

RIMS SNAPSHOT

Referral Information Management System

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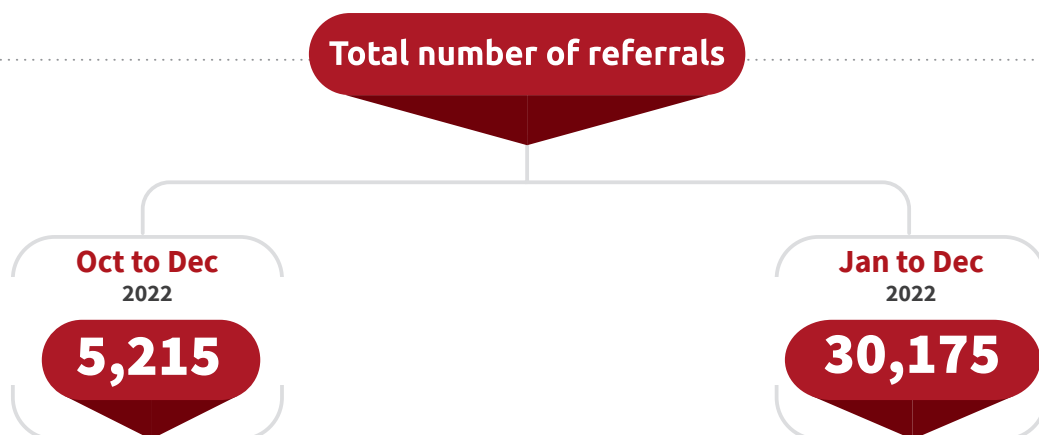
LEBANON

FEBRUARY 2023



OVERVIEW

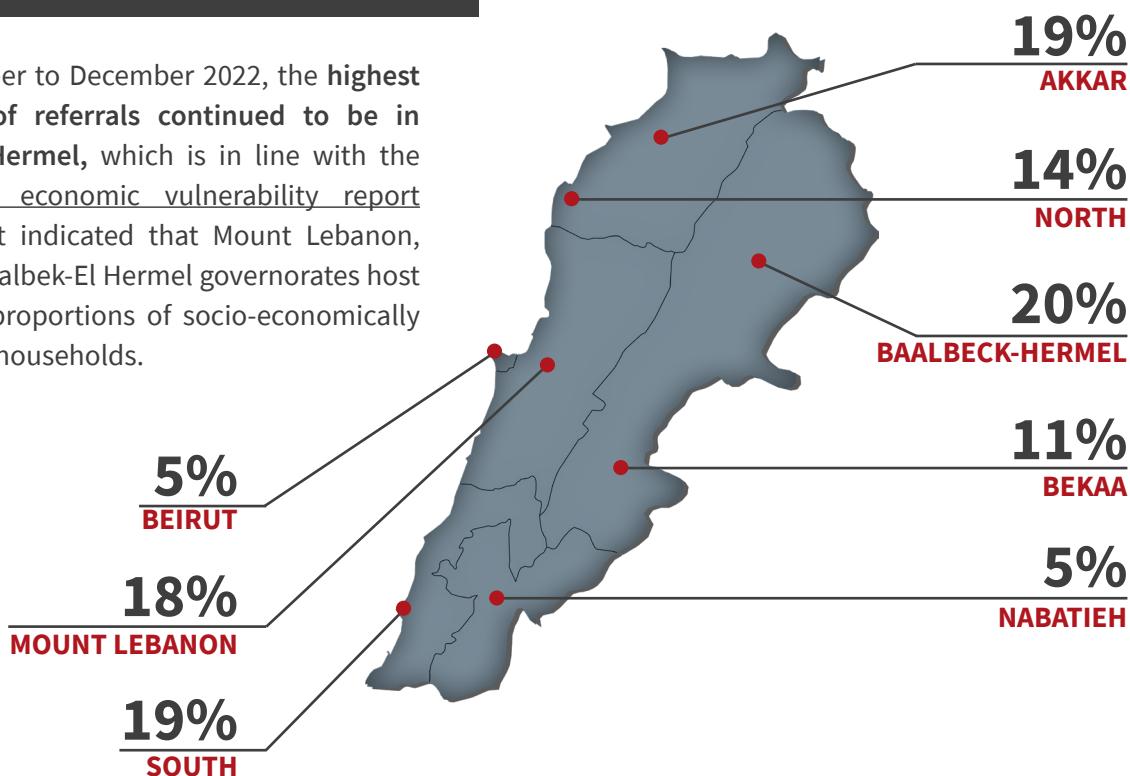
The RIMS snapshot summarizes key data of referrals conducted through the Referral Information Management Systems (RIMS) in Lebanon. This snapshot is designed to complement the RIMS' analytical reports, which contain in-depth analysis of effectiveness and accountability in referral pathways. This series of snapshot is produced every 3 months.



