CNE Peer Review

Perceptions, Practices, and Possibilities

ANCC National Magnet Conference® C806
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MGH

Adult & Children’s AMC
Magnet® Designations
• 2003, 2008, 2013
Quality, Research, Education
• & Community

Jeanette Ives Erickson, DNP, RN, FAAN
Chief Nurse & SVP for Patient Care

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Anthony Guarino, PhD
• Professor, MGH-IHP
Gennady Beyzarov, MBA
• Senior Data and Project Manager, MGH
Marc Edwards, MD, MBA
• Physician Peer Review expert
Objectives

Present study findings

Use and Perceptions of Nursing Peer Review: A Survey of Chief Nurse Executives (CNEs)

Objectives

- Describe background & definition of Nursing Peer Review (NPR)
- Define evidence-based principles & framework
- Describe CNE study design & results
- Present discussion & implications

Professional Foundations

- 1973: Guidelines for Peer Review Committees
- 1976: Quality Assurance Workbook
- 1982: Nursing Quality Assurance Management/Learning System
- 1983: Peer review brochure
- 1988: Guidelines for Peer Review
1988 ANA Guidelines

Primary Focus

Quality of Nursing Practice

Quality of Work

Cost of Care

Definition

In nursing, peer review is:
"the process by which practicing registered nurses systematically assess, monitor, and make judgments about the quality of nursing care provided by peers as measured against professional standards of practice."

ANA Peer Review Guidelines, 1988, p.3

Quality Emphasis

"As the professional association for nursing, ANA has a responsibility to the public and its members to facilitate the development of a quality assurance system including peer review."

ANA Peer Review Guidelines, 1988, p.2
Structural Elements of Professionals

- A profession:
  - Involves a high degree of individual responsibility
  - Professes a body of specialized knowledge & skill
  - Aims to provide practical & definite service
  - Is characterized by self-organization & self-regulation

- A profession’s motivation tends to be altruistic

Dr. Abraham Flexner - 1910

Peer Review Principles

- A peer is someone of the same rank
- Peer review is practice focused
- Feedback is timely, routine & continuous
- Peer review fosters learning culture of patient safety & best practice
- Feedback is not anonymous
- Feedback incorporates developmental stage of nurse

(Haag-Heitman & George, 2011, p. 62)

Peer Review: All Levels

- Directors
  - Leadership
- Nurse Managers
  - Management
- Advanced Practice Nurses
  - Advanced Practice
- Unit Leaders
  - Frontline Leadership
- Clinical Staff RN
  - Clinical Practice
- Other disciplines
  - PT, OT, Speech, RT, Social Work, Registered Dietitians
Conceptual Model of Peer Review

Holistic Peer Review Model

Contemporary Domains

Quality and Safety
Practice Advancement
Role Actualization

Peer Review Outcomes

- Evaluate quality and quantity of nursing care
- Enhance Professional Development of the care provider
- Provide evidence for change (EBP) in practice protocols to improve care
- Identify practice patterns that indicate need for new knowledge and innovation
Problem & Barriers

- Despite NPR’s known benefits
  - Not broadly used or disseminated in nursing
- Known Barriers
  - Lack of acceptance/perceived value
  - Lack of nursing leadership support
  - Confusion about Annual Performance Appraisal vs. Peer Review
  - Concerns & anxiety: providing & receiving feedback

Literature Review

- Reports of nursing peer review limited
- Literature lacks nursing peer review outcomes & use of ANA guidelines

How to Move Forward?
Study Aims

- Examine Chief Nurse Perceptions of NPR & its use in their organizations:
  - Assess NPR Prevalence in US
  - Assess CNE perceptions of NPR
  - Determine differences among Magnet® & Non-Magnet® organizations
  - Determine if differences between collective bargaining & non-collective bargaining organizations

Hypotheses

- CNEs in Magnet® organizations and those seeking Magnet® designation hold higher perceptions of the importance of NPR in improving quality, safety, nurse-accountability and autonomy than non-Magnet®
- NPR is more prevalent in Magnet® organizations & those seeking Magnet® designation
- NPR is more prevalent in non-collective bargaining organizations

Study Design

- Causal-Comparison Research Design
- CNE NPR Perceptions Survey
  - 25-question survey: Prevalence & CNE Perceptions
  - © 2014 - Whitney, Haag-Heitman & George
- Population
  - US-based CNEs in ambulatory, acute & post-acute
- Recruitment Strategies
  - ONL of MA, RI & NH
  - AONE & LinkedIn®
  - Snowball sampling
Data Collection

- Recruitment Period
  - January 15th through February 15th, 2015
- Survey Tool & Data Collection
  - Administered electronically using REDCap©
- Statistics
  - Descriptive
  - Mixed ANOVA and chi-square analyses

Demographics

- 85 participants
- Representatives from all US geographic regions (n=84)
  - 18 States*
  - 47% Massachusetts
  - 21% From other New England States
- Organization Type
  - 94% Acute Care
    - 26% Academic Medical Centers; 60% Community Hospital; 8% Critical Access Hospital
  - 21% Post-Acute Care
    - 9% Long Term Acute Care; 6% Rehabilitation; 6% Home Care
  - 7% Ambulatory

Demographics continued

- Magnet® & Collective Bargaining Status
  - 19% Magnet® Designated
  - 18% Seeking Magnet® Designation
  - 63% Not Seeking Magnet® Designation
  - 45% Collective Bargaining Unit
- CNE Education level
  - 27% Doctorate
  - 72% Masters
  - 1% Bachelors
NPR Requirements in Organizations

Is nursing peer review required in your organization?

