VA Nurses Fight Directive Allowing Unlicensed Personnel to Give Medications

If the Department of Veterans Affairs has its way, unlicensed assistive personnel will soon be giving injections and administering all kinds of other medications to patients under a directive that NNU-VA registered nurses are now fighting.

NNU-VA nurses are outraged over this encroachment into their scope of practice and say that this directive, which applies across the entire VA system and not just at the 22 facilities where nurses are represented by NNU-VA, poses a grave safety risk to their patients.

In a Jan. 6, 2012 letter to Irma Westmoreland, RN and NNU-VA chair, Veterans Affairs informed VA nurses about its plans to expand the kinds of medications unlicensed assistive personnel (or UAPs) are allowed to give, including “immunizations administered intramuscularly in the deltoid muscle,” and “subcutaneous or intradermal injection.” UAPs will be permitted to give medications after a six-week training course. Westmoreland said she believed that, previously, UAPs had been allowed to administer things like medicated shampoos in VA nursing home and long-term care settings under an existing policy, but that the current revision is a dramatic and dangerous expansion of their job description.

The directive states that UAPs will not give controlled substances or “medications whose administration requires clinical judgment, but it’s our position that all medications require clinical nursing judgment,” said Westmoreland.

Rhonda Hanos, an emergency room RN at the Dayton, Ohio VA facility, agreed. “As far as I’m concerned, medication that requires nursing judgment means an aspirin,” said Hanos. “There are all kinds of considerations. Does the patient have a clotting disorder or other blood issues? Have an ulcer? What about interactions and adverse effects? Someone who does not have our training does not know they need to be aware of these things. They don’t even know what they don’t know.”

According to the VA nurses, the administration claims that UAPs are currently allowed to administer some medications, but when they asked for systemwide and site-specific data about this practice, the VA was not able to provide any documentation. “They don’t know who’s giving it where or what,” said Westmoreland. “We asked, ‘What facilities?’ They couldn’t tell us. ‘What medications?’ They couldn’t tell us. ‘They don’t have anything in place to control or track it at all,’” said Westmoreland. The VA nurses say that, as far as they know, no UAPs at their facilities are giving medications or injections.

The VA nurses are now crafting a memorandum of understanding with VA that they do not support this directive and do not plan to participate in it, whether that means delegating to UAPs or documenting medications that UAPs have given. Further, the nurses plan to organize against this directive by lobbying each facility’s medical director, who, under the directive, has the authority to implement this directive, or not. “We want our nurses to tell the director, ‘We do not want this used in our facilities,’” said Westmoreland.

All the nurses emphasized that our nation’s veterans deserve the highest standard of care, and that allowing UAPs to administer medications is a disaster waiting to happen. “If I had a relative in the hospital, I would want to make sure their medication was administered by someone with the proper education,” said Ruby Rose Hutchinson, an RN who works at the Miami VA. “I wouldn’t want just anyone giving my loved ones medication.” —Lucia Hwang