Development of a Referral System to Optimize Centers for Character Development and Counseling Guidance as Well as Psychological Service Centers for Professional Learning and Development Institutions

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Sections Info	ABSTRACT
	The research aims to determine the implementation of the referral system at the Centers for Character Development and Counseling Guidance (CCDGC) and Psychology Service Centers. This study uses a type of R&D with a descriptive approach. The participants in this research are the chairperson or secretary at the Center for Psychological Services, the CCDCG, and related parties in the internal referral system and system developers. Data analysis in the form of observation, documentation, and focus group discussion (FGD) was collected directly. This study's results indicate that the referral system carried out by the CCDCG can be implemented as needed. In addition, the Psychological Service Center in the psychological examination and consultation program can develop a referral system according to the needs of clients from outside the Universitas Negeri Surabaya (UNESA). This study implies that the implementation of the referral system makes it easier for users to access services according to their needs, and the psychology service center has an optimized SOP to rule the CCDCG at UNESA. The limitation of this study is that it is only focused on UNESA. Hence, further research can analyze the development of a referral system in the CCDCG to other institutions and compare it to UNESA.

INTRODUCTION

In order to encourage optimal psychological services in the community, one of the things that can be done is to improve the quality of psychological service providers, both in the field of human resources and in the field of service. Surabaya State University has several service centers that facilitate the community's needs, including the Psychology Service Center. The Psychology Service Center is one of the centers under the Institute for Learning and Professional Development (CPSLPDI) at the State University of Surabaya. The Psychological Service Center aims to provide psychological services to the broader community and is committed to applying the principles of professionalism and good quality in providing services to the community (Doll et al., 2017; Rathod et al., 2017).

Several service programs are available at the Psychology Service Center, including psychological examinations, consultations, seminars, training, and workshops. This service program has been strategically arranged regarding the community's needs, both individually and in groups. The psychological examination program consists of individual and group examinations. This program provides services to the community by objectively examining the psychological functioning of individuals or groups (Scheel et al., 2018). The psychology consultation program consists of individual and group consultation programs. This program provides services in the form of consultations to determine alternative solutions to problems faced in helping clients.

So far, the previous service system still uses a stand-alone system with no coordination between centers within the State University of Surabaya. as well as the absence of mapping activity programs and various services at centers within the State University of Surabaya. This causes service users to experience difficulties contacting or accessing the service center if a problem occurs. Coordinating between centers in the surrounding environment is necessary for services to become more effective and efficient. Therefore, it is necessary to develop a system that can answer these problems, and one alternative solution is to implement a referral system (Aluh et al., 2018; Broglia et al., 2018; Nuruzzaman & Hussain, 2018; Titzler et al., 2018).

The referral system is a two-way process that aims to regulate the flow of patients from a low-level facility to a higher level and vice versa (Arifah et al., 2021). In the health sector, a referral system is a process or flow that regulates where individuals with specific health problems should go for an examination (Ratnasari, 2018). In addition, according to Listyorini & Wijananto (2019), there are several types of referral systems based on relationship systems: 1) An internal referral system is a horizontal reference between service units within the same institution. 2) The external referral system is a referral between units at the health service level both horizontally, such as the emergency room to the inpatient department, and vertically, namely referrals that occur between higher units, such as Community Health Centers, and general hospitals. Items to ensure equitable distribution of health efforts to help alleviate problems in the health sector should be empowered in the health sector. The purpose of the referral system itself is to improve the quality, coverage, and efficiency of integrated health services. Online referrals make it easier for patients or the public to obtain certainty in obtaining health services at home or in advanced facilities (Putri & Frinaldi, 2020). The implementation of the referral system aims to provide effective, efficient, and quality services so that services can be appropriately achieved without spending more (Permatasari & Ernawati, 2019). A referral system was implemented between specialists, with an e-referral model proven to increase time efficiency in referral creation (Shephard et al., 2018). The use of e-Referral in health care is gradually increasing. The e-Referral system has the potential to increase both the quantity and quality of referrals.

