

IMPROVED MATERNAL-FETAL OUTCOMES THROUGH COORDINATED REFERRALS- LMNS Perspective

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OUTLINE

- Introduction
- Good practices in obstetric referral
- LMNS interventions in a referral process
- Results from well coordinated OBSGYN referral

INTRODUCTIONS

- **A referral** is a process in which a health worker at one level of the health system having insufficient resources (drugs, equipment, & skills) to manage a clinical condition seeks assistance of a better or differently resourced facility at the same or higher level to assist in taking over the management of a client
- Referral is part of management of obstetric clients if well coordinated

Good obstetric referral practices

- Timely referral initiated
- Well communicated to referral site and referral form written well
- Accompanied by a skilled health worker
- Received at referral site with available services required
- Feedback given to the referring facility

Good obstetric referral practices

- Transported by appropriate means- vehicle and
- Occasionally by “**modernized**” Tuku tuku or tri-cycle ambulances supported by partners



LMNS interventions in referral

- Tracking of referrals -common referring sites, reasons for referral, feedback to respective sites, item acquisition and HR recruitment
- Fuel pooling by HFs in each district for sustainability
- Ambulance coordinator contacts distributed thru LMNS platforms for easy coordination
- Facility with **well maintained tricycle and tuku tuku** in hard to reach initiate journey with patient

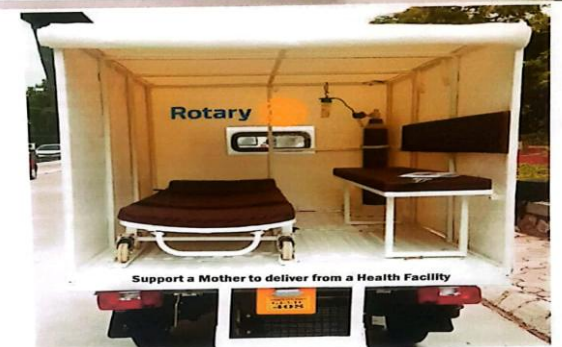


THE REPUBLIC OF UGANDA

TRI-CYCLE VILLAGE "AMBULANCE" (TVA) MANAGEMENT PROTOCOL.



6. Pay particular attention to high-touch surfaces e.g. light switches, beds, equipment (Stools, Chairs)
7. Dry interior surfaces using clean cloth mops to ensure non-slip.



5.0 WHAT ARE THE TVA RIDER REQUIREMENTS?

1. Valid riding permit (Individual/ Community)
2. Markintosh Apron (Re-usable) (Health Facility)
3. Gum Boots (Rotary)
4. Helmet. (Rotary)
5. Box of Disposable Gloves, Waste bags (Health Facility)
6. Cleaning materials (Liquid soap, Cloth Mop, Chlorine) (Health Facility)

LMNS interventions in referral contin.....

- Discussion topics about good referral process in our usual Tuesday LMNS virtual meetings
- In some circumstances specialists are moved by ambulance to support a difficult case ongoing in theatre in a lower level facility and mother not moved or service not delayed
- Inter LMNS collaboration to improve quality of care through analyzing the referrals and number made
- All MNCH providing sites to have phones for communication before referral / consultation

LMNS interventions in referral contin.....

- Referral to be made to the nearest CEMONC facility in case of BEMONC
- Horizontal referral is also recommended among CEMONC sites
- There is a **whatsapp** platform for communication among the MNCH providers

