

Transitioning RN Residency Program: Implementing Medication Safety Education in Practice

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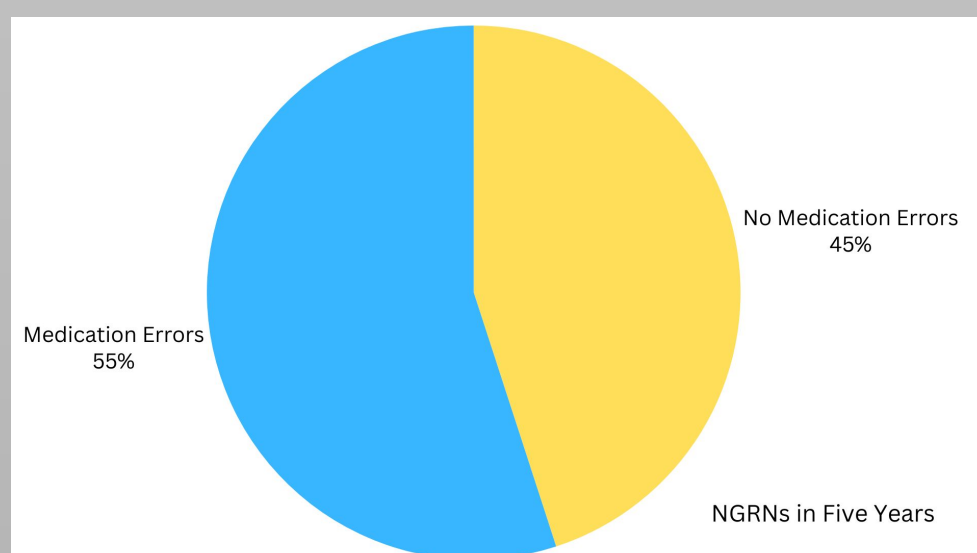
Abstract

Clinical nursing can affect a nurse's physical and mental well-being. The aging population stresses healthcare providers, including nurses, due to the increased comorbidities and medications needed to treat them. New graduate nurses (NGRNs) can enhance their success by completing a Practice Transition Accreditation Program (PTAP). Despite residency programs, new nurses often find it challenging to meet the demands of clinical settings, leading to compromised patient outcomes and medication errors (MEs). Offering comprehensive medication administration education can reduce errors and discrepancies. Equipping new graduate nurses with the necessary knowledge and skills is crucial for improving patient outcomes and ensuring long-lasting nursing careers for the future.

Keywords: PTAP, MEs, NGRN

Background

The American Association of Colleges of Nursing (AACN) reports a shortage of registered nurses in the US due to aging demographics and increasing healthcare needs (2023). Nursing schools face challenges in expanding capacity to meet demand, with many nurses nearing retirement. New nurses often make errors early in their careers, emphasizing the need for comprehensive training and support programs (Dehvan et al., 2021; Murray et al., 2019). Research shows that medication errors are common among new graduate nurses, highlighting the importance of standardized guidelines and enhanced medication education in RN residency programs to reduce errors and promote a blame-free reporting culture (Alrabadi et al., 2021; Kim & Lee, 2020).



Literature Review

- Transitioning from nursing theory to practice can be challenging, especially for experienced nurses and program new graduates (Kim & Shin, 2020).
- Murray et al. (2020) suggests enhancing education on medication administration can help reduce discrepancies in the clinical setting, minimize negative patient outcomes, and boost nurse retention.
- Aligning the curriculum with the clinical setting is crucial to prepare graduates for the complexities of the healthcare delivery system (Gcawu & Van Rooyen, 2022).
- According to the study by Kua et al. (2020), adding an additional medication education simulation in the final semester of nursing school significantly reduced medication errors. This intervention also enabled students to identify medication discrepancies before administration.
- Nursing residents face increased risks and clinical errors due to their limited skills, experience, and knowledge (Dehvan et al., 2021).
- Systematizing guidelines for enhanced medication education and training during the RN residency can reduce medication errors and promote a blame-free reporting culture (Alrabadi et al., 2021; Kim & Lee, 2020).

Methodology

Research Question:

Would incorporating an extra curriculum on medication education into the RN residency program help reduce medication errors during the first year of a NGRN in a clinical setting?

