SSR ™
Safe Student Reports

Descriptive Study of Safe Student Reports (SSR) of Student Nurse Practice Errors and Near Misses

in Prelicensure Nursing Programs

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12/13/2017

Principal Investigator

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Proposal for the Safe Student Reporting Tool

Background

Through the National Council of State Boards of Nursing's (NCSBN's) Center for Regulatory Excellence, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN, from the University of Minnesota, received a grant to study and pilot a tracking system (the Generating Reports about Safe Student Practice or GRaSSP tool[1]) for reporting student nurse errors. There is no precedent, either nationally, internationally or in other health care professions, for tracking student errors on an ongoing basis. With preventable medical errors being associated with between 210,000 and 400,000 premature deaths annually in the U.S. (James, 2013), it is crucial to understand the magnitude of errors and near misses in all health care situations in order to learn how to prevent them in the future. Further, safety science calls for transparency in reporting errors and near misses so that we can identify and correct system errors (Barnsteiner & Disch, 2012; Disch & Barnsteiner, 2014; Institute of Medicine, 2001).

Literature Review

There is little available research on the type or extent of student nurse errors in the U.S. (Disch & Barnsteiner, 2014; Hes, Gaunt, & Gissinger, 2016) or internationally (Ozturk et al., 2017; Reid-Searl, Moxham, & Happell, 2010). Of the data that is available, most focuses solely on medication errors (Disch & Barnsteiner, 2014; Harding & Petrick, 2008; Hes et al., 2016; Reid-Searl et al., 2010; Wolf, Hicks, & Serembus, 2006). However, one study by Currie et al. (2009) conducted with postbaccalaureate nursing students in the first year of their advanced practice registered nurse program reported errors other than medication errors related to the following: infection, environmental, fall, and equipment issues.

Noland and Carmack (2015) suggested that nursing students may not gain sufficient experience in the transparent communication of errors through their education. Nursing students acknowledged the

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[1] Drs. Disch and Barnsteiner, and the University of Minnesota have signed over the legal rights to the GRaSSP tool to NCSBN. The tool has been rebranded and is now called the Safe Student Reports (SSR) tool, and it will be referred to that in the rest of this proposal.

importance of error reporting but admitted they frequently did not report errors. Fear of negative repercussions from faculty and peers may affect nursing students' decision to report errors (Disch, Barnsteiner, Connor, & Brogren, 2017; Natan, Sharon, Mahajna, & Mahajna, 2017). Additionally, Disch et al. (2017) suggested that a culture of underreporting may occur in part due to the fear that public knowledge of student errors may affect the status of clinical site agreements between nursing programs and clinical sites.

Individual programs that have independently developed safety reporting tools have seen positive results in the facilitation of error communication and the removal of barriers to reporting, and have reported success in creating a culture of transparency and patient safety (Cooper, 2013; Disch & Barnsteiner, 2014; Penn, 2014). Disch & Barnsteiner (2014) recommend that nursing programs and educators collect and analyze error and near miss data in order to assist in developing and implementing processes that will potentially decrease future errors and near misses.

Disch et al. (2017) conducted a national study including nursing schools (N = 494) across 48 states to determine the existence of policies and tools for nursing student error and near miss reporting. The researchers found that a majority (55%) of schools did not have a reporting tool for errors and near misses and most schools reported they either did not have a written policy (50%) or consistent standard (17%) for addressing student errors and near misses. The results suggest a residual need for policies, tools, and consistent approaches for managing errors and near misses involving student nurses. A faculty member at one of the participating schools commented "A repository and a tracking tool could help faculty and students anticipate vulnerabilities in the system and in their human response to it" (p. 30).

Objective of Study

To obtain baseline information from prelicensure nursing programs on the extent and types of student nurse practice errors and near misses in order to develop methods to reduce or prevent them.

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Methods

Study Design

This will be a descriptive study to evaluate the extent and types of student nurse practice errors and near misses in prelicensure nursing programs.

Reporting Tool

The SSR reporting tool was developed to provide data on the nature and frequency of student errors and near misses. The design was meant to provide an anonymous online platform where faculty (or students and faculty together or students and their preceptors) could report errors in detail, in a manner that allowed analysis of practice gaps but still promoted a just culture.

The tool was piloted at the University of Minnesota in 2013 (Disch & Barnsteiner, 2014). The pilot program showed that both student and faculty users had a positive response to the tool and found it robust enough to capture a wide array of incidents in a number of settings. User-suggested changes were implemented after the pilot to improve ease of use.

