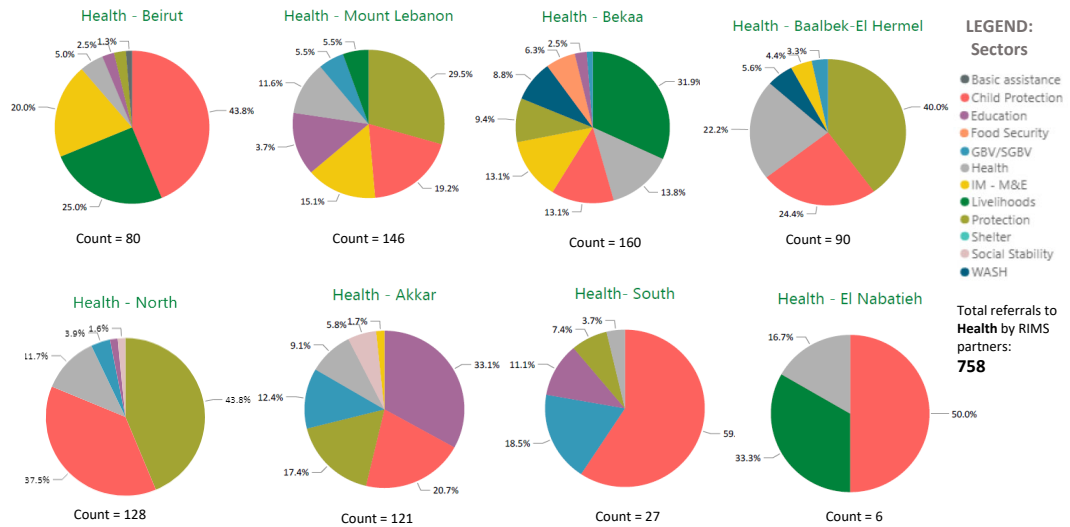


% of Referrals According to Status Category per Governorate

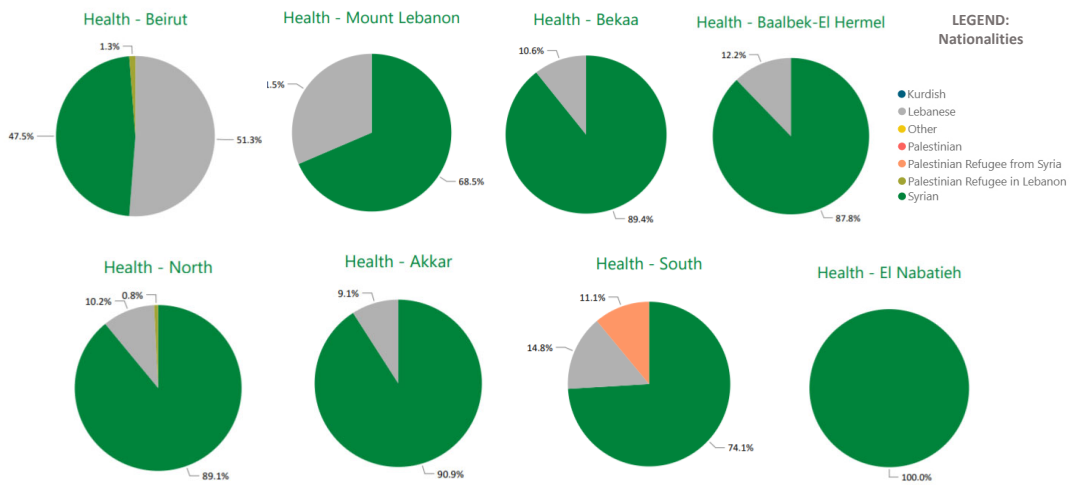


Partners who reported (IA Referrals): ABAAD, ACF, ACTED, Al-Fayhaa, Ana Aqra, AND, AVSI, Borderless NGO, Caritas Lebanon, DRC, GVC, Humedica, IMC, INARA, Intersos, IOCC Lebanon, IRC, Kafa, Magna Lebanon, MEDAIR, Mercy Corps, NEF, NRC, Nusaned, ODA, PCPM, Plan International, PU-AMI, Red Oak, RESTART Lebanon, RET Liban, RI, RMF, SAFADI, SCI, SHEILD, SIF, Solidarités, TdH-It, TdH-L, WCH, WRF, WVI

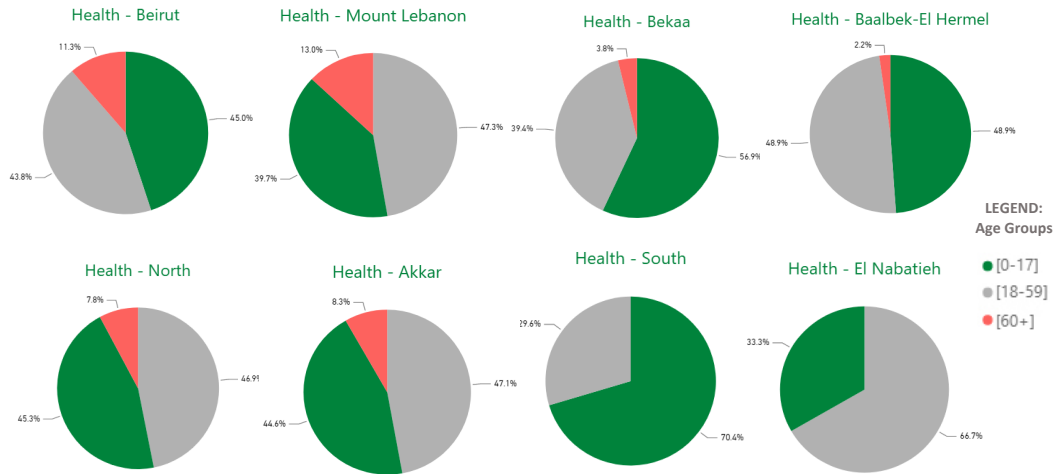
RIMS data: Percentage and Number of Referrals to Health by Sector and Governorate