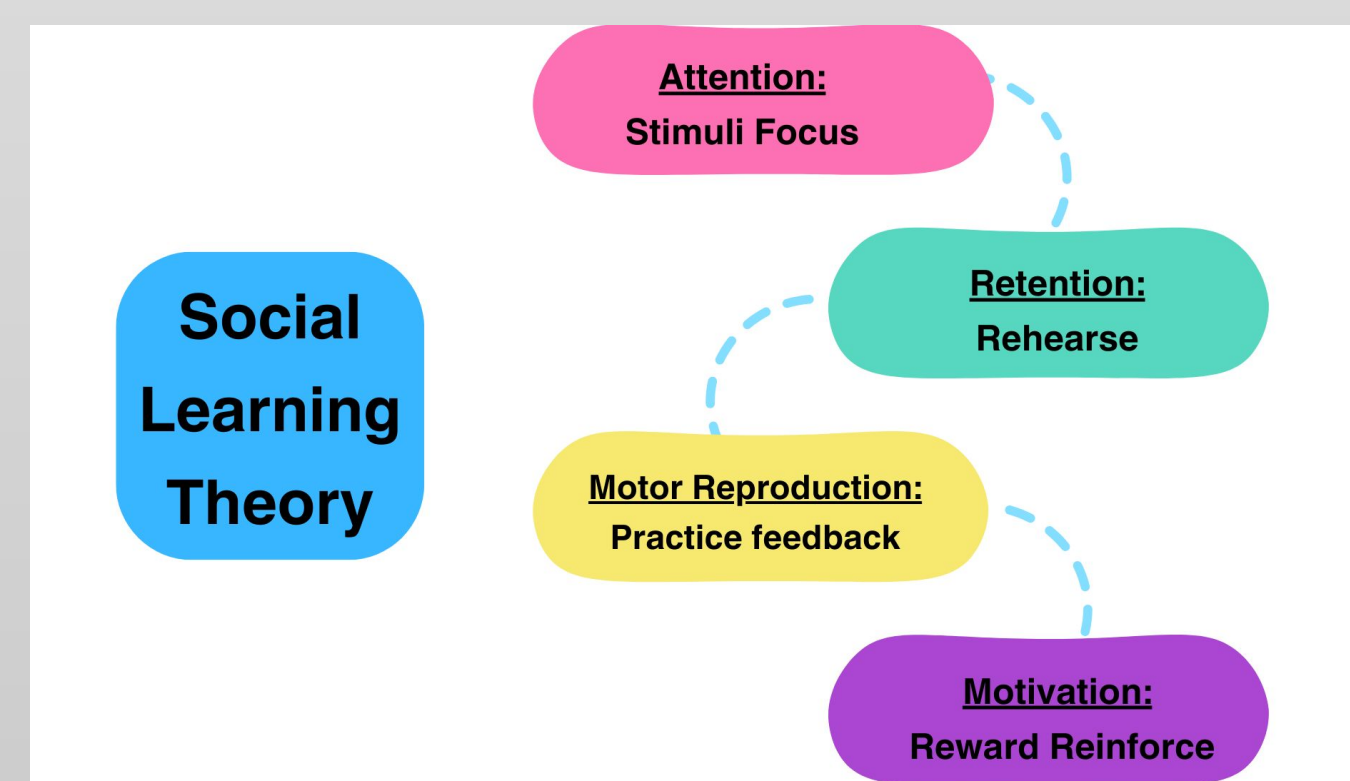
Ethics:

Approval from FHSU and Legacy Health Institutional Review Boards (IRBs) will be obtained before starting this research. To reduce bias, all NGRNs in the Legacy Health residency program from the same cohort will be monitored during the initial three years of their clinical practice, regardless of their specialty area.

Methodology

Theory Framework:

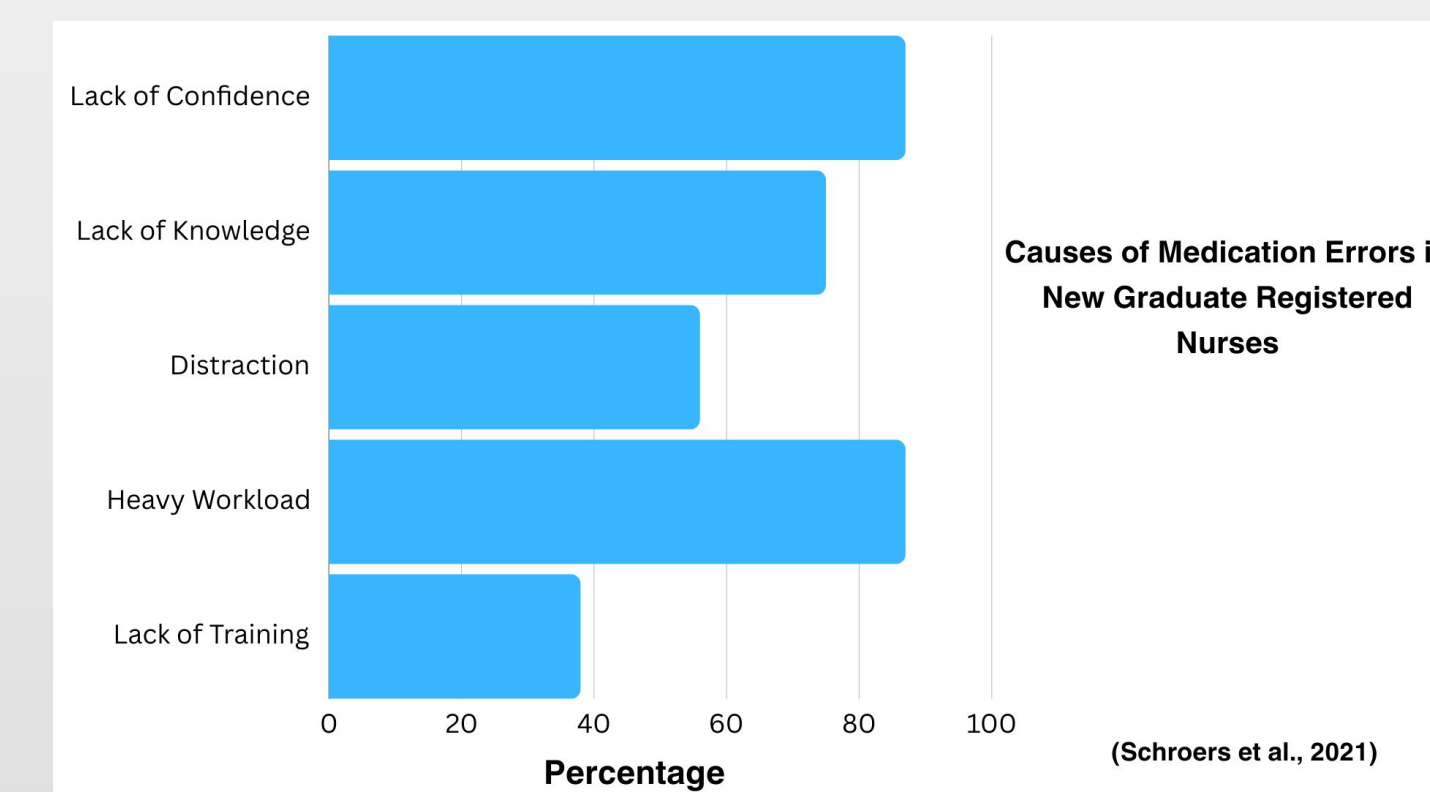
The research will be based on the Social Learning theory, consisting of four categories: Attention, Retention, Motor Reproduction, and Motivation (Mukhalalati et al., 2022). In nursing education, this involves students learning from seasoned nurses, clinicians, and educators by observing their actions, communication, and clinical decision-making. Improved education in a particular area is linked to a nurse's knowledge enhancement. The greater the knowledge acquired, the fewer mistakes are likely to occur.



Anticipated Findings

Findings:

The literature review highlighted that medication errors among newly graduated registered nurses (NGRNs) stem from factors such as inadequate knowledge, limited clinical experience, understaffing, and insufficient patient monitoring. Including more educational material in the RN residency program could reduce medication errors in the initial stages of a nursing career, preventing adverse patient outcomes and nurse turnover. Additionally, it fosters an environment where nurses are encouraged to report errors without fear of backlash from management.



Conclusion

Introducing a comprehensive medication safety education curriculum within an RN residency program before newly graduated registered nurses (NGRNs) enter the acute care environment can enhance nurses' knowledge and retention. Studies have shown that additional medication safety training involving simulations can boost understanding of medication safety (Willman et al., 2020), ultimately reducing adverse patient outcomes. Future studies could concentrate on a more structured evaluation approach or specific tools to assess medication competency in NGRNs and better equip them for clinical practice.

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