Disch and Barnsteiner (2014) stressed the importance of creating a national data repository of nursing student errors and near misses in order to develop interventions to reduce them. Thus, Disch and Barnsteiner approached NCSBN in spring of 2015 about housing the final, validated version of the tool and becoming the national repository for nursing student error data. The Regulatory Innovations Department at NCSBN held discussions with Disch and Barnsteiner about validating the final tool. One major change in the tool was made and agreed upon by all parties: In the pilot students were permitted to enter errors or near misses into the tool independently; it was agreed, however, that the NCSBN offering of the tool would require that errors or near misses be reported by faculty, a dyad of student and faculty, or other personnel such as a clinical preceptor. This was a crucial issue for nursing regulation because it would promote transparency of error reporting.

Additionally, Regulatory Innovations sent a survey to a sample of nurse educators to determine if there was interest in using the tool. While Disch and Barnsteiner reported that there was a lot of interest in

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nursing programs using the SSR tool, NCSBN believed it was important to confirm this prior to implementing the project. Of 376 nursing dean/director responses to the question about their willingness to use the SSR tool, 92% were either likely to use the tool or wanted to learn more about it before making the decision, while 8% reported they were unlikely to use the tool.

The Information Technology (IT) Department at NCSBN integrated the SSR tool into a database similar to the one used by the original researchers. With the acquisition of the SSR reporting tool, NCSBN will have developed the only national repository for student error reporting. Unlike other systems that only collect medication errors made by students (Hes et al., 2016), this tool will collect different types of errors or near misses (See Appendix A – New Occurrence Worksheet). Similar to other national databases that NCSBN maintains, the SSR tool will be a source of aggregate data on student nurse errors and near misses on an ongoing basis, filling an important knowledge gap in nursing research. The use of analysis tools to critically evaluate patient safety incidents has been shown to assist in identifying areas for improvement and prevention of future errors (Dolansky, Druschel, Helba & Courtney, 2013; Valdez, de Guzman, & Escolar-Chua, 2013).

NCSBN will make the SSR tool widely available to nursing programs, providing a pre-developed resource for promoting a culture of communication among the programs' students. The tool will be housed at the domain, www.safestudentreports.com.

Study Sample Selection

A convenience sample will be used for this study.

Inclusion criteria:

1) Any prelicensure nursing education program including LPN/VN, ADN, Diploma, BSN, Second-degree BSN/Accelerated BSN, Masters Entry

2) Any error or near miss committed/omitted by a student nurse enrolled in any prelicensure nursing education program participating in the study

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Exclusion criteria:

Any post-licensure nursing education program, which includes RN-BSN, Masters, PhD, and DNP programs.

Procedure

NCSBN will send letters (Appendix B – SSR Letter to Nursing Programs) and brochures (Appendix C – SSR Brochure) to all U.S. prelicensure programs inviting them to participate. Telephone calls (Appendix D – Follow up Telephone Script) will be made to the deans and directors of the nursing programs to follow up on their interest in participating in the study. A study website, www.safestudentreports.com, was developed to house the secure database/data collection tool and provide basic information about the research study to nursing education programs. The NCSBN website also has a webpage, www.ncsbn.org/ssr, dedicated to providing details about the research study to the public. Additionally, brochures will be distributed at national and regional nursing conferences and advertisements will be printed in newspapers, organizational newsletters, and social media (such as Twitter and Facebook) and be discussed on informational webinars to advertise the study (Appendix E – General Ad). Participation in error reporting to the SSR tool will be on a voluntary, per-institution basis. Interested nursing education programs will be asked to complete an application (Appendix F – SSR Study Application) in order to verify that the program is an eligible program. Once eligibility is confirmed, the nursing program will be enrolled and that program will receive a unique user ID, which will be distributed to authorized users (faculty, preceptors, and student/faculty dyads) for error reporting. NCSBN will train participating nursing education programs on the use of the web-based database and manage daily activities related to data collection. Prior to each error/near miss entry, a study participant will be presented with an online study participant information sheet (Appendix G – Study Participant Information Sheet) to review study information including information about the Certificate of Confidentiality. After reviewing the online information sheet, the study participant can choose to continue to the survey or end without starting the survey by clicking on the "Cancel" button. If the study participant chooses to participate and proceed with

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the survey (See Appendix A for survey questions), the study participant can continue by entering data, clicking on the "I agree to the terms of the Study Participant Information Sheet" box to confirm he/she has reviewed the information sheet, and click on the "Submit" button.