During the last three months of the year, more than 5000 referrals were facilitated through RIMS. However, compared to the previous quarter, the number of referrals decreased by 3.8%. This does not necessarily mean that there were less needs but rather indicates that humanitarian actors have had challenges identifying persons of concern - potentially due to high telecommunication and transportation costs and daily outages of internet services. In turn, these challenges described would therefore mean beneficiaries have had less access to social media platforms and could not reach out to organizations. Additionally, other factors which contribute to less referrals could be reduced humanitarian funding and hence reduced assistance, inability to respond (due to end of year holidays) and finally the launching of the version 4 of RIMS - whereby some agencies stopped entering and updating their referral data on the old version while waiting for the new version which was launched on January 4th 2023.

REFERRALS PER GOVERNORATE

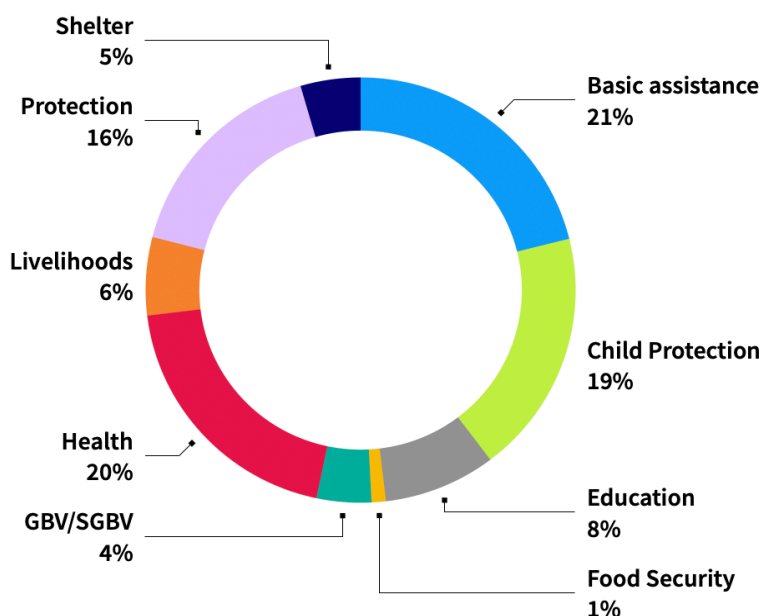
During October to December 2022, the highest proportion of referrals continued to be in Baalbek el Hermel, which is in line with the VASYR 2021 economic vulnerability report findings, that indicated that Mount Lebanon, Akkar and Baalbek-El Hermel governorates host the highest proportions of socio-economically vulnerable households.



PROPORTION OF REFERRALS RECEIVED BY SECTORS

Throughout the fourth quarter, Basic Assistance (BA), health, and Child Protection sectors remained the leading sectors in receiving referrals as demonstrated in the adjacent pie chart.

