

Factors Influencing the Utilisation of the Referral System in Selected Primary Health Care Centres Among Nurses in Rivers State, Nigeria

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Abstract

The study investigated the factors influencing the utilisation of the referral system in selected Primary Health Care centres among nurses in Rivers State. Five research objectives guided the study. The study adopted a descriptive survey design which sampled 95 nurses from Primary Health Care centres in Rivers East Senatorial District in Rivers State. The sample size was determined using Cochran Sample size formula while a multi-stage sampling procedure was employed to select respondents for the study. The study utilized a self-structured questionnaire to collect data. The instrument was subjected to face and content validity through thorough screening by senior nurses and experts of Tests and Measurement. The reliability of the instrument was determined by finding the internal consistency of the instrument using Cronbach alpha. Data collected was analysed using descriptive statistics of frequency, percentage and mean, as well as Chi Square for hypotheses testing. The findings of this study showed that there was high level of utilisation of referral system as shown by the grand mean (mean=3.39). It was also revealed that all the four factors (Knowledge, availability of communication and transport facility and attitude) did not have any significant influence on utilisation of referral system. Based on the findings, it was recommended among

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others that Government through the Hospital Management Board should provide PHC centres with necessary transportation facilities such as functional ambulance and good access roads. This will ease the transfer of patients from referral facility to receiving facility.

Keywords: Utilisation, Referral System, Primary Health Care Centres, Nurses,

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Introduction

Nigeria operates a three-tiered health care delivery system with a large percentage of health care delivery vested at the primary care level. A key element of primary health care is its referral system in which patients are able to access care at community-based health posts or health centres before accessing higher-levels of care such as secondary and tertiary hospitals (Abraham, Linnander, Mohammed, Fetene & Bradley, 2015). Nurses are an integral component of the primary health care system. Working in a variety of settings, they are front-line providers of these services and also play a crucial role in the early recognition and management of patients. (Dalton, Harrison, Malin, & Leavey 2018), however, the quality of PHC delivery and the decision to utilize the referral system depends on some factors such as knowledge, skills, awareness, communication, attitude of primary care providers (Nshimirimana, Mwaura-Tenambergen, Kokonya & Adoyo, 2016).

Afolaranmi, Hassan, Filibus, Al-Mansur, Lagi, Kumbak and Chirdan (2018) defined referral as a set of activities undertaken by a health provider in response to its inability to provide diagnostic and therapeutic intervention as it relates to the health care need of the patient. Referral is also warranted when the type or severity of illness presented supersedes the training or experience of the staff, or when appropriate drugs or equipment are not available at the basic health care level (Haliq, 2015).

The referral system is a two-way relationship between health facilities ensuring continuity and complementation of health services. The referral system requires cooperation, coordination and exchange of information between the primary health facility and the first referral hospital during the referral and discharge of patient from the hospital (Asuke, Sabitu, & Ibrahim, 2019). The authors further opined that referral system is needed in the health system to maximize limited resources, avoid duplication of services, promote cooperation and complementation between primary, secondary and tertiary health facilities. Referral can be either external or internal. External referral is a referral done between one health care facility and another. External referral can be vertical or horizontal (Asuke, Sabitu, & Ibrahim, 2019). A vertical referral according to Enabulele and Enabulele, (2018) is a referral from a lower to higher facility or from a higher to lower facility. While a horizontal referral is a referral from one facility to another within the same level but different catchment. On the other hand, an internal referral is a referral done within the same health care level and facility. Also, referral can be from public or private sectors through the physician or other health workers.

According to Koce (2019), trained medical doctors are the principal care providers within the PHC facilities in developed countries. This contrasts with the Nigerian system where most of the care providers within government owned PHC facilities are nurses and community health workers. There has however been low utilisation of the referral system by health workers at this level of care thereby overburdening the higher levels of care with management of ailments that would have been handled at the primary health care level. Evidence of low utilisation and its negative effects has been demonstrated by some studies in other parts of the country as in the case of Oluseye, Kehinde, Akingbade, Ogunlade, Onyebigwa and Oluwatosin (2019), Okonofua, Imosemi, Igboin, Adeyemi, Chibuko, Idowu and Imongan (2017) and Sageer, Kongnyuy, Adebimpe, Omosehin, Ogunsola and Sanni (2019).