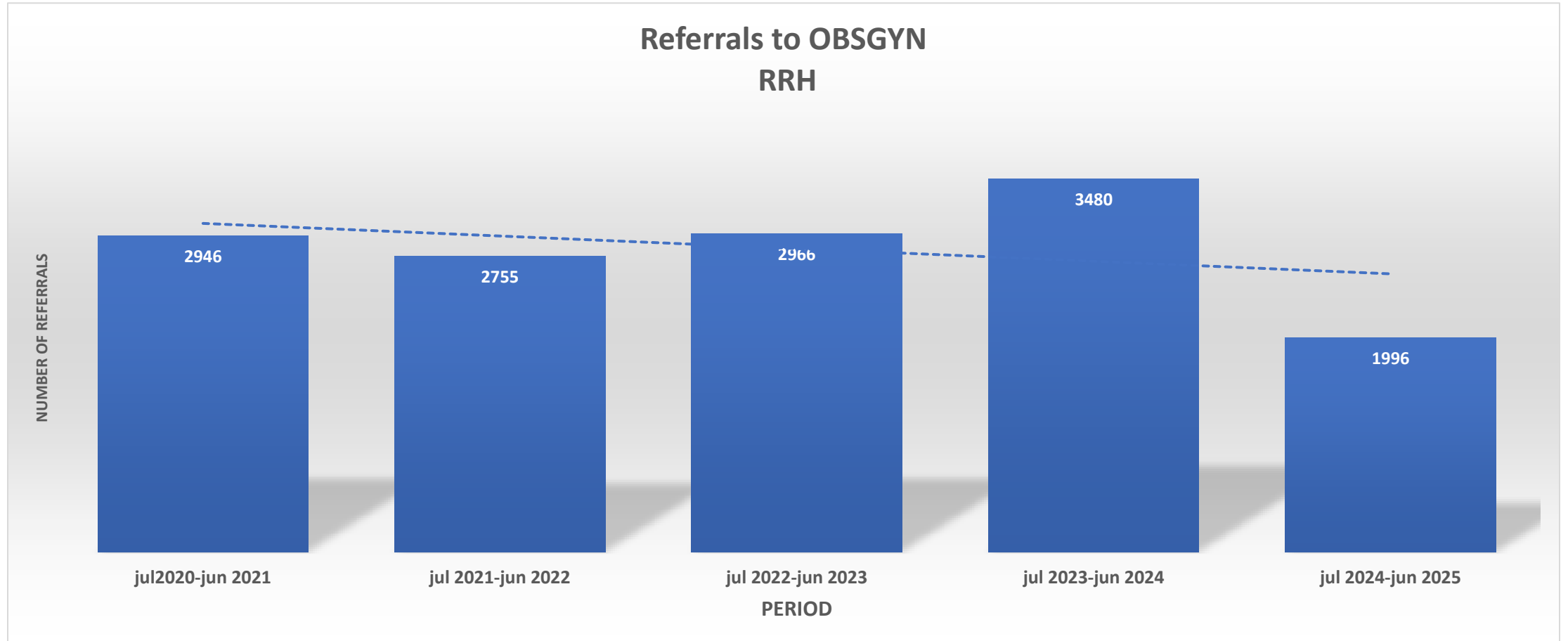
RESULTS OF WELL COORDINATED REFERRAL PROCESS

- Blood transfer to onsite
- Equipment purchase/ allocation or redistribution
- Health unit functionalization-HCIV and NCU Operationalization
- HR Hiring improved/ staffing
- CEMONC Facility more operational 24/7

Impact

Reduced congestion at the RRH/other CEMONC sites and hence reduced maternal and perinatal mortality