In Indonesia, many are application-based in the implementation of the referral system. Widely used applications include the Integrated Referral System (SURUTE), P-Care, and the Online Referral Scheduling System (SPRO). SISRUTE is the horizontal and vertical application of health-care duties and responsibilities.At the same time, SPRO is an application for scheduling between health facilities in the capital city (DKI), Jakarta, and P-Care is a web-based application used by first-level health facilities (Handayani et al., 2018). In addition, other referral system applications, such as research conducted by Hariyani et al. (2021), show one of the innovations of the online referral system in the form of an application called "*Si Ruli*" (online referral system). This application aims to connect and facilitate access to people who need dental health services at the Keputih health center in Surabaya. The characteristics of medical referrals are cooperation between health service facilities, compliance with applicable referral standard operating procedures (SOP), completeness of supporting resources, completeness of referral formulas, communication between referring parties and referral facilities, and the implementation of return referrals (Hartini et al., 2016).

Generally, the referral system is widely used in the health sector, and its implementation refers to the Minister of Health of the Republic of Indonesia No. 001 of

2012. This is in line with research conducted by Rahayu and Hosizah (2021) entitled "Implementation of the Health Service Referral System." This research, using the literature review method, shows that in addition to the implementation of the referral system, which refers to Permenkes RI No. 001 of 2012, there is a classification of types of health service referral facilities that many health facilities in Indonesia have implemented.

However, the referral system can also be implemented in other fields; for example, research conducted by Leung et al. (2020) explains the implementation of the referral system in schools to increase student access to sexual health services. The referral system implemented aims to connect students with school-based and community-based sexual health services. In addition, a referral system is also implemented to connect service users from one department with a focus on different areas to other service units. According to research conducted by Narayan et al. (2019), the Department of Radiology conducts initial screening related to partner violence experienced by women as a result of screening questionnaires. If women feel insecure at home, they will be referred to the support service program Helping Abuse and Violence End Now (HAVEN) for a counselling session. The innovation of the referral system is not only in the field of health, which aims to make referrals but has developed to conduct screening as well as referrals, such as the research conducted by Nelson et al. (2021) evaluating the sensitivity and specificity of the screening tool, namely CARS (Computerized Assessment and Referral System). The results show that CARS has very high sensitivity and specificity to mental health disorders and makes it easier for the medical team to evaluate so that it does not take much time to carry out the diagnosis, treatment, and referral process.

The referral system is seen as an effort to improve the connectedness or access of service users to more complex health services. The existence of this referral system increases the effectiveness and coordination of services by implementing a referral system widely used in the fields of health, education, and psychology. Because of the era of increasingly advanced technology, the system on access to existing community services, such as m-banking services, health, education, and socialization media, including the referral system, has been digitized (Borkovich, 2022).

Implementing the referral system provides convenience for service users and officers (Wulandari et al., 2022). The online-based referral system aims to minimize unnecessary follow-ups for patients, improve quality, reduce wait times, improve access, efficiency, the number of referrals, and confidentiality of patient information, improve the relationship between first-level and specialized care, improve safety for patients, and consequently, improve efficiency (SeyedNezhad et al., 2021). A referral system was implemented between specialists, with an e-referral model proven to increase time efficiency in referral creation (Shephard et al., 2018).

Based on the presentation of previous research, it has been shown that the referral system can provide easy access, coordination, and effectiveness of services. This is per the needs of the Psychology Service Center and the Center for Character Development and Counseling Guidance (CCDCG), where establishing a referral system can encourage effective services by involving other centers within the Surabaya State University environment. Hence, other than the previous study, this study will analyze the implementation of the referral system specifically at the State University of Surabaya (UNESA). Furthermore, this study was conducted on the current needs of the UNESA people. However, it could be the novelty of this study. This study aims to find out how

the referral system was implemented at the CCDCG and the Center for Psychological Services of the Learning and Professional Development Institute (CPSLPDI) of UNESA in terms of standard operating procedures (SOP) for referrals in each program, internal referral flow, and the administrative system.

RESEARCH METHOD
General Background
This research uses an R&D (research and development) development research design using a descriptive approach. The development research method is used to produce products and test the effectiveness of the products produced (Sugiyono, 2015). There are three stages of development research, according to Sugiyono (2015), which consist of:

1. Stages of a preliminary study by conducting descriptive studies
2. The second stage is design development using a descriptive approach
3. The final stage is model validation, likely in Figure 1.

Preliminary Study → Design Development → Validation

Figure 1. Research flowchart.