It was observed that most primary health care centres lack transport facilities, communication facilities, referral forms among others for effective referral to be effective and even where there are adequate referral forms, it is either that nurses are not knowledgeable on how to fill them or they are reluctant to do so. There is also reluctance to follow the

standardized referral instructions which might be because they expect no major benefits from referral, but also for fear of losing face.

Utilisation of referral system by healthcare workers has been an issue of great concern because of the effect on the outcome of care as it ensures optimal care at appropriate levels, cost effectiveness of care, optimum utilisation of hospital facilities, effective triaging and sorting of patients as well as continuity of care and follow up. Although previous studies have focused their work on factors influencing the utilisation of the referral system among health workers, information is scarce on the factors influencing the utilisation of referral system among nurses who are integral components of primary health care. Therefore, this study seeks to assess the factors influencing utilisation of the referral system in selected primary health care centres among nurses in Rivers State, Nigeria with the intention of making appropriate recommendations.

Based on the foregoing, the study investigated the factors influencing the utilisation of the referral system in selected Primary Health Care centres among nurses in Rivers State. The study specifically examined:

- i. the level of utilisation of the referral system in selected Primary Health Care Centres among nurses;
- ii. the influence between knowledge about the referral system and its utilisation of the referral system;
- iii. the influence between availability of communication facilities and utilisation of the referral system;
- iv. the influence between availability of transportation and utilisation of the referral system; and
- v. the influence between nurses attitude about the referral system and utilisation of referral system.

Research Question

The following research question was raised to guide the study:

1. What is the level of utilisation of the referral system in selected Primary Health Care Centres among nurses in Rivers State?

Research Hypotheses

The following null hypotheses were generated for this study:

1. There is no significant influence between knowledge about the referral system and its utilisation of the referral system among respondents in selected primary health care centres.
2. There is no significant influence between availability of communication facilities and utilisation of the referral system in selected primary health care centres among respondents.
3. There is no significant influence between availability of transportation and utilisation of the referral system in selected primary health care centres among respondents.
4. There is no significant influence between nurses attitude about the referral system and utilisation of referral system among respondents in primary health care centres

Methodology

A descriptive survey design was utilized to assess the factors influencing utilisation of the referral system in selected PHC centres among nurses. The population of the study consists of all the nurses in Primary Health Care centres in Rivers East senatorial district of Rivers State. The selection of the senatorial zone was determined through simple random

sampling by balloting; and Rivers East Senatorial District of Rivers State was picked. The Rivers East Senatorial District is made up of eight Local Government Areas which hold a total population or enumeration of 190 nurses. The sample for this study consisted of 95 nurses selected using multi-stage sampling procedure.

Data from respondents was collected with the use of self-designed questionnaire. The questionnaire was divided into six (6) sections which are A, B, C, D, E and F. Section A gathered demographic data of respondents and consists of 5 questions; Section B gathered information on respondent's level of utilisation of the referral system which consists of 10 items. Section C sought information on respondents' knowledge of the referral system. Knowledge score of respondents below 50% was categorized as low, knowledge score of respondents between 50% to 69% was categorized as moderate while, knowledge score of respondents between 70% and above was categorized as high. The questions consist of 13 items. Section D gathered information on referral communication which consists of 7 items. Section E elicited information on transportation which consists of 6 items while Section F also elicited information on attitude of respondents to utilisation of referral system which consists of items. Questions on sections B, D, E and F were on a four point Likert scale.

The instrument was subjected to face and content validity through thorough screening by senior nurses and experts of Tests and Measurement. In so doing, all irrelevances and ambiguous items were eliminated. The reliability of the instrument was determined by finding the internal consistency through a pilot study conducted outside the sampled locations. Data collected were tested using Cronbach alpha which yielded reliability coefficient value of 0.71 for section B, 0.82 for section C, 0.76 for Section D, 0.73 for section E and 0.86 for Section F. The above coefficients were high enough to guarantee the reliability of the instrument.

The research questions were answered using frequency count, percentages and mean. All hypotheses were tested using Chi-square analysis at 0.05 level of significance.

Results

Descriptive Analysis

Research Question 1: What is the level of utilisation of the referral system in selected Primary Health Care Centres among nurses in Rivers State?