Using the web-based tool on www.safestudentreports.com, nursing education programs will be able to generate confidential reports of data reported from their own programs. NCSBN will report aggregate data to all participating nursing education programs twice yearly in order for programs to compare their data with national statistics. Identifying information of the nursing programs will not be shared with other participating nursing programs or the public.

After one-year of data collection, an external advisory panel consisting of representatives from nursing education, patient safety organizations and boards of nursing (BONs) will be convened to analyze the aggregate data and to make recommendations for the future.

Data Collection and Handling

Data Collection

All data will be entered into a web-based data collection and reporting system, www.safestudentreports.com.

Potential Risks and Benefits

There is a potential risk of loss of confidentiality. Every effort will be made to keep all study records confidential. The data will be entered directly by the study participants into a password-protected online data collection system with a secure server.

Study participants may not experience any direct benefit from participating in the study but the knowledge gained from this study might help improve identification and correction of system errors in the institution or areas in the nursing education program that should be revised (e.g., additional content on needle sticks).

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Nursing programs will be able to analyze student errors within their own programs, compare them to aggregate data from other nursing programs, identify system issues, and make changes to improve patient safety and student nurse performance.

NCSBN will offer the use of the SSR reporting tool free of charge.

Confidentiality

Every effort will be made to keep all data collected from faculty, preceptors, and/or students of nursing education programs confidential. In order to assist in protecting the confidentiality of study participants, NCSBN and the principal investigator plans to apply for a Certificate of Confidentiality from the National Institute of Nursing Research at the National Institutes of Health. The research team will use this Certificate of Confidentiality to legally refuse to disclose information that may identify study participants in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. The research team will use the Certificate to resist any demands for information that would identify any study participants, except as explained below.

The Certificate does not prevent the study participant or a member of his/her family from voluntarily releasing information about himself/herself or the study participant's involvement in this research.

NCSBN retains the ability to use all aggregate information collected prior to any revocation of authorization. Any public reporting of data by NCSBN will be done in the aggregate and specific institutional data will not be reported, and this will be made clear to all the participating nursing programs, faculty, preceptors, and students.

IRB Monitoring Plan

In order to protect the rights of the study participants, approval to conduct the study will be requested via review by the Western Institutional Review Board (WIRB). The study will undergo continuous IRB monitoring as required by WIRB policy.

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Data Analysis Plan

Descriptive statistics will be used since the primary objective of this study is to establish a baseline repository of data related to student nurse practice errors and near misses that have not been collected before. The data will be reported in aggregate to nursing programs twice yearly in order for them to use for comparison to their own program.

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Appendix A. New Occurrence Worksheet

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New Occurrence Worksheet

Use this worksheet to assist in gathering details of the new occurrence prior to entering the data on www.safestudentreports.org.

Recipient of unsafe occurrence

1. Who received injury? *(select one)*
   - ☐ Patient
   - ☐ Visitor
   - ☐ Student
   - ☐ Faculty
   - ☐ Staff
   - ☐ Other

2. Gender *(select one)*:
   - ☐ Male
   - ☐ Female
   - ☐ Unknown

3. English is predominant language *(select one)*:
   - ☐ Yes
   - ☐ No
   - ☐ Unknown

4. Status of patient/individual *(select one)*:
   - ☐ Harm
   - ☐ No harm
   - ☐ Death
   - ☐ Other

5. Age *(select one)*:
   - ☐ <15
   - ☐ 15-20
   - ☐ 21-25
   - ☐ 26-30
   - ☐ 31-35
   - ☐ 36-40
   - ☐ 41-45
   - ☐ 46-50
   - ☐ 51-55
   - ☐ 56+
   - ☐ Unknown

Occurrence information

6. Date *(enter date of occurrence using the following format)*: mm/dd/yyyy

7. Time *(enter time of occurrence)*:_____

8. Category of occurrence *(select one)*:
   - ☐ Error [Defined as: Incident or occurrence that had the potential to place a patient at risk for harm or resulted in actual harm]
   - ☐ Near miss [Defined as: An event or situation that could have resulted in an accident, injury, or illness, but did not, whether by chance or through timely intervention. (Ebright et al., 2004)]