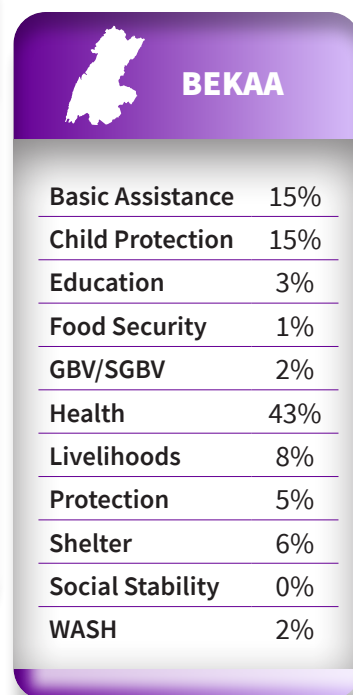
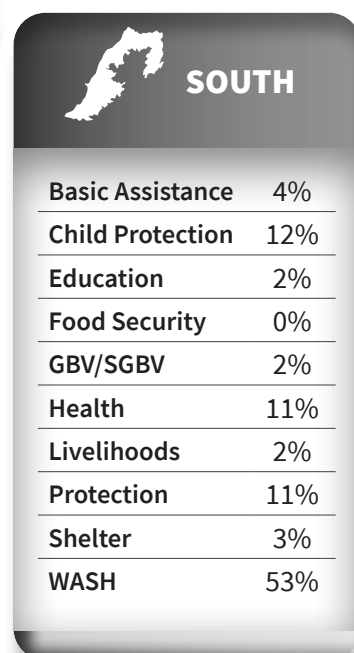
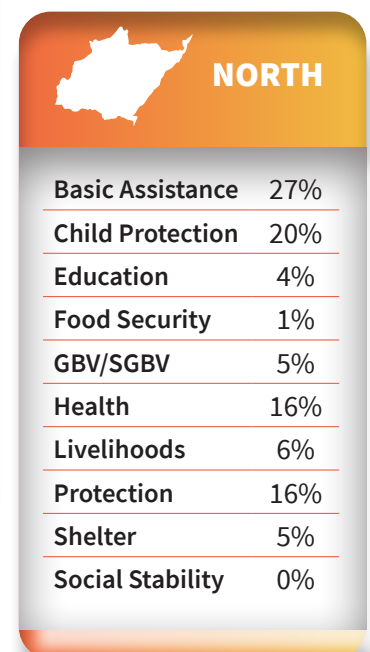
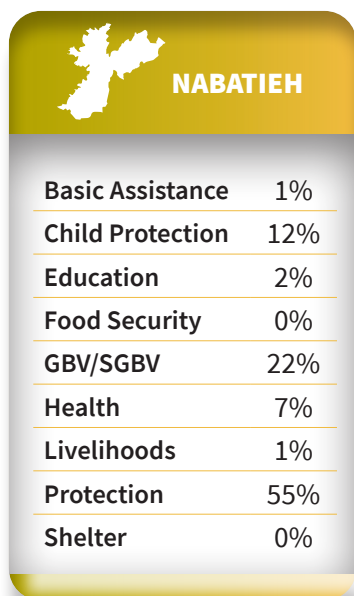
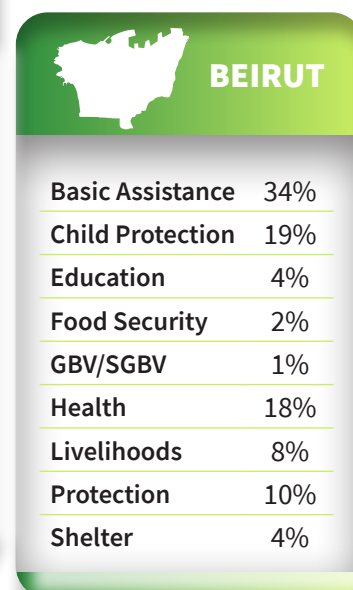
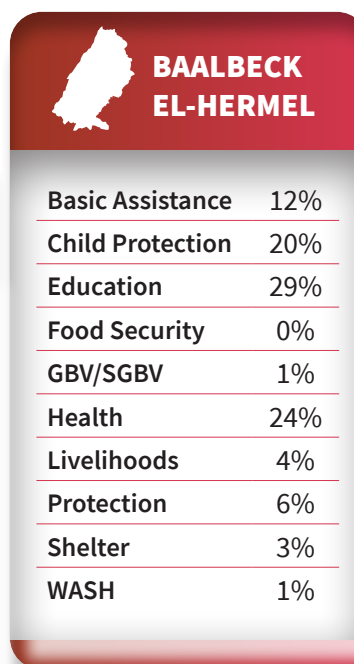
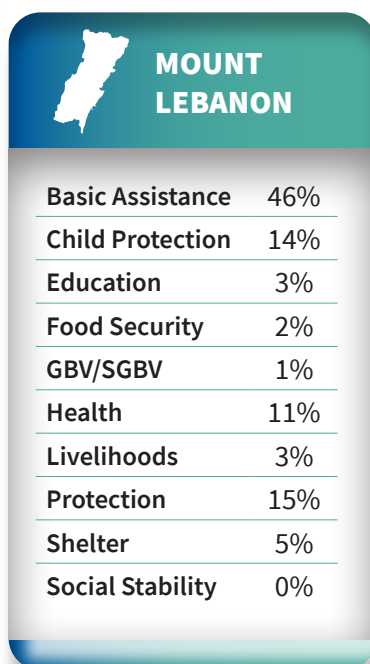
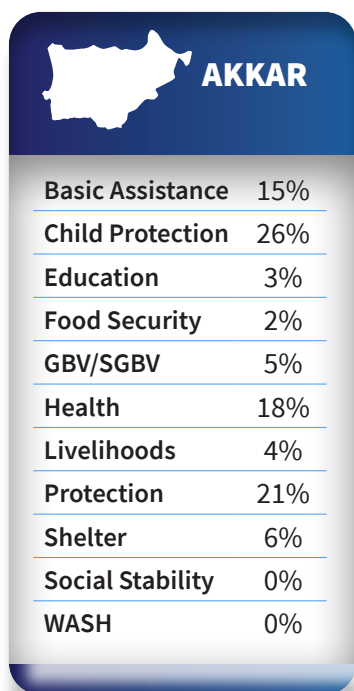
During the fourth quarter, Basic Assistance (BA), health, and Child Protection sectors remained the leading sectors in receiving referrals. Although BA referrals decreased by 4% in comparison to the previous quarter, BA services remained the most frequently requested services by beneficiaries throughout all four quarters demonstrating the deteriorating ability of communities across Lebanon to meet their basic needs as a result of the deepening crisis.