Descriptive studies aim to provide a detailed description of the phenomenon in its context. In this method, the case needs to be explored in terms of existing theories. On the contrary, it is hoped that the details produced will produce new insights and a better understanding of the nature of the phenomenon under study (Zheng et al., 2021). The researcher used a descriptive approach in this study's development research design. The researcher wanted to determine how to implement the referral system at the CCDCG and the Center for Psychological Services.

Participants
The participants in this study were the Head and Secretary of the Psychology Service Center, the Psychology Service Center Team, the Head and Secretary of the CCDCG within the Learning Development Institute, and UNESA.

Instrument and Procedures
The data collection method, using observation, documentation, and focus group discussion (FGD), was collected directly at the Psychology Service Center CPSLPDI UNESA, as *likely shown* in Figure 1. The data taken explores the planning process of the operational standard referral system, the implementation of procedures by the SOP, starting from how users register, the screening system to the referral stage at appropriate centers based on user needs, procedures for the use of online-based referral systems, and related internal parties. Meanwhile, the CCDCG also conducts observations, documentation, and focus group data (FGD), which are collected directly.

RESULTS AND DISCUSSION
Overview of the Psychology Service Center
The Psychology Service Center is one of the technical implementations centers at CPSLPDI at UNESA. This center was formed in 2021 and is located in the CPSLPDI UNESA Building, St. Campus UNESA Lidah Wetan. The task and function of this service center are to provide services that can meet the development needs of individuals, societies, communities, and organizations from the point of view of psychology. In addition, the Psychology Service Center prepares service programs tailored to the community's needs (Zheng et al., 2021), organizes service programs, and improves and develops the competencies of the Psychology Service Center Team for good service quality and better work professionalism.

There are five service programs in the Psychology Service Center: examination of an individual or group, individual or group, psychology seminars, psychology training, and psychology workshops. In this study, we focus on the referral system related to psychological examination, which is a psychological assessment carried out objectively on the psychological functioning of individuals or groups. Furthermore, individual consultation programs are aimed at external parties so that their services are only limited to the general public (Cohen et al., 2019; Cuschieri & Grech, 2020; Matsuno & Israel, 2018; Stöcker et al., 2017). Due to the possibility of cases arising in the Psychological Examination and Psychology Consultation programs outside the realm of the Psychology Service Center, there needs to be a system that regulates the transfer of services to units that are based on the needs of the client to optimize services so that the implementation of the referral system in both programs is realized.

Overview of the CCDCG
The CCDCG is one of the institutions under the auspices of UNESA. The center provides counseling and character-building services for the community at UNESA. The CCDCG targets UNESA students who need help studying and developing their potential. Guidance and Counseling Service The management team in the guidance and counseling team's UNESA service implementation guidebook consists of the UNESA Guidance and Counseling Team (CnGT) and the UNESA Bimbasi Team. These two teams are under the auspices of the Center for CCDCG. The duties and obligations of the CnGT include the following:
1. Providing individual guidance and counseling services to UNESA students
2. Providing guidance and counseling services in groups to UNESA students
3. Develop a work program of guidance and counseling services at the University level

Several work programs or products of the Center for Character Development and Counseling Guidance relate to self-development for both lecturers and students. For character development for students, there is a counseling service program shown for the UNESA community. This service activity has been carried out since April through November, and the implementation system is both online and offline. The implementation begins with counseling training for the BIMBASI and Adhoc Teams. Like the Psychology Service Center, the Counseling Service Program also requires a system that regulates the transfer of cases requiring follow-up to a more suitable unit for the client's needs (Arntzen et al., 2019). Therefore, the referral system is also applied to the Center for Character Development and Counseling Guidance.

Related parties in the referral system

UNESA has several centers that facilitate psychological needs and development that can be an internal referral facility of the Psychology Service Center, which consists of:

1. The Center for Disability Studies and Services at UNESA is a service center that has been established since 2012. This center's overarching goal is to increase access and improve the quality of education services for students and students with special needs through quality and responsible research and community service, with one of the specifics being to provide consultation, assessment, early identification and intervention, as well as transition services for students with special needs (Faculty of Language and Arts, UNESA, 2022).

2. UNESA Job Center has a vision, namely as a career development center that prepares students and alumni to adapt to and compete in the world of work in the global era. This center provides several services in the form of training, seminars, courses, consulting services, and career guidance (UNESA Career Center, 2022).The Special Needs Children's Service Unit (SNCSU) previously had the name Autistic Service Center (ASC), which was established in 2015. This center is a forum for providing interventional support and services, transitional education, consultation, and assessment for parents, schools, and communities packaged in the form of coaching so that children with autism spectrum disorder have ready-to-take education, both formal and non-formal. However, now ASC has changed its name to SNSCU with the expansion of the need not only for children with autism spectrum disorder but for children with other special needs (Special Needs Children's Service Unit, 2022).