- Nurse or staff not required to participate: 25%
- Nurse or staff must participate: 75%
- Peer review not completed: 5%

Level of Participation if Not Required

If nursing peer review is not required, what is the level of participation?

- Nurse or staff not required to participate: 25%
- Nurse or staff must participate: 75%
- Peer review not completed: 5%

NPR Types & Prevalence: Unit Level

<table>
<thead>
<tr>
<th>Peer Review Type</th>
<th>Unit Level %</th>
<th>Org. Level %</th>
<th>Quality &amp; Safety %</th>
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<tr>
<td>Top 3 Competency Skills Assessment</td>
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Table 1: Peer Review Prevalence at Unit and Organization Level by Type (percent)

(Whitney, 2015)
### Table 1: NPR Types & Prevalence: Org Level

<table>
<thead>
<tr>
<th>Peer Review Type</th>
<th>N=85</th>
<th>Unit Level %</th>
<th>Org. Level %</th>
<th>Quality &amp; Safety %</th>
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<tbody>
<tr>
<td>When implementing Evidence-Based Practice</td>
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### Magnet® Influence

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<th>N=15; Not Seeking</th>
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Table 6

<table>
<thead>
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<th>Role</th>
<th>Magnet® Seeking</th>
<th>Not Seeking</th>
<th>All</th>
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<td>73</td>
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<td>Chief Nurse Executive</td>
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<tr>
<td>Nurse Educator</td>
<td>88</td>
<td>60</td>
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<tr>
<td>Nursing Director</td>
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<td>Staff Nurse</td>
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<td>Nurse Practitioner</td>
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<td>Clinical Nurse Specialist</td>
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<td>Associate Chief Nurse</td>
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<tr>
<td>Nurse Anesthetist</td>
<td>44</td>
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Greater NPR prevalence in Magnet® organizations for all 11 roles.
8 roles statistically significant: Magnet® compared to non-Magnet®.

Table 7

<table>
<thead>
<tr>
<th>Role</th>
<th>Collective Bargaining</th>
<th>Non-Collective Bargaining</th>
<th>All</th>
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<tr>
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Non-collective bargaining organizations had a higher NPR prevalence for all 11 nursing roles compared to collective bargaining organizations.
However, only the staff nurse and certified nurse midwife (CNM) roles were statistically significant.

CNE Perceptions: CF Importance

I believe providing constructive peer-to-peer feedback in all roles to improve practice is:

- Very important: 20%
- Important: 30%
- Somewhat important: 20%
- Not important: 30%
Constructive Feedback

- CNEs reported Constructive Feedback is:
  - Extremely or moderately important (69%) for CNE-to-CNE Peers
  - Extremely or moderately important (95%) for all roles
  - Very easy or easy to provide as a CNE (56%)
  - Very easy or easy to receive as a CNE (64%)
  - Very difficult or difficult for nurses in their organization if required (45%)
  - CF education is not a common practice (50%)

- Confirmed what was found in literature
  - Lack of comfort in providing & receiving CF
  - Lack of CF education

Peer Review Within Shared Governance

- [Chart showing preference for peer review within shared governance]
Peer Review Within a Just Culture

If yes, how often do you believe nurses speak up about errors or near misses in your organization?

CNE Reported Peer Review Barriers

The Manager provides feedback during the Annual Performance Evaluation Process.

CNE Reported NPR Barriers

There are limited resources to support peer review.
CNE Perceptions of NPR Outcomes

93% of CNEs Agreed or Strongly Agreed

CNE Perceptions of NPR Outcomes

96% of CNEs Agreed or Strongly Agreed

CNE Perceptions of NPR Outcomes

95% of CNEs Agreed or Strongly Agreed
Results Summary

- CNEs indicated positive perceptions & practice of NPR
- Perceptions of amount of actual NPR practice are low
- Magnet® organizations reported highest NPR practice prevalence overall & by role – statistically significant
- Collective Bargaining status overall does not influence prevalence or perceptions of NPR
- Peer Review incorporated within Shared Governance is not a common practice
- CNEs confirmed common NPR barriers continue to exist
- Education to increase comfort with Constructive Feedback is lacking

Limitations

- Although sample size of 85 sufficient to determine significance, Magnet® organizations were only 19% of the sample (n=16)
- Study did not test or provide NRP definition
- Convenience & Snowball Sampling
  - High percentage of New England CNEs
- Self selection
  - CNEs attested they met inclusion criteria

CNE & Transformational Leadership Needed!
NPR & Magnet Model

Call to Action

- CNEs play crucial role in influencing NPR advancement
  - Accountable for quality & safety outcomes
  - Accountable for professional nursing practice

Implications for CNE’s

- Utilize ANA Peer Review guidelines and NPR Principles
- Design & implement NPR within shared governance
- Assure outcome measurements
- Design NPR in all 3 domains
Removing Barriers

- CNEs can influence removal of NPR barriers
  - Provide constructive feedback education regularly to increase nurses’ ability to provide & receive feedback
  - Ensure feedback is transparent to foster a trusting, just & learning culture
  - Provide/allocate resources needed to support NPR as an essential part of professional practice
  - Include nurses at all levels in NPR program design, implementation & evaluation
  - Encourage Magnet® Commission to broaden NPR standards

Next Steps

- Adopt the ANA definition of peer review nationally for nurses in all roles & all settings
- Align ANA definition & intent to meaningful practices specific to roles & settings
- Utilize the 6 evidence based peer review principles to design & guide peer review activities
- Measure impact of peer review practices
- Incorporate peer review within the model of self regulation (shared governance)

Nursing Peer Review Journey
References

doi:10.1097/NNA.0b013e3181c18053