Moreover, during the reporting period, it is interesting to note that health referrals continued on increasing to reach 20% of the overall sent referrals. Over 50% of the total number of health referrals took place in Baalbek – Hermel and Bekaa governorates. Moreover, 22% of the cases referred in these governorates were linked to patients suffering from diarrhea which could be linked to the increase in Cholera cases seen in the Bekaa during December 2022 as per the [WHO Cholera Outbreak Situation Report No 7](#).

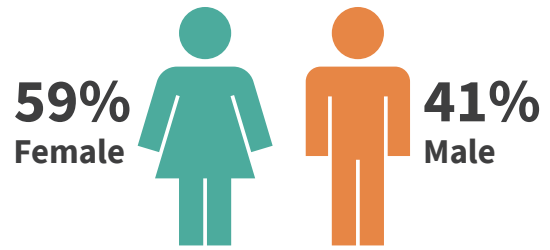
PROPORTION OF REFERRALS RECEIVED BY SECTORS

RIMS data demonstrates, that during the last quarter, despite an overall decrease in the absolute number of referrals, the proportion of referrals sent in some governorates for certain sectors, such as Basic Assistance, Health and Child protection remained high or even increased, reflecting the exacerbated vulnerability of communities. It is interesting to note that in Akkar, CP referrals were the highest which could indicate a gap in coverage of service availability. This finding needs further consultation with the relevant sector coordination representatives as well as Child Protection actors.



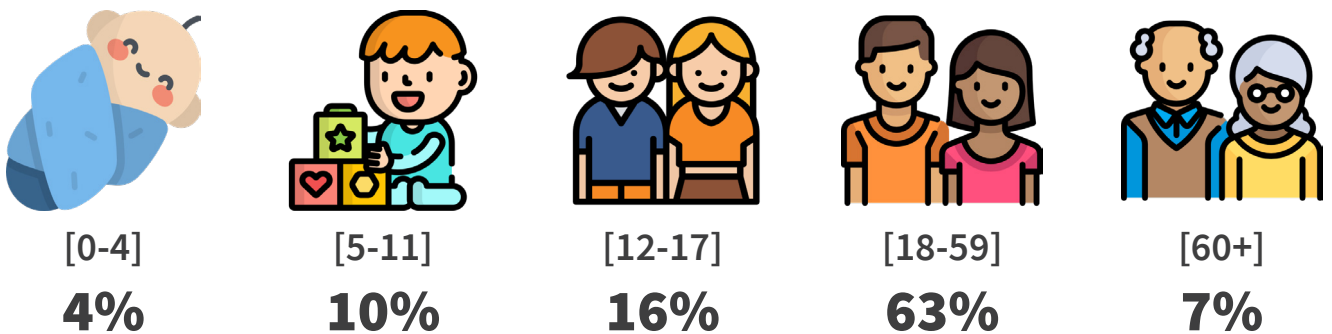
REFERRALS BY GENDER:

During the last 3 months of 2022, RIMS data demonstrated that the proportion of referred females was higher than referred males in all governorates, with no significant changes from the previous quarter. However, it is interesting to note that a larger share of referred females (67%) than males (33%), is recorded in Akkar governorate.