Implementation of Referral System in Program SOP

SOP is a fixed and whole work procedure written in a written document (Budiharjo, 2014; Setiawan & Rahmawati, 2020). SOP are a set of operational standards used to serve as guidelines for tasks that are not repeated (Grabenhenrich et al., 2017; Mor et al., 2019; Pedi et al., 2017; Santonen et al., 2019). The purpose of the SOP is to simplify the process at work, minimize errors, strengthen workflow, and support activities in the organization so that it can run effectively, controlled, and systematically. Other than that, SOP is to create a work commitment to realizing good governance as a performance assessment tool that is internal and external. According to Santoso (2014) in Sugiarsi & Pujihastuti (2021), there are seven main principles of Standard Operating Procedures consisting of:

1. Efficiency is precision, efficiency in the form of things related to activities that are expected to be more precise, not only fast.
2. The consistency, provisions, or things stay the same so they can be estimated correctly.
3. Minimizing misconduct is that it can keep all mistakes away.
4. Problem-solving, SOP can be a solution to problems that may arise.
5. Labor protection.
6. The working map, namely as a pattern where activities have been arranged neatly, and the existence of SOP make the work pattern more focused.
7. Defense Limits.

The application of SOP includes a systematic stage that begins with introducing SOP and ends with the integration of SOP in the implementation of daily procedures in an

organization (Albareta & Mursanto, 2019; Lubis et al., 2020). The implementation process must ensure that each implementer is aware of the new SOP and that the SOP is disseminated according to needs (Ajusta & Addin, 2018). According to Listyorini & Wijananto (2019), there are several clinical referral procedures, including the following:

1. Conduct an examination analysis to determine the primary and secondary diagnoses.
2. provides stability measures,
3. Upon determining the unit of service to which the referral is directed,
4. For emergency patients, you will get the assistance of officers,
5. Patients are referred to the required specialty or facility. In clinical cases, the first procedure is generally to conduct an assessment or initial screening in the form of an amnesis.

In the Psychology Service Center program, which consists of psychological examinations and consultations, some SOP regulate the referral system procedures and mapping maps. Initial referral procedures are carried out by conducting initial assessments or screenings. Likewise, in the CCDCG, the referral system is implemented with the same flow as conducting initial screening and needs evaluation, likely in Figure 2.
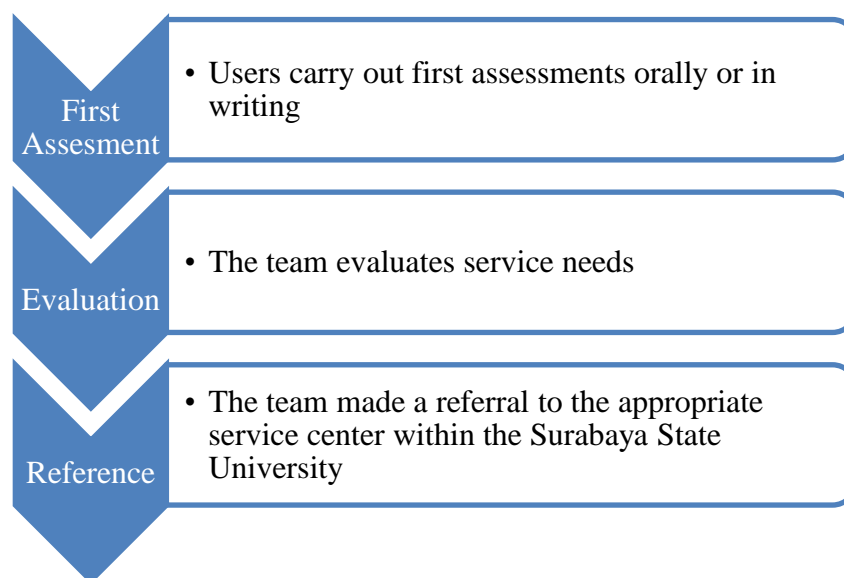

First Assesment
• Users carry out first assessments orally or in writing

Evaluation
• The team evaluates service needs

Reference
• The team made a referral to the appropriate service center within the Surabaya State University

Figure 2. CCDCG referral system.

