The Relationship between Nursing Students’ Perceived Sense of Belongingness and their Willingness to Self-Report Medication Errors in the Clinical Practice Setting: A Feasibility Study

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Presentation Overview

Step 1
- Literature Review
- Study Purpose

Step 2
- Primary Objectives
- Secondary Objectives

Step 3
- Conceptual Framework
- Methods

Step 4
- Ethical Considerations
- Findings

Step 5
- Implications and Limitations
Literature Review - Registered Nurses (RNs)

- 2005 Canadian National Survey: 1/5 of hospital based RNs involved in medication errors
  (Wilkins & Shields, 2008)

- Barriers to reporting of medication errors: wishing to maintain positive collegial relationships and to be accepted (belongingness)
  (Levett-Jones, Lathlean, McMillan, & Higgins, 2007)
- Paucity of published studies examining medication errors in nursing student population

- Transition to clinical setting $\rightarrow$ high anxiety levels
  (Moscaritolo, 2009; Sheu, Lin, & Hwang, 2002; Sprengel & Job, 2004)

- Decision-making processes: becoming part of team (primary goal) takes precedence over quality of care
  (Levett-Jones, Lathlean, Maguire, & McMillan, 2007)

- Students will conform to poor practices
  (Levett-Jones, Lathlean, Maguire, & McMillan, 2007)
The purpose of this pilot study was to determine the feasibility of conducting a larger scale study examining the relationship between nursing students’ perceived sense of belongingness and their willingness to self-report medication errors in the clinical practice setting.
Primary Objectives

- Response Rate
- Nursing students’ willingness to participate
- Appropriateness of study protocol
Secondary Objectives

Validity and reliability of study instruments

Relationship between nursing students’ perceived sense of belongingness and their willingness to self-report medication errors in the clinical practice setting.
Examined the concepts of perceived sense of belongingness and willingness to self-report medication errors

- Paucity of studies examining relationship between two main variables
Methods

- Descriptive, correlational pilot study: examine feasibility

- **Setting**

- **Sample Size**

- **Sampling (four phase sampling strategy)**

- **Instruments**
  - BES – CPE and MAE Reporting Survey (original and modified)
Ethical Considerations

- Right to self determination
- Privacy of participants
- Anonymity and confidentiality of participants
- Right to fair treatment
- Right of protection from discomfort and harm
Findings: Primary Objective (a) – Response Rate

- Response rate: 100%

- Sample demographics (similar to other studies)

- 23.4 years of age, females, single, diverse ethnic backgrounds

- Four participants had prior postsecondary education

- Ten participants possessed experience in health care
Findings: Primary Objective (a) – Response Rate

- Participants who obtained previous diploma or degree **INCREASED** willingness to self-report medication errors

- Participants previously enrolled in fourth year **INCREASED** willingness to self-report medication errors

- Participants with previous experience in health care **DECREASED** willingness to self-report medication errors

- Participants with previous experience in health care **DECREASED** perceived sense of belongingness
Findings: Primary Objective (b) – Willingness to Participate

- Investigator’s availability
- Ease of comprehension of questionnaires
- Length of completion of questionnaires
- Completing questionnaires online
- Interest in topic
Findings: Primary Objective (c) – Appropriateness of Study Protocol

- Paper/electronic options
- Sample inclusion criteria
- Ease of questionnaire completion
- Recruitment process: 2 to 2.5 weeks
- Instructions for questionnaire completion
Findings: Secondary Objective (a) – Reliability of Study Instruments

- Cronbach’s alpha for BES – CPE was 0.862
- Cronbach’s alpha for subsection of original MAE instrument was 0.846
- Cronbach’s alpha for modified subsection MAE was 0.845
Findings: Secondary Objective (b) – Relationship between Nursing Students’ Perceived Sense of Belongingness and their Willingness to Self-Report Medication Errors in the Clinical Practice Setting

- Pearson’s correlation

- Statistically nonsignificant inverse relationship
  \( r = -0.231; p = 0.219 \)

- Small sample size, deviant sample, problems with internal validity, inadequate measurement, weak statistical techniques?
Implications

Nursing Research

- Exploration of belongingness and self reporting of medication errors
- Intervention studies examining influence of strategies relating to belongingness
Implications

Health care Organizations

- Explore meaning of belongingness with HCPs
- Belongingness in RNs across career continuum
- Preceptors and mentors
Implications

Nursing Education in the Academic Setting

- Interprofessional courses
- Belongingness in group work
- Faculty members as mentors
- Alumni as mentors
Nursing Education in the Practice Setting

- Nurse educator development programs
- Group mentoring program for nursing students
Limitations

- Setting and sampling
- Response rate
- Instrument not tested in study population
- Pilot participants included in larger study
References


Additional References

Additional references available upon request.

Thank you for attending my presentation!
QUESTIONS ?