Abstract

Tasked by a local organization, does the implementation of a nursing peer review process, as compared to current practices, improve peer accountability, the quality and safety of nursing practices, and identify evidence-based solutions for nurses in a hospital setting? Demonstration of an evidence-based nursing peer review process (NPR) is not evident in most institutions despite publication of the American Nurses Association (ANA) peer review guidelines in 1988. When measured against standards of practice, NPR allows practicing registered nurses (RNs) to assess, monitor and provide feedback to peers about the quality of nursing care (Murphy, Lung, Boeger & Powers, 2018). The American Nurses Associations identifies a peer as someone of the same rank, and peer review is practice-focused, feedback is timely, routine, and a continuous expectation. Peer review fosters a continuous learning culture of patient safety and best practice, feedback is not anonymous and incorporates the nurse's developmental stage (1988). The American Nurses Credentialing Center (ANCC) requires Magnet recognized organizations to have an ongoing peer review process (Roberts & Cronin, 2017). Despite challenges, such as a standardized implementation and processes involved with NPR, Provision 4.1 in the Code of Ethics for Nurses states, “in every role, nurses have vested authority, and are accountable and responsible for the quality of their practice” (ANA, 2015, p.15). Outcomes of peer review are based on whether the standard of care was met as compared to structure standards, hospital policies and procedures, national standards, professional organizational guidelines, and community standards (Kirkland-Kyh & Teleten, 2018).

Prevalent in the literature are numerous positive outcomes associated with nursing peer review. Utilizing a nursing peer review process allows nurses to take ownership of the profession and improve the quality of nursing performance by identifying safety concerns and evidenced based solutions (Grootendorst, 2015). Nursing peer review is a professional obligation that increases accountability and professionalism. Optimal patient outcomes are achieved when the process focuses on evidence-based practice standards. Nurses feel they can make a practice change and have an increased perception of autonomy as result of participating in a nursing peer review. Improved perceptions related to giving and receiving feedback were also identified (Murphy et al, 2015). Peer review allows nursing to demonstrate professionalism, accountability and autonomy to remain a trusted profession and lead to improved quality of nursing practice by allowing for trending of nursing gaps. Opportunities are provided to improve charting, patient advocacy, clinical skills, competency validation and staffing (Garner, 2015). With limited literature, a handful of challenges of nursing peer review identified include: maintaining consistency in peer representation on a review committee, standardized indicators to trigger a referral and standardized implementation of a structured screening process (Garner, 2015). A peer review process utilized in a shared governance model allows nurses to self-regulate and assess quality of nursing care. Shared governance involves a balance of power, information sharing, expertise, and interpersonal values. (Larson & Herrick, 1996). Garner utilized a borrowed shared governance model made up of a coordinating council with expertise in practice, education, research, leadership and quality. Mixed representation of committee members is selected according to organizational values such as: integrity, compassion, accountability, responsibility, intradisciplinary collaboration and ability to identify with individual perspective (2015). Standardized indicators to send a case to nurse peer review are not prevalent in the literature however, may be reflected by the organizational values or selected from the National Database of Nursing Quality Indicators (NDNQI). Garner selected the following indicators: falls
with moderate or serious injury, major medication errors and patient significant events resulting in harm as defined by organizational quality safety standards, and poor handoff communication (2015). Another challenge of peer review is lack of a standardized referral process for reviews. In short, Garner depicts a borrowed nursing peer review process as follows. Referrals are made to a coordinator to review for criteria. If criteria are not met, recommendations may or not be necessary, and sent directly back to the referral source. If criteria are met, the case is assigned to an individual reviewer, the nurse involved is notified, and data is summarized to present to the committee for discussion. If a response is required, the nurse and unit leadership are notified. Once all information is obtained the committee may agree on various outcomes. These include: exemplary practice identified with nurse recognition, letter to the nurse and leadership sent with no response required, a letter to the nurse and leadership with action plan and response required, or referral to the appropriate committee with a response required. A referral is then closed, summarized and reported to the nursing quality council, tracked by event and unit, and trended for process improvement (2015). To conclude, the literature shows a need and positive outcomes of implementing a nursing peer review process, despite identified challenges. The local organization intends to implement a nursing peer review process utilizing these findings. In summary, an evidence-based nursing peer review process improves peer accountability and identifies opportunities to address quality of nursing care.

Title:
Implementation of a Nursing Peer Review (NPR) Process

Keywords:
evidence-based nursing peer review, professional peer accountability and quality improvement and safety in nursing practice

References:

Abstract Summary:
The implementation of a nursing peer review process, as compared to current practices, improves peer accountability, the quality and safety of nursing practices, and identifies evidence-based solutions for nurses in a hospital setting.

Content Outline:
Implementation of a Nursing Peer Review (NPR) Process

Introduction
A. PICO-from local organization
B. ANA guidelines
C. ANCC-Magnet

Outcome Measurements-Was the standard of care met?
B. Professional obligation-increases accountability, professionalism and patient outcomes. Improved perception of autonomy and giving/receiving feedback.
C. Professionalism, accountability, autonomy, tending of nursing gaps. Improved charting, patient advocacy, clinical skills.

Challenges
A. Consistency in peer review representation committee
B. Standardized indicators
C. Standardized implementation

Conclusion
A. Positive outcomes & challenges
B. Local organization to implement NPR
C. PICO

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