Figure 2 shows an overview of the flow of the existing referral system in the Center for Psychological Services and the CCDCG. At the Psychology Service Center, the referral flow in the Psychological Examination and Psychology Consultation program starts with the implementation of the initial assessment, which is carried out orally and in writing when the client registers. The client will then be directed to fill out an assessment form containing the initial screening fields that will later describe the needs of service users. After the examination or consultation, after filling out the assessment form, the team will evaluate the completed form. If the client feels that he needs follow-up, the team will make a referral to the service unit that accommodates his needs in the UNESA environment. For example, suppose there is a user who accesses psychological consulting

services and is a student who wants to do career consultations. In that case, the team will make administrative referrals according to procedures to appropriate centers such as the Character Development Center, Counseling Guidance Services, or UNESA Job Center, as well as in other cases. The referral system is listed in the SOP of the referral system of the Psychology Service Center, CPSLPDI UNESA, considering the need to standardize maps and referral patterns to encourage the creation of efficient, effective, and systematic referral activities within the Psychology Service Center (Dincă, 2020; Hallsworth et al., 2021).

At the CCDCG, the referral system for a counseling service program starts with the student client registering. The client will fill out the screening form for the initial assessment stage, and then the team will evaluate the client's needs and direct the client to the counselor team or co-counselor as needed (Ortiz & Levine, 2022; Toquero, 2020). However, suppose that in the evaluation stage, the team finds that the client needs follow-up. In that case, the Character Development and Guidance Counseling Center team will refer to a unit that accommodates the client's needs in the UNESA environment. For example, when a client fills out the registration and screening form but the evaluation results indicate a need for a referral to the UCC team, the CCDCG team will contact the UCC team and make a referral.

The referral system has several benefits, namely improving service quality and efficiency. The referral system makes coordination between specialties or other departments easier. Several studies have shown increasingly advanced innovations, with the replacement of a paper-based referral system by making referral letters, affixing signatures, and doing all administration on a paper-based basis. The referral system has been widely implemented online to improve efficiency and ease of administration. Bhardwaj et al. (2020), in their research on the implementation of SMS-based referral systems in mental health facilities, aim to reduce the gap between mental health facilities and mental health workers in hospitals and conduct online documentation or administration. Other research shows online-based referral systems using platforms, applications, and websites. In order to facilitate the connection with related facilities, digital systems began to be widely introduced.

The Psychology Service Center has many service programs aimed at the community. However, in the previous implementation, which was still independent, there was no coordination between other centers in the environment of Surabaya State University, so if there are exceptional cases that, after being identified, apparently require follow-up from specialists, it is necessary to use a referral system. Therefore, the implementation of an online referral system is completed. This technology-based referral system is facilitated by using the website services provided. The flow of implementing the referral system at the Psychology Service Center has at least been illustrated by clinical referral procedures or referral system procedures that are widely applied. Surabaya State University has adequate centers for handling psychological cases that may arise with the existence of an online referral system. This facilitates the coordination flow between one center and another (Colombini et al., 2017). Its implementation also creates an orderly administration because it cuts time spent making referral letters. The referral system also impacts counseling services in the CCDCG. The existence of referrals provides optimization and effectiveness for services. An internal client who needs follow-up on his needs In addition to making it easier to select a counselor or co-counselor for the client, the initial assessment makes it easier for the team to find out the client's picture of

the problem. The team will make a referral if the need is in another unit before the counseling process takes place. This also has an impact on the optimal counseling process that will take place (van Os et al., 2019).

CONCLUSION

The referral system implemented at the Psychology Service Center and the CCDCG has been proven to improve the quality and quantity of services. The Psychology Service Center has developed program SOP by facilitating each program's referral system. The referral flow compiled has been widely applied to other institutions, and the digitization of the referral system makes it easier to coordinate remotely between users and service facilitators. Hence, based on the research findings, this study implies that the implementation of the referral system makes it easier for users to access services according to their needs, and the psychology service center has an optimized SOP to rule the CCDCG at UNESA. Furthermore, other developments can be held for any further research or needs. The limitation of this study is that it is only focused on UNESA. Hence, further research can analyze the development of a referral system in the CCDCG to other institutions and compare it to UNESA.

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