

Medication Administration, Organizational Culture and the Role of Acute Care Nurses

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Problem:

International research highlights the risks associated with medication administration, with estimates that one in five doses that reach a patient contain an error (Barker, et al., 2002; Tissot et al., 2003). Furthermore, research on organizational culture highlights the effect that culture has on safety practices within health organizations, which directly impacts medication-related issues (Singer et al., 2003).

Evidence:

No research has been conducted in the New Zealand environment; however, an analysis of incident reports from District Health Boards indicates that health care organizations in this country are also significantly affected by medication administration errors (McBride-Henry & Foureur, 2006).

Strategy:

A systematic review of the literature related to this topic raised several key research questions. This led to the establishment of a research team, who designed a project to address these issues. The principal aim of this research was to improve perceptions of the organization's safety culture through focusing on the issue of medication administration.

Practice Change:

We employed a multi-method approach that included a survey, using the Safety Climate Survey tool, focus groups and three clinical practice development groups. The practice development initiatives included education sessions, anonymous reporting of near-miss medication events and clinically-based working groups.

Evaluation:

At the completion of the project, staff involved in the practice development groups were re-surveyed and engaged in evaluative focus groups.

Results:

Participants involved in the practice development groups demonstrated a marked increase in safety climate scores, and spoke to the improvement in medication safety in their units during the focus groups.

Recommendations:

The outcomes of this study indicate that practice development initiatives based on research evidence can have a positive effect on nurses' perceptions of organizational safety, which in turn has a positive impact on patient safety (Pronovost et al., 2003).

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