9. Type of occurrence *(select one)*:
   - ☐ Medication Error
   - ☐ Needle stick
   - ☐ Inadequate preparation for providing patient care
   - ☐ Blood/pathogen exposure
   - ☐ Fall event
   - ☐ Outside scope of practice
   - ☐ Injury to body
   - ☐ Change in patient condition
   - ☐ Deviation in protocols
   - ☐ Equipment or medical device malfunction
   - ☐ Environmental safety – for self, patient or others
   - ☐ Inappropriate or inadequate communication by: Faculty, preceptor, other student, health care team, patient or visitor
   - ☐ Breach of confidentiality
   - ☐ Other

10. Occurrence description *(optional: enter additional details about the unsafe occurrence)*:

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11. Location of occurrence (*select one*):
- ☐ Classroom
- ☐ Clinical Setting
- ☐ Simulation Lab
- ☐ Learning Lab
- ☐ Other

12. Who is completing the report (*select one*):
- ☐ Faculty
- ☐ Student/Faculty Dyad
- ☐ Other (preceptor, etc.)

Follow up action

13. Who is alerted (*select one*):
- ☐ Faculty
- ☐ School of Nursing (SON) Administration
- ☐ Patient/Family
- ☐ Other
- ☐ Unknown

14. Inform clinical agency (*select one*):
- ☐ Yes
- ☐ No
- ☐ Unknown
- ☐ N/A

15. Agency occurrence report completed (*select one*):
- ☐ Yes
- ☐ No
- ☐ Unknown
- ☐ N/A

16. Changes occurring as a result of occurrence (*select one*):
- ☐ System Changes
- ☐ Policy Changes
- ☐ Practice Changes
- ☐ Curriculum Changes
- ☐ Nothing at Present

17. Follow up actions (*optional: enter additional details about any follow up action*)

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Student information

18. Current semester or quarter number (*enter number between 1-16*): _____

19. Total number of semesters or quarters in program (*enter number between 1-16*): _____

20. Student age (*select one*):
- ☐ 15-20
- ☐ 21-25
- ☐ 26-30
- ☐ 31-35
- ☐ 36-40
- ☐ 41-45
- ☐ 46-50
- ☐ 51-55
- ☐ 56+
- ☐ Unknown

21. Type of program (*select one*):
- ☐ LPN
- ☐ Associate
- ☐ Diploma
- ☐ BSN
- ☐ 2nd Degree BSN
- ☐ Masters – Non-APRN
- ☐ Masters – APRN

Final remarks

22. Do you wish to share anything else relevant to this report? (*optional: enter any additional comments*)

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References

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Appendix B. SSR Letter to Nursing Programs

NCSBN
National Council of State Boards of Nursing

111 E. Wacker Drive, Suite 2900
Chicago, IL 60601-4277

312.525.3600
www.ncsbn.org

[Date]

Dear Deans and Directors:

The National Council of State Boards of Nursing (NCSBN) would like to invite your program to participate in a new study involving the collection of nursing student errors and near misses. In 2013 NCSBN awarded one of our Center for Regulatory Excellence (CRE) grants to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. These researchers developed an innovative reporting and tracking tool, Safe Student Reports (SSR), for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study. Here are the benefits your program will receive, at no cost to you:

- Reports about the numbers and types of errors and near misses that occur in your program–only your program will see these reports;
- Ability to analyze data related to student errors and near misses;
- Quarterly reports from NCSBN about the aggregate numbers and types of errors and near misses so that you can compare them with your program reports;
- Collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

Nursing is the first health care discipline to provide educators with a database where they can collect and analyze their students' errors and near misses and compare them to other participating nursing schools.