Table 1: Item Analysis for level of utilisation of the referral system

S/ N	ITEMS	RESPONSES				Mean	Remark
		A	S	R	N		
1.	I refer patient when there is indication for referral	79 (83%)	12 (13%)	2 (2%)	2 (2%)	3.77	High
2.	Patients are informed about the reasons for referral	80 (84%)	13 (14%)	2 (2%)	0 (0%)	3.82	High
3.	Patients are referred with a duly signed referral form	84 (88%)	8 (9%)	3 (3%)	0 (0%)	3.85	High
4.	Ambulance is made available for emergency cases	43 (45%)	34 (36%)	15 (16%)	3 (3%)	3.23	High
5.	The address and contact of the receiving facility is made available to patients	66 (69%)	19 (20%)	9 (10%)	1 (1%)	3.58	High

6.	Patient are referred using standing order and treatment guidelines	46 (48%)	30 (32%)	11 (12%)	8 (8%)	3.20	High
7.	Staff accompany patients to receiving facility especially if patient is on intravenous infusion	61 (64%)	15 (16%)	13 (14%)	6 (6%)	3.38	High
8.	I get feedback from receiving facility	28 (29%)	29 (31%)	26 (27%)	12 (13%)	2.77	Moderate
9.	Follow up services for referred patients are available	31 (33%)	34 (36%)	24 (25%)	6 (6%)	2.95	Moderate
10.	All referred cases are documented in a register to monitor follow-up	55 (58%)	23 (22%)	16 (17%)	2 (2%)	3.37	High
	GRAND MEAN(X) N=95	57 (60%)	22 (23%)	13 (13%)	3 (3%)	3.39	High

Source: Field Study (2020)

Note. A=Always (4), S=Sometimes (3), R=Rarely (2) and N=Never (1)

Remark: High = 3.0 – 4.0, Moderate = 2.5 – 2.99, Low = 1.0-2.49

Table 1 shows the mean response of the participants on level of utilisation of the referral system among nurses in Rivers State. The mean level of utilisation was categorized into three – High, Moderate and Low. As such, any item that produced a mean within the range of 3.0 to 4.0 is graded High-meaning that most participants performed well on the item (that is referral methods are well utilized or frequently used) while, any item with a mean between 2.50 to 2.99 is graded as Moderate (showing moderate utilisation) and the last category any item with a mean between 1.0 to 2.49 is graded Low-meaning that most participants performed poorly on the item (that is referral methods are under-utilized or rarely used).

The result from Table 1 showed the percentage of participants and their responses as regards the utilisation of the referral system in Rivers state; here, 60% said Always, 23% responded Sometimes, 13% said rarely and 3% said Never to the frequency in the use of referral methods in their various health facility. Therefore, the result explains that 83% of the participants affirm the utilisation of referral system in health centres in Rivers State. Consequently, the grand mean scores of 3.39 reveals that the majority of the participants had good level of utilisation of referral system. This means that on the whole, referral system is well utilized or frequently used by nurses in Rivers State.

However, 2 out of 10 items had moderate level of utilisation; which include item 8 (I get feedback from receiving facility) and item 9 (Follow up services for referred patients are available) respectively. This result reveals that in spite of the efficient nature of the referral system in Rivers State, the aspect of getting feedback from receiving facility and follow up services within the system is moderately utilized among nurses in Rivers State and needs to be improved upon.

Testing of Hypotheses

Hypothesis 1: There is no significant influence between knowledge about the referral system and utilisation of the referral system among respondents in selected primary health care centres.

Table 2: Chi-Square for the Influence of knowledge about the referral system and utilisation of the referral system

Utilisation	Knowledge			Total	N	X ²	df	Sig.	Decision
	Low	Average	High						
Moderate	5(31%)	1(5%)	12(20%)	18(19%)	95	4.18	2	.123	Not Significant P> 0.05
Good	11(67%)	19(95%)	47(80%)	77(81%)					
Total	16(100%)	20(100%)	59(100%)	95 (100%)					

The results from Table 2 showed that calculated chi-square (X²) is 4.185 and p-value of 0.123. The p-value of 0.123 is greater than the chosen level of significance (P< 0.05), hence, the null hypothesis is not rejected. This means that there is no significant influence between knowledge about the referral system and its utilisation of the referral system among respondents in selected primary health care centres among nurses in Rivers State. The result reveals that the level of utilisation of referral system (that is moderate or good) across the categories is not statistically dependent on the extent of knowledge about referral system (either low, moderate or high) among nurses in Rivers state

Hypothesis 2: There is no significant influence between availability of communication facilities and utilisation of the referral system in selected primary health care centres among respondents.

