



PROFESSION

Temporary health workers double risk of harmful drug mix-ups

Hospitals looking to save money or fill nursing gaps in emergency departments may be harming patient safety.

By KEVIN B. O'REILLY, *amednews* staff. *Posted Sept. 12, 2011.*

Health professionals working on a temporary basis in emergency departments are twice as likely to make medication errors that harm patients, says a study of nearly 24,000 drug mix-ups at 592 U.S. hospitals.

Most of the temp workers' mistakes were administration mix-ups made by nursing staff, who accounted for 76% of the errors. Physicians were responsible for 21% of the mix-ups, and other health professionals accounted for the rest.

By comparison, doctors accounted for 29% of the mistakes made by permanent staffers.

At least 6% of U.S. nurses work as temps, and about half of American hospitals report using temps, said the study in the July/August *Journal for Healthcare Quality*, published by the National Assn. for Healthcare Quality.

Of the 23,863 errors reported between 2000 and 2005, 99% were made by permanent staffers. But 8% of temporary worker errors harmed patients, compared with 4% of those made by permanent staff. Temps were nearly nine times more likely to make a drug error requiring a life-sustaining intervention.

The figures, drawn from the voluntary Internet-based drug error reporting system MEDMARX, show that the rising use of temporary workers to save on hospitals' health plan costs and address nursing shortages may be harming patient safety.

"When temporary staff are hired, they meet all the regulatory requirements, they're licensed and they're appropriately trained," said Julius Cuong Pham, MD, PhD, lead author of the study. "But there's always this feeling that because they're temporary and have a brand-new experience in a particular hospital that they may be different in terms of the safety of the care they provide."

While the link between temp workers and a higher risk for ED drug mix-ups is solid, the cause is unclear, said Dr. Pham, assistant professor of emergency medicine at Johns Hopkins University School of Medicine in Baltimore.

"If your ED is using a lot of temporary staff, it's probably an indicator that things are not going well there," he said. "Maybe you're expanding too rapidly, or patient volume is overwhelming your capacity to take care of the patients. Perhaps your staff are unhappy at that job or location, creating problems with filling full-time positions."

Hospitals should improve how they train new temporary workers about their policies, procedures and health information technology systems, Dr. Pham said.

ADDITIONAL INFORMATION:

WEBLINK

"Are Temporary Staff Associated with More Severe Emergency Department Medication Errors?" *Journal for Healthcare Quality*, July/August (www.ncbi.nlm.nih.gov/pubmed/21733020)

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