Nearly one million hospital patients are injured yearly due to medication error.

Bar coded medication administration systems (BCMA) are one of the proposed solutions to prevent and reduce errors.

Workarounds caused by lack of policy may be creating safety issues for patients, along with practice issues for nursing students and their faculty.

The issues of supervision of nursing students learning safe medication administration using BCMA systems is juxtaposition with the lack of policies to guide nursing instructors who supervise these students in medication administration.

Very little has been written about nurse faculty's role in BCMAs and the supervision of nursing students.

The purpose of this research was to identify current practices, policies, and processes impacting nursing faculty who supervise nursing students administering medications in the clinical setting using BCMA systems.

Methods

A descriptive cross sectional survey method was used to better understand the current use, processes, and policies in practice today which impact nursing faculty supervising nursing students in clinical settings.

Sample

Deans/Directors of 267 B.S.N programs in 42 states and 264 A.D. programs in 45 states were invited to distribute the online survey link to their clinical faculty.

213 surveys were returned from faculty in 17 states representing all regions of the U.S

Results

74% of respondents felt technology increased patient safety.

Difficulties with technology included: availability, overrides, and trouble with labels/scanners.

55% of agencies either had no policy about nursing students' administration of medication or faculty were unsure about the policy.

60% of nursing students were assigned EHR codes and given the ability to chart medication distribution.

71.2% (n=151) of agencies did not provide access for nursing students to retrieve medication from dispensing machines.

In most cases, faculty and staff (n=119 and n=37, respectively) retrieved medication for nursing students to administer.

47.4% of nursing students documented medication administration.

Discussion

Most hospitals do not have a separate policy for nursing student medication administration.

It is not clear from this survey to what extent faculty are engaged in workarounds – and if they are aware these are workarounds related to this lack in policy.

BCMA and EHR systems have legal implications for supervision of nursing students by faculty.

Falsification of the record occurs when nursing students have no personal code and faculty or staff document the medication (workaround), thus the name of the person administering medications is not accurately reflected on the EHR.

Recommendations

Faculty and nursing preceptors who supervise nursing students in skills of medication administration should know and recognize what constitutes workarounds.

Faculty should receive clear policy and training in the use of all EHR and BCMA systems.

Additional research on the impact of BCMA systems and EHRs on safe and legal training of our future nursing workforce is needed to ensure protection of patients, nursing students, and faculty.

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