If your program is interested in participating in the SSR study, you can contact me at ssr@ncsbn.org.
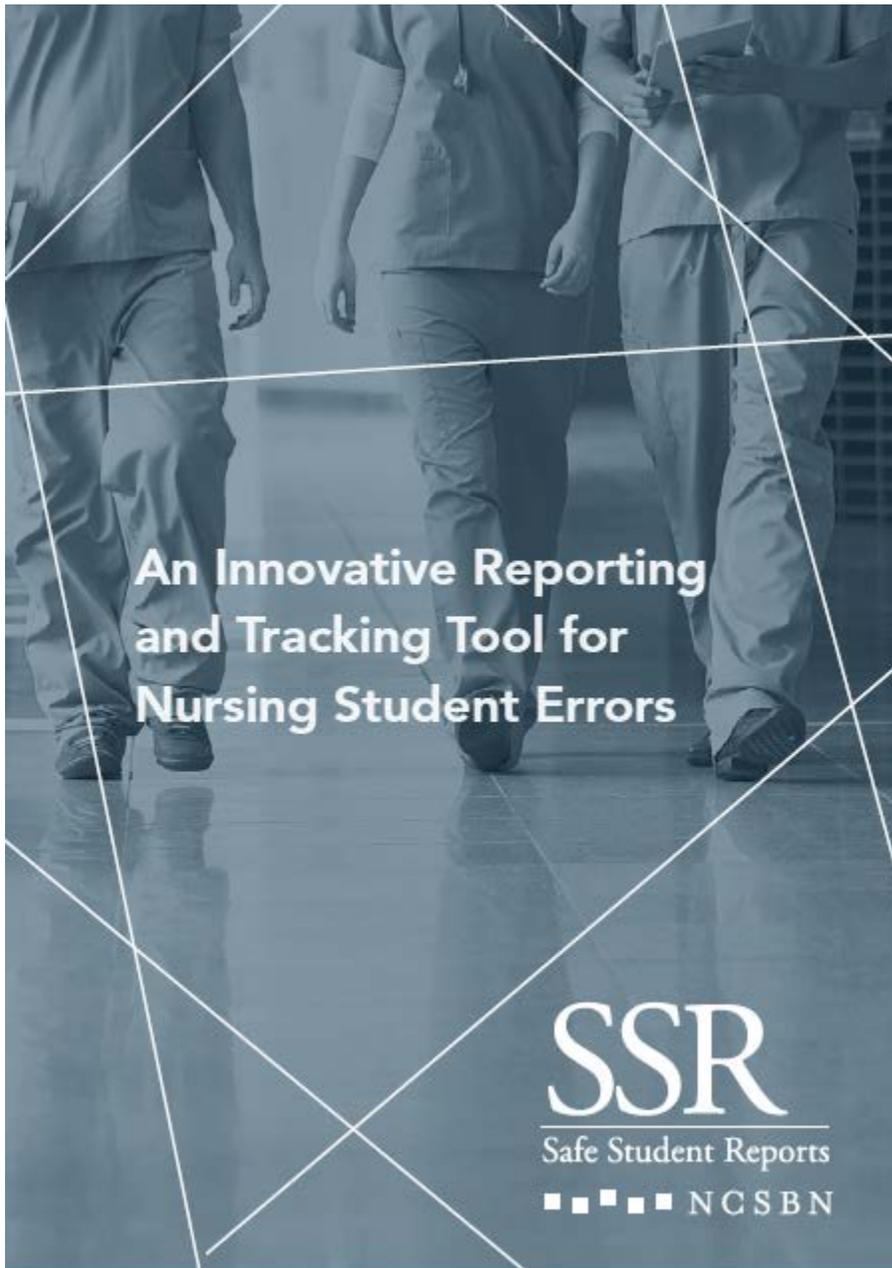
We look forward to working with you and your students.

Sincerely,

Nancy Spector, PhD, RN, FAAN

Nancy Spector, PhD, RN, FAAN

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Appendix C. SSR Brochure (3 Pages)

Page 1 of Brochure

A National Web-based Network for Anonymous Reporting of Student Errors and Near Misses

Prelicensure nursing schools are invited to participate in this research study at the National Council of State Boards of Nursing (NCSBN).

In 2013 NCSBN awarded a Center for Regulatory Excellence (CRE) grant to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. They developed an innovative reporting and tracking tool for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study.

Benefits of SSR include:

- Reports about the numbers and types of errors and near misses that occur in your program - only your program will see these reports;
- The ability to analyze data related to student errors and near misses;
- Quarterly reports from NCSBN about the aggregate numbers and types of errors and near misses so that you can compare them with your program reports; and
- The opportunity to collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

Nursing is the first health care discipline to provide educators with a database that collects and analyzes their students' errors and near misses and compares them to other participating nursing schools.

Prelicensure nursing schools interested in participating in the SSR study can contact the principal investigator, Nancy Spector, PhD, RN, FAAN, at ssr@ncsbn.org.