REFERRALS BY AGE GROUP:

Throughout this quarter, although referrals of beneficiaries aged between 18 to 59 remained the leading category among other age groups and in all governorates, it decreased by 6% in comparison to the previous quarter. However, it increased noticeably by 6% for beneficiaries aged between 12 to 17 and by 4% for beneficiaries above 60. The increase of the aforementioned category is in line with the VASYR data that highlights that the highest rate of child labor cases during 2021 was among adolescents between the ages of 15 and 17.

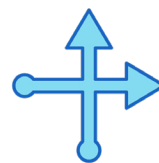


CROSS-SECTOR AND INTRA-SECTOR REFERRALS:

The proportion of cross-sector referrals conducted (665) remains higher than the intra-sector referrals which recorded only 34% of the total number of referrals sent.



INTRASECTORS REFERALS
34%



CROSS-SECTOR REFERALS
66%

SPEED AND RESPONSIVENESS:



ON-TIME

51%

NOT ON-TIME

49%

SPEED OF **FAST TRACK REFERRALS**

During the reporting period, although the proportion of referrals acknowledged on time (51%) is higher than those that were not on time (49%), a noticeable decline in the proportion of fast track cases responded to on time was recorded. Only 51% of the fast-track cases received during this quarter were responded to on time in comparison to 71% during the previous quarter (Q3).



ON-TIME

49%

NOT ON-TIME

51%

SPEED OF **NORMAL TRACK REFERRALS**

The proportion of Normal track referrals managed on time decreased by 7% compared to the previous quarter, reaching 49% this month.



0 to 14 Days

53%

15 to 30 Days

35%

30+ Days

12%

TIMELINESS OF REFERRALS

During October to December 2022, RIMS data indicated that 53% of the referrals received were managed within 0 to 14 days, which as per the Inter Agency minimum standards on referrals, is the average closing time for referrals. However, in comparison with the previous quarter, the number of cases responded to within the accepted time frame had decreased by 26%. This means that neither services nor feedback is given to beneficiaries in a timely manner, hence humanitarian actors are not able to meet beneficiaries' expectations and needs.



Age

3%

Location

27%

REASONS FOR NOT ACCEPTING REFERRALS

RIMS data demonstrated that 45% of the cases responded to in all governorates, were not accepted due to the eligibility criteria, such as the location, age, and nationality. Moreover, 22% of the referrals received by humanitarian actors were not accepted because the same service was provided previously to the person of concern.

Nationality

8%

Insufficient funds

7%

Service provided

22%

Other

33%



No feedback received

61%

Feedback received

16%

Closed

23%

LEVEL OF RESPONSE

RIMS data demonstrates that 61% of the referrals were left without any feedback from the receiving agency's side, which demonstrates that referral networks are nonstructural. This trend is particularly evident for all sectors in both Akkar and North governorates, where over 79% of the referrals are left without any feedback or response. And more concretely 82% of protection referrals in Akkar are left without any feedback, as well as, 86% of basic assistance referrals in the North.

However, to improve the responsiveness to referrals and ensure high quality results and a positive beneficiary experience, organizations need to develop and ensure strong referral pathways for protection and basic assistance referrals in the aforementioned governorates. But also, increase their efforts in updating the Inter-Agency Service Mapping with new services/new referral focal points, at least on a monthly basis while ensuring accurate reporting of services provided by organizations.

IDENTIFICATION CHANNELS:

RIMS data suggests that 40% of the cases identified and referred on RIMS all over Lebanon, were identified through Hotline and Phone calls, which makes the phone calls as the primary identification channel used in Lebanon. However, although phone calls remain the priority identification channel, the numbers had significantly decreased in comparison with the previous quarter, where 60% of the referral were identified through phone and hotline calls. The decrease in the number of cases identified through hotlines could be linked to the inability of beneficiaries to reach out to organizations via phone due the high telecommunication costs. NGO's are in particular having to adapt to this situation by having to provide face to face identification and linking more with community focal points, since the number of cases identified through community focal points and networks increased during this quarter by 3% to ensure that beneficiaries reach the needed services.



COMMUNITY FOCAL POINT

8%



SELF-REFERRAL

7%



REFERRAL BY EXTERNAL AGENCY

4%



EDUCATION CENTER

10%



HOME VISIT

31%



HOTLINE/ PHONE

40%

DR DANISH
REFUGEE
COUNCIL

FOR ANY INQUIRY OR MORE INFORMATION, PLEASE VISIT OUR [WEBSITE](#)