Exploring Nurses’ Barriers, Attitudes and Related Factors in Reporting Medication Administration Errors
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Purpose: To explore nurses’ perceptions of reporting barriers and attitudes in reporting medication administration errors (MAEs) and to examine the relationship between the barriers and attitudes in MAEs reporting. Medication safety is a major concern worldwide that directly relates to patient care quality and patient safety. Reducing medication administration error incidents is a critical medication safety issue. Research indicated that most of medication errors happened during the administration stage. However, nurses estimated that only 25% to 63% of MAEs were actually reported. Understanding of nurses’ barriers in reporting MAEs, their attitudes and related factors is the initial step to strengthen medication safety.

Methods: A cross-sectional, descriptive correlational design with self-administered questionnaire filled out by the nurses of a medical center hospital in northern Taiwan was conducted. The measurement tools included the Barriers to MAEs Reporting Questionnaire and Attitudes to MAEs reporting Questionnaire. 340 nurses responded to the survey, with 306 valid questionnaires used in the data analysis of this study.

Results: The major perceived barrier was fear of the consequences of reporting (3.18 ± 0.48), followed by lack of perceptions in reporting (2.72 ± 0.75) and the impact by the administrator’s attitudes (2.36 ± 0.54). The staff nurses’ perceptions of reporting barriers was higher than nurse administrators with a significant difference (2.75 ± 0.34 vs. 2.61 ± 0.35; t = 2.71; p = .007). Nurses’ perceptions of reporting attitudes was neutral yet slightly positive (2.47 ± 0.40); but the nurse administrators had a more positive attitudes than staff nurses (2.91 ± 0.42 vs. 2.38 ± 0.33; t = -8.43; p < .001). The study also reveals that the more barriers nurses perceived, the more negative attitudes to MAEs reporting. The barriers to MAEs reporting and attitudes to MAEs reporting were negative association (r = -0.41; p = .001). Among a total of 306 administration errors were collected, most errors had occurred during the day shift (45.8%; 140/306). The most common errors involved wrong dose (50.8%; 155/306) and wrong drug (36.1%; 110/306). Among 306 actual errors, 85.6% (262/306) of patients showed no adverse effects. Oral reporting rates to the nursing department was 94.1% (255/272), nurses most common reported to head nurse 81.2% (207/272) and coworkers 66.7% (170/272).

Conclusions: This study shows that the nurses still have fear and feel insecure even when the administration encourages reporting without blaming; the attitudes of reporting MAEs is also positive. Thus, it is advisable to strengthen the perceptions of reporting and improve the nurses’ attitudes in reporting MAEs for the overall improvement in MAEs reporting culture.