Page 2 of Brochure

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■ ■ ■ ■ ■ N C S B N

111 E. Wacker Drive, Ste. 2900
Chicago, IL 60601
www.ncsbn.org
ssr@ncsbn.org

123 Main Street
Address Goes Here

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Appendix D. Follow up Telephone Script (2 Pages)

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Follow-up Telephone Script for Contacting Nursing Education Programs

Introduction

Hello, my name is _____ from the National Council of State Boards of Nursing.
I am calling to follow up on the letter that was mailed to your nursing program inviting your program to participate in a new study involving the collection of nursing student errors and near misses.

Do you have time right now for me to discuss the details of the study? It will take about five to 10 minutes. [If yes, then proceed to following paragraph.] If not, when would be a good time to call you?

Study Background/Information

In 2013 NCSBN awarded one of our Center for Regulatory Excellence (CRE) grants to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. These researchers developed an innovative reporting and tracking tool, Safe Student Reports (SSR), for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study.

Nursing is the first health care discipline to provide educators with a database where they can collect and analyze their students' errors and near misses and compare them to other participating nursing schools.

Potential Benefits and Risks

Here are the benefits your program will receive, at no cost to your program:

- Reports about the numbers and types of errors and near misses that occur in your program–only your program will see these reports;
- Ability to analyze data related to student errors and near misses;
- Quarterly reports from NCSBN about the aggregate numbers and types of errors and near misses so that you can compare them with your program reports;
- Collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

There is a potential risk of loss of confidentiality. Every effort will be made to keep all study records confidential. In order to assist in protecting your confidentiality, the principal investigator is applying for a Certificate of Confidentiality from the National Institutes of Health – National Institute of Nursing Research. The research team will use the Certificate to resist any

demands for information that would identify you and any other study participants, except as explained below. The research team may not disclose or use information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, or be used as evidence, for example, if there is a court subpoena, unless you have consented for this use. Information protected by this Certificate cannot be disclosed to anyone else who is not connected with the research except, if there is a federal, state, or local law that requires disclosure (such as to report child abuse or communicable diseases). You should understand that a Certificate does not prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this study.

Participation is voluntary.

[The person will also be provided with information about the application for a Certificate of Confidentiality from the NIH/NINR.]

Do you have any questions?

Do you think your program would like to take part in this study? [If yes, a copy of the study proposal and SSR new occurrence worksheet will be forwarded to them via mail or email for further review. Additionally, the person will be provided with a contact name and number or email address for any further questions about the study and the person will be given further information on how obtain login information for the SSR online entry tool. If no, the person will be thanked for their time and will be asked if it would be ok to send them the proposal for review and further consideration.

Once a nursing program is enrolled, that program will receive a unique user ID, which will be distributed to authorized users (faculty, preceptors, and student/faculty dyads) for error reporting. NCSBN will train participating nursing education programs on the use of the web-based database. Prior to each error/near miss entry, a study participant will be presented with an online study participant information sheet to review study information including information about the Certificate of Confidentiality. After reviewing the online information sheet, the study participant can choose to continue to the survey or end without starting the survey by clicking on the "Cancel" button. If the study participant chooses to participate and proceed with the survey (See Appendix A for survey questions), the study participant can continue by entering data, clicking on the "I agree to the terms of the Study Participant Information Sheet" box to confirm he/she has reviewed the information sheet, and click on the "Submit" button.]

Appendix E. General Ad (2 Pages)

SSR

Safe Student Reports

A National Web-based Network for Anonymous Reporting of Student Errors and Near Misses

Prelicensure nursing schools are invited to participate in this research study at the National Council of State Boards of Nursing (NCSBN).

In 2013 NCSBN awarded a Center for Regulatory Excellence (CRE) grant to two researchers, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN. They developed an innovative reporting and tracking tool for nursing student errors and near misses. Nothing like this exists in the health professions, nor outside the U.S. NCSBN is now making it available to schools of nursing free of charge through participation in a research study.

Benefits of SSR include:

- Reports about the numbers and types of errors and near misses that occur in your program - only your program will see these reports;
- The ability to analyze data related to student errors and near misses;
- Quarterly reports from NCSBN about the aggregate numbers and types of errors and near misses so that you can compare them with your program reports; and
- The opportunity to collaborate with a network of colleagues who are interested in patient safety and just culture in schools of nursing.

Nursing is the first health care discipline to provide educators with a database that collects and analyzes their students' errors and near misses and compares them to other participating nursing schools.