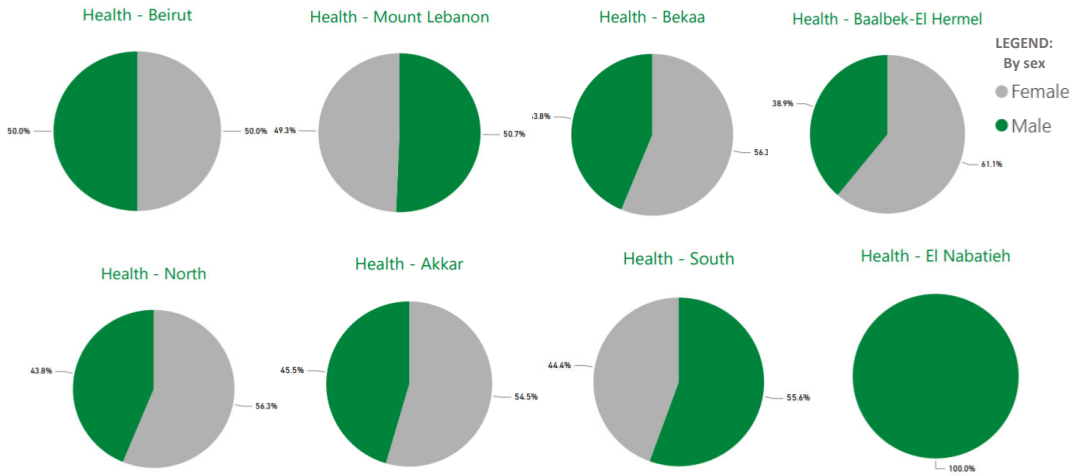
RIMS data: Percentage of Referrals to Health by Nationality and Governorate



RIMS data:  
Percentage of Referrals to Health by Age Group and by Governorate



RIMS data:  
Percentage of Referrals to Health by Sex and by Governorate

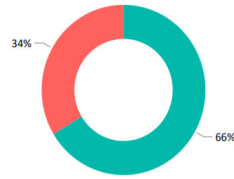


RIMS data:  
Speed of Referrals to Health by Governorate

Speed of Health referrals in Beirut



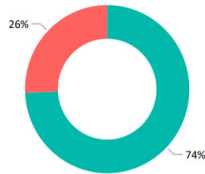
Speed of Health referrals in Mount Lebanon



Speed Categories  
● On Time  
● Not On Time

**Speed** refers to the time that it takes for the receiving agency or internal focal point to acknowledge receipt of the referral. It is measured by the number of days from when the referral was sent, to when it was received by the receiving agency or internal focal point. Referrals considered on time are referrals responded to within 24 hours for fast track referrals and 48 hours for normal referrals as per the Referrals Minimum Standards.

Speed of Health referrals in Bekaa



Speed of Health referrals in North



Speed of Health referrals in South

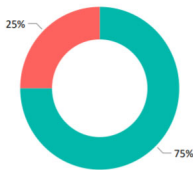


Speed of Health referrals in El Nabatieh

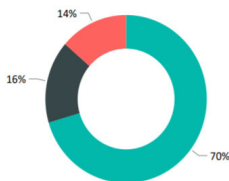


RIMS data:  
Timeliness of Referrals to Health by Governorate

Timeliness of Health referrals in Beirut



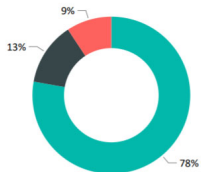
Timeliness of Health referrals in Mount Lebanon



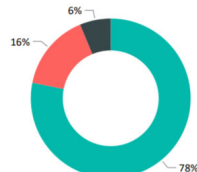
Timeliness Categories  
● 0 to 14 days  
● 15 to 30 days  
● 30+ days

**Timeliness** refers to the total time that it takes to complete the referral process. It is measured by the number of days from when the referral was sent, to when it received a final status (Accepted/Not Accepted). Referrals considered on time are referrals receiving a last status within 24 hours for Fast Track referrals and 14 days for Normal referrals as per the Inter-Agency Standards for Referrals.

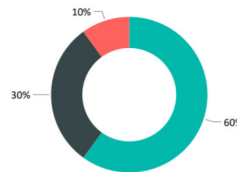
Timeliness of Health referrals in Bekaa



Timeliness of Health referrals in North



Timeliness of Health referrals in South



Timeliness of Health referrals in El Nabatieh