Table 3: Chi-Square for the Influence of availability of communication facilities and utilisation of the referral system

Utilisation	Communication			Total	N	X ²	df	Sig.	Decision
	Poor	Average	Good						
Moderate	1(11%)	5(33%)	12(17%)	18(19%)	95	2.58	2	.276	Not Significant P> 0.05
Good	8(89%)	10(67%)	57(83%)	77(81%)					
Total	9(100%)	15(100%)	69(100%)	95 (100%)					

The results from Table 3 showed that calculated chi-square (X²) is 2.58 and P value of 0.276. The P value of .276 is greater than the chosen level of significance (P< 0.05), hence, the null hypothesis is not rejected. This means that there is no statistically significant influence between availability of communication facilities and utilisation of the referral system among nurses in primary health care centres in Rivers State. The result explains that the utilisation of referral system among nurses in Rivers state is not dependent on availability of communication facilities. Simply put, the extent of available communication facilities does not influence the utilisation of referral system among nurses in Rivers State.

Hypothesis 3: There is no significant influence between availability of transportation and utilisation of the referral system in selected primary health care centres among respondents.

Table 4: Chi-Square for the Influence of availability of transportation and utilisation of the referral system

Utilisation	Transportation			N	X ²	df	Sig.	Decision
	No	Yes	Total					
Moderate	14(23%)	4 (12%)	18(19%)	95	1.78	1	.182	Not Significant
Good	47(77%)	30(88%)	77(81%)					P>0.05
Total	61(100%)	34(100%)	95(100%)					

The results from Table 4 showed that calculated chi-square (X²) is 1.78 and p-value of 0.182. The P value of 0.182 is greater than the chosen level of significance (P< .05), hence, the null hypothesis is not rejected. This means that there is no statistically significant influence between availability of transportation and utilisation of the referral system among nurses in primary health care centres in Rivers State. The result explains that the utilisation of referral system among nurses in Rivers state is not dependent on availability of transportation. With these results, it can be inferred that utilisation of referral system is not determined on the availability or unavailability of transportation for referral purposes.

Hypothesis 4: There is no significant influence between nurses' attitude about the referral system and utilisation of referral system among respondents in primary health care centres.

Table 5: Chi-Square for the Influence between nurses' attitude about the referral system and utilisation of the referral system

Utilisation	Attitude of Nurses			N	X ²	df	Sig.	Decision
	Negative	Positive	Total					
Moderate	6(24%)	12(17%)	18(19%)	95	.206	1	.605	Not Significant
Good	19(76%)	58(83%)	77(81%)					P>0.05
Total	25(100%)	70(100%)	95(100%)					

Note. 1 cell had expected frequency less than 5 (Assumption for 2x2 not met, thus, Yates Correction was applied)

The assumption for Chi square expected frequency counts, states that no cell in a 2x2 contingency table should be less than 5. However, when this assumption is not met, then Yates' correction formula should be applied (Adeleke, 2010; Kothari & Garg, 2014). The results from Table 5 showed that the calculated Yates' Correction (X_c²) is 0.206 and p-value of 0.605. The P value of 0.605 is greater than the chosen level of significance (P< .05), hence, the null hypothesis is not rejected. This means that there is no statistically significant influence between nurses' attitude about the referral system and utilisation of the referral system among nurses in primary health care centres in Rivers State. The result explains that the utilisation of referral system among nurses in Rivers state is not dependent on nurses' attitude about the referral system. With these results, it can be said that utilisation of referral

system is not determined on whether nurses' attitude about the referral system is negative or positive.

Discussion

The study showed that the utilisation level of referral system among PHC nurses was high with a grand mean of 3.39. Only two of ten items on level of referral system utilisation turned out moderate. The two items are feedback from receiving facility (item 8) and follow up services within system (item 9). The rest items were high. This result does not concur with the low frequency of patients' referrals found among health workers in Oyo State in Nigeria by Oluseye et al. (2019). The result was well expected that the level referral utilisation among nurses in Rivers State PHC centres was admitted as good amidst the peculiar challenges of the health care facilities. This is so because, generally speaking, most of the PHC centres in the area are not up to standard in terms of infrastructures, equipment, basic amenities like steady light, short supply of necessary utilities and drugs and insufficient manpower. These make treatment of patients in various degree of ailment difficult. As a result, the nurses are forced to make referral to other healthcare facilities even for cases that ordinarily should have been handled at the local level or PHC. In a nutshell, the good use of referral here is almost an inevitable necessity.

