Wishlist for the efficient implementation of service delivery networks

Alvin S Concha

In the Philippines, the concept of a local network of facility-based services, coordinated to efficiently implement health care programs, has been encouraged in the past. In 2008, through an administrative order to address maternal and neonatal health risks, the Department of Health (DOH) Secretary stipulated that the “DOH shall advocate and promote the standards of a stable and mature service delivery network to local stakeholders.” The implementing rules and regulations of Republic Act 10354, or the Responsible Parenthood and Reproductive Health Act (RPRH) Act of 2012, defined specific standards for facilities within a service delivery network to support reproductive health care. In 2014, DOH released two issues, which outlined the implementation of service delivery networks, this time in the context of universal health care. As currently defined by DOH, a service delivery network (SDN) is a “network of organizations that provides or makes arrangements to provide equitable, comprehensive, integrated, and continuous good quality health services to a defined population, with minimum duplications and inefficiencies.”

Republic Act 11223, the Universal Health Care Act, specifies that the DOH, the Department of the Interior and Local Government (DILG), the Philippine Health Insurance Corporation (PhilHealth), and the Local Government Units (LGUs) shall work together to integrate health services into province-wide and city-wide health systems. Many SDNs that have been developed and sustained over the years have scopes that are limited to selected or specialized portions of health care, i.e., maternal and child health care, management of patients living with HIV, etc. The DOH and other responsible agencies now face the challenge of scaling up and fortifying established SDNs, and creating new ones, in order for these networks to support the provision of universal health care. In a recent nationwide effort to further define the standards of SDNs, DOH came up with a list of criteria for an organized province-/city-wide health system. According to this set of criteria, provinces and cities working together within an SDN should have a management group and a technical unit. The network should establish a two-way referral system, an investment plan for health, and a mechanism for sharing of resources. All primary care facilities should be accredited to provide the Primary Care Benefit package of PhilHealth.

In addition, the network should also have a functional electronic medical records system, a disease surveillance system, a disaster risk reduction management in health system, and a customer feedback mechanism. Finally, every family within the network should be profiled and matched to a primary care provider.

The list below, although not exhaustive, represents features of health care services elsewhere that may be used to complement the features of existing SDNs and/or to design more efficient ones.

Telemedicine

Telemedicine networks that cover as many medical disciplines as possible, that run parallel and complementary to SDNs, and that allow distance consultation and medical management

Financial management

A financial management mechanism in order to ensure sustainability of SDN operations

Navigation system

A health care navigation system to help patients get immediate and efficient access to quality care

Dedicated transportation system

A dedicated (i.e., not on-call, not all-purpose) transportation system that solely caters to patients needing transfer to a referral center and to those who cannot afford transportation from one point in the network to another

Network-wide communication system

A communication system across the SDN for information dissemination, coordination, process orientation, and constant feedback mechanism on the operations of the SDN

Cross-platform electronic medical records

An online health database system: that interlinks all facilities within—and even outside—the network, that interoperates with cellular phone technology to max-
imize access and portability of health data, and that facilitates appointment scheduling, patient management, and patient monitoring.

**Operation manuals**
The dynamic (i.e., not one-shot) development of locally-contextualized (i.e., not generic) SDN operation manuals.

**Network-wide facility development**
Comprehensive facility development, financing, and maintenance to ensure that appropriate services are available in the appropriate facilities.

**Geographically isolated and disadvantaged areas**
Prioritization of geographically isolated and disadvantaged areas in the SDN implementation scheme.

**PhilHealth**
PhilHealth as lone payer for individual-based services, and additional PhilHealth coverage or special benefit packages for referrals, telemedicine consultation/management, and SDN utilization.

**Dedicated human resources for health**
Human resources for health whose sole responsibility is the efficient implementation of SDN operations.

**Public-private partnership**
Incentivized public-private partnerships within SDNs.

**Research and education**
Generation and development of a system of knowledge on SDNs for inclusion in medical and allied medical curricula, and for the formulation of evidence-based practice guidelines for health care practitioners.

**Regulation of the networks**
Monitoring and audit mechanisms in order to regulate the standards of SDN operations.

The effective operation of SDNs can facilitate the efficient implementation of universal health care. Encouraging health facilities to work together within a network or a system, as in an SDN, promotes inclusion. Expounding inclusion in health care delivery assures the protection and promotion of everyone’s right to health.

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**REFERENCES**
**WISHLIST for the efficient implementation of SERVICE DELIVERY NETWORKS**

- **NETWORK-WIDE COMMUNICATION SYSTEM**
  A communication system across the SDN for information dissemination, coordination, process orientation, and constant feedback mechanism on the operations of the SDN

- **NAVIGATION SYSTEM**
  A health care navigation system to help patients get immediate and efficient access to quality care

- **DEDICATED TRANSPORTATION SYSTEM**
  A dedicated (i.e., not on-call, not all-purpose) transportation system that solely caters to patients needing transfer to a referral center and to those who cannot afford transportation from one point in the network to another

- **TELEMEDICINE**
  Telemedicine networks that cover as many medical disciplines as possible, that run parallel and complementary to service delivery networks (SDN), and that allow distance consultation and medical management

- **CROSS-PLATFORM ELECTRONIC MEDICAL RECORDS**
  An online health database system that interlinks all facilities within—and even outside—the network, that interoperates with cellular phone technology to maximize access and portability of health data, and that facilitates appointment scheduling, patient management, and patient monitoring

- **OPERATIONS MANUAL**
  The dynamic (i.e., not one-shot) development of locally-contextualized (i.e., not generic) SDN operation manuals

- **NETWORK-WIDE FACILITY DEVELOPMENT**
  Comprehensive health facility development, financing and maintenance to ensure that appropriate services are available in the appropriate facilities

- **GEOGRAPHICALLY ISOLATED AND DISADVANTAGED AREAS**
  Prioritization of geographically isolated and disadvantaged areas in the SDN implementation scheme

- **PHILHEALTH**
  PhilHealth as lone payer for individual-based services, and additional PhilHealth coverage or special benefit packages for referrals, telemedicine consultation/management, and SDN utilization

- **DEDICATED HUMAN RESOURCES FOR HEALTH**
  Human resources for health whose sole responsibility is the efficient implementation of SDN operations

- **PUBLIC-PRIVATE PARTNERSHIP**
  Incentivized public-private partnerships within SDNs

- **RESEARCH AND EDUCATION**
  Generation and development of a system of knowledge on SDNs for inclusion in medical and allied medical curricula, and for the formulation of evidence-based practice guidelines for health care practitioners

- **REGULATION OF THE NETWORKS**
  Monitoring and audit mechanisms in order to regulate the standards of SDN operations