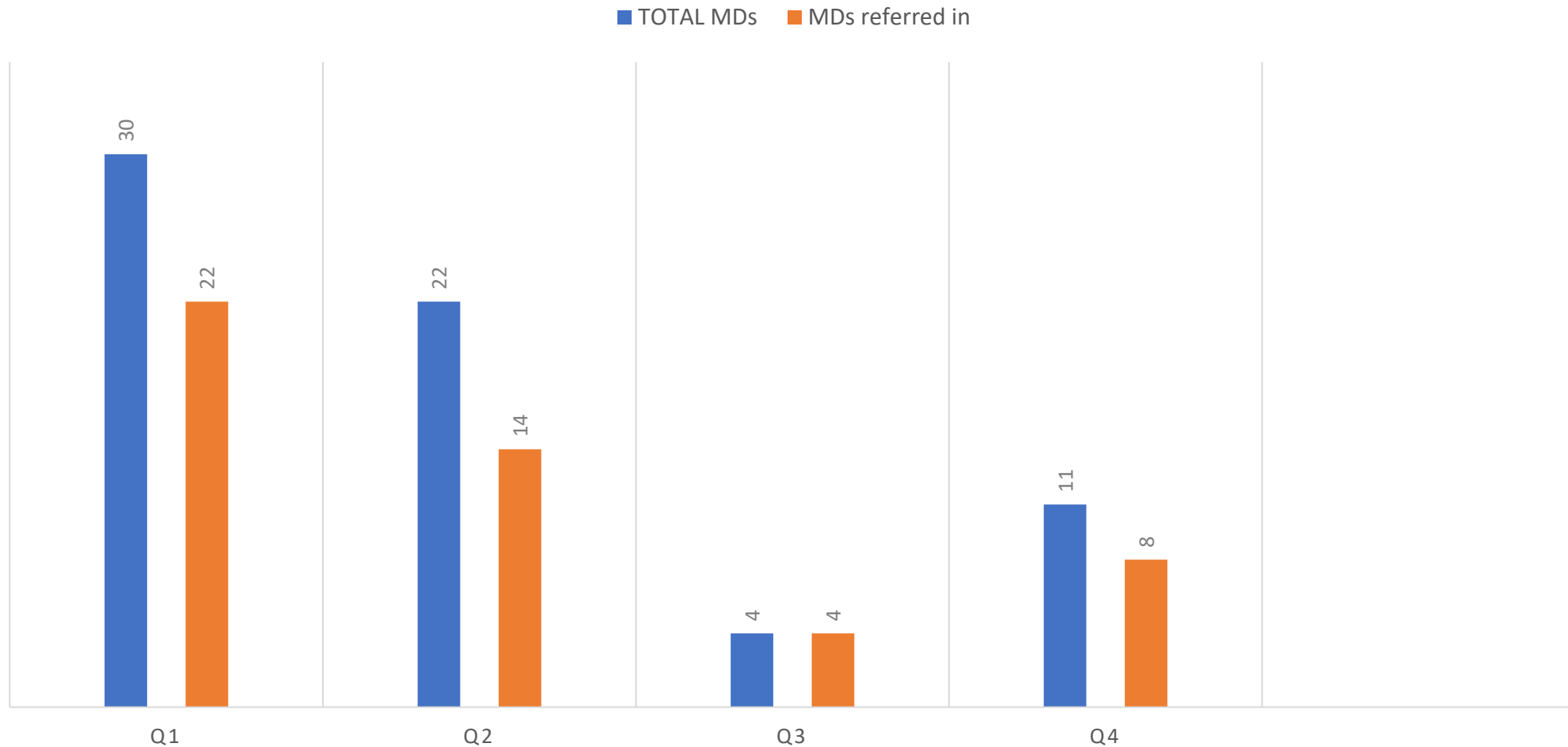
TRENDS IN REFERRALS TO THE HOSPITAL OVER 5 YRS PERIOD-OBSGYN



Days out of stock and number of essential commodities reduced, less staff burn out

2024/2025 MDs DISTRIBUTION PATTERN AT RRH

QUARTERLY PATTERN OF MDS AT THE RRH 2024/2025



PHONES FOR COMMUNICATION AT MBALE RRH



MTN- Lines

MBALE RRH OBGYN / NCU EMERGENCY TELEPHONE NUMBERS

- **LABOUR WARD**

- **UTL: 0716-165811** **OR**

- **MTN: 0393-001621**

- **GYN WARD**

- **MTN: 0393-001620**

- **NEONATAL CARE UNIT**

- **MTN: 0393-002387**

AVAILABLE 24/7



THE END

THANK YOU