For more details visit www.ncsbn.org/ssr.

Prelicensure nursing schools interested in obtaining a detailed study proposal can contact the principal investigator, Nancy Spector, PhD, RN, FAAN, at ssr@ncsbn.org.

[For the informational webinar, details of the study as described in the SSR proposal will be discussed. Additionally, the original developers of the database, Joanne Disch, PhD, RN, FAAN, and Jane Barnsteiner, PhD, RN, FAAN, will be invited to discuss their experience with developing the database, conducting the original pilot study, and continuing work with student nurse errors as described in the following list of journal articles (click on the hyperlinks below to access the articles):

Barnsteiner, J., & Disch, J. (2017). Creating a fair and just culture in schools of nursing. *AJN, 117*(11), 42-48.

Disch, J., & Barnsteiner, J. (2014). Developing a Reporting and Tracking Tool for Nursing Student Errors and Near Misses. *Journal of Nursing Regulation, 5*(1), 4-10.

Disch, J., Barnsteiner, J., Connor, S., & Brogren, F. (2017). Exploring how nursing schools handle student errors and near misses. *AJN, 117*(10), 24-31.]

Appendix F. Study Application

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Safe Student Reports

SAFE STUDENT REPORTS STUDY APPLICATION

APPLICANT CONTACT INFORMATION		
Name:		Title:
Phone:	Fax:	Email:
NURSING PROGRAM INFORMATION		
Name of Nursing Program:		
Mailing address:		
City:	State:	Postal Code:
SIGNATURE		
Signature of applicant:		Date:

Version 12.13.2017

Appendix G. Study Participant Information Sheet (2 Pages)

Study Participant Information

Sponsor: National Council of State Boards of Nursing (NCSBN)

Protocol Title: Multi-Institutional, Descriptive Study of Safe Student Reports (SSR) of

Student Nurse Practice Errors and Near Misses in Prelicensure Nursing Programs

Investigator: Nancy Spector, PhD, RN, FAAN

You are being asked to participate in a research study that will try to collect information on the extent and types of student nurse practice errors and near misses in order to develop methods to reduce or prevent them.

Your participation will involve completing a survey about errors/near misses that you or your student committed/omitted and take about 10-20 minutes to complete.

There is a potential risk of loss of confidentiality. Every effort will be made to keep all study records confidential. In order to assist in protecting your confidentiality, the principal investigator is applying for a Certificate of Confidentiality from the National Institutes of Health – National Institute of Nursing Research. [If a Certificate of Confidentiality is approved, the prior sentence will be replaced by the following "In order to assist in protecting your confidentiality, the principal investigator has obtained a Certificate of Confidentiality from the National Institutes of Health – National Institute of Nursing Research."] The research team will use the Certificate to resist any demands for information that would identify you and any other study participants, except as explained below. The research team may not disclose or use information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, or be used as evidence, for example, if there is a court subpoena, unless you have consented for this use. Information protected by this Certificate cannot be disclosed to anyone else who is not connected with the research except, if there is a federal, state, or local law that requires disclosure (such as to report child abuse or communicable diseases). You should understand that a Certificate does not prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this study.

The research team will share the records generated from this research with the sponsor (NCSBN and its membership), the National Institutes of Health – National Institute of Nursing Research, and regulatory agencies such as the IRB. This information is shared so the study can be conducted and properly monitored. Additionally, the sponsor may report aggregate data to the public but data specific to any individual institution or study participant will not be reported. If you do not provide permission to use your information, for the purposes of reporting aggregate data to the other participating nursing programs and publication, you cannot be in the study.

This permission will not end unless you cancel it. You may cancel it by sending written notice to the study investigator as noted below. Any information collected before you withdraw may still be used.

Your decision to be in this study is voluntary. You will not be penalized if you decide not to participate or if you decide to stop participating.

You may not receive a direct benefit if you agree to participate. However, the information obtained from this study might help improve identification and correction of system errors that might benefit others in the future.

Your alternative is to not participate in this study.

Contact Nancy Spector at 312-525-3657 or nspector@ncsbn.org for questions, concerns or complaints about the study or if you think you have been harmed as a result of joining this study. Contact the Western Institutional Review Board (WIRB) if you have questions about your rights as a study participant, concerns, complaints or input: 1-800-562-4789. WIRB is a group of people who perform independent review of research.