The findings of the study showed that there was no significant influence between knowledge about the referral system and utilisation of the referral system among respondents in selected primary health care centres among nurses in Rivers State. The finding explains that the way utilisation level is distributed across the categories (19% for moderate and 81% for high) does not change significantly at the different levels of knowledge (low, Average and High) among participants. This means that utilisation of referral system is not dependent on the knowledge of the nurses. This finding is in line with the findings of Omole et al. (2017) who found up to 93.8%-100% knowledge level among their respondents. It also agrees with the findings of Oluseye et al. (2019) who also reported good referral knowledge among health care workers in Oyo State, Nigeria. However, the finding differs from that of Jaeger, Bechir, Harouna, Moto and Utzinger (2018) who reported poor knowledge among health workers.

The study also revealed that there was no significant influence between availability of communication facilities and utilisation of the referral system in selected primary health care centres among respondents in Rivers State. It means that the utilisation of referral system in PHC is not dependent on availability of communication facilities. The finding contrast those of Alex (2017) and Jaeger et al (2018) who opined that poor communication is a factor influencing the utilisation of referral system among health practitioners. Some communication problems they identified include poor network, no provision of call credits, and poor documentation for those with referral forms leading to unsatisfactory information. Omole, Mora, Yunusa, Audu, Jatau and Gobir (2017) stated that lack of prior discussion of cases before receiving is a problem in referral. By implication they do not make much use of the communication facility if at all they are available as claimed.

The study further showed that there was no significant influence between availability of transportation and utilisation of the referral system in selected primary health care centres among respondents in Rivers State. It can be inferred that utilisation of referral system is not dependent on the availability or unavailability of transportation facility for referral purposes. The finding of the study agrees with Kamau, Osuga and Njuguna (2017) on the unavailability of transportation facilities but disagrees with them on its effect on the use of referral system.

It follows that regardless the deplorable conditions of roads in the rural areas where most of these PHC centres are situated, the nurses carry out referral services.

It was revealed from the findings of the study that there was no significant influence between nurses' attitude about the referral system and utilisation of referral system among respondents in primary health care centres in Rivers State. It can be said that utilisation of referral system is not determined on whether nurses' attitude about the referral system is negative or positive. The finding of the study does not collaborate with the findings of Omole et al. (2017) who found negative attitude. They opined that 21.9% of health workers are reluctant to discuss with referring or initiating facilities and only 33.3% agree that all referrals no matter the nature, details or circumstances should be received in their facilities.

Summary of Major Findings

The following are the major findings of the study:

1. The grand mean scores (Mean=3.39) revealed that there is a good level of utilisation of referral system among nurses in Rivers State. About 83% of the participants affirm the utilisation of referral system in health centres in Rivers State.
2. There was no significant influence between knowledge about the referral system and utilisation of the referral system among respondents in selected primary health care centres among nurses in Rivers State ($X^2 = 4.18$, $df = 2$, $P > .05$).
3. There was no significant influence between availability of communication facilities and utilisation of the referral system in selected primary health care centres among respondents in Rivers State ($X^2 = 2.58$, $df = 2$, $P > .05$).
4. There was no significant influence between availability of transportation and utilisation of the referral system in selected primary health care centres among respondents in Rivers State ($X^2 = 1.78$, $df = 1$, $P > .05$).
5. There was no significant influence between nurses' attitude about the referral system and utilisation of referral system among respondents in selected primary health care centres in Rivers State ($X^2 = 0.206$, $df = 1$, $P > .05$).

Conclusion

This study has uncovered that nurses in the PHC centres have high knowledge about referral system and there is high level of utilisation of the system, but to think that the use does not depend on the knowledge and attitude of the nurses as well as on the availability of communication and transport facilities raise doubt on how well and manner in which the referral is used. Therefore, relevant authorities should look into the practice of referral systems to ensure it is not abused nor misused by health workers.

Recommendations

The following recommendations were made based on the findings of the study.

1. Equipping to standard the PHC centres and furnishing of the PHC centres with necessary equipment and facilities will help the system to live up to its functions.
2. Government through the Hospital Management Board should provide PHC centres with necessary transportation facilities such as functional ambulance and good access roads. This will ease the transfer of patients from referral facility to receiving facility.
3. Hospital management should take an action on the review of referral forms as this will help them to know how well referrals are done and handled by workers in the healthcare facilities especially in PHC facilities.
4. The management team on review of referral cases should take disciplinary actions on defaulters of referral guidelines. This will help curb the use of unnecessary

referrals and abuse of the system.

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