



**Development of an Innovative and Transparent Peer-to-Peer Process**

2015 ANCC National Magnet Conference:  
Session C816  
October 8, 2015 11:15 am – 12:15 pm

Jennifer Bruce, BSN, RN-BC, SCRNI  
Todd Hobbs, BSN, RN, CNOR, CSRNI  
Dana Kennedy, BSN, RN  
Paula Spears, DNSc, RN, NEA-BC

Texas Health Resources  
Arlington, TX




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**Section I**

**Conference Objective**

Incorporate best practices to achieve positive patient outcomes by integrating science-based research




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*Healing Hands. Caring Hearts.*



- 25 acute-care and short-stay hospitals that are owned, operated, joint-ventured or affiliated with the system.
- 14 are wholly owned hospitals
- 18 Outpatient Facilities and
- 250 Community access points
- 3,800 licensed hospital beds
- 22,500 employees
- 6700 Registered Nurses
- 5500 physicians


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## •THR Nursing Excellence

- Magnet® Designation at:**
  - Texas Health Arlington Memorial
  - Texas Health Dallas
  - Texas Health Fort Worth
  - Texas Health Plano



**Pathway to Excellence® at:**

- Texas Health Allen
- Texas Health Alliance
- Texas Health Azle
- Texas Health Cleburne
- Texas Health Denton
- Texas Health Southwest (on Magnet journey)
- Texas Health Specialty Hospital
- Texas Health Stephenville


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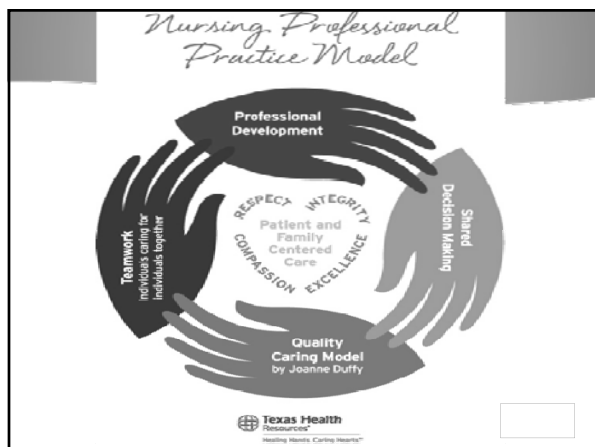
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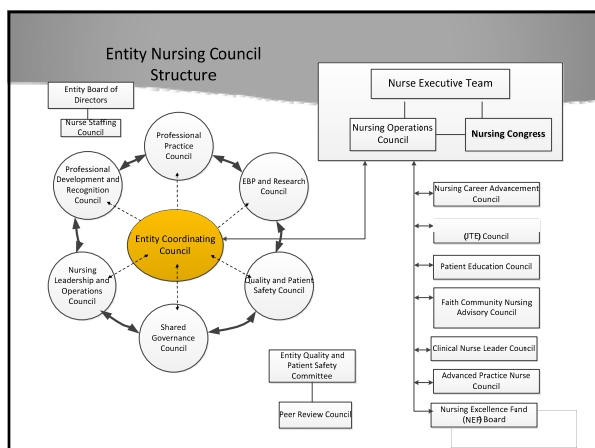
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### Via Shared Governance Ideas or Processes Can Go System-wide

- 2013 Nursing Congress Delegate Meeting Discussion →  
Agenda item for Nursing Congress Open Forum Discussion →  
Nursing Congress Approval → Standardize the Peer Review  
Process for THR Clinical Nurses
- Meanwhile, TH Arlington Memorial created a peer review form  
guided by the new Professional Practice Model and 2 other  
hospitals began using the same/similar form / process.
- 2014 Nursing Strategic Plan and Nursing Vision to "Becoming one  
nursing service with exceptional professional practice that leads to clinical  
excellence and quality". A strategic goal to create a process  
standardized for all 14 wholly-owned hospitals
- So the Task Group was formed



### Professional Practice and Peer Review Task Group and Meeting Dates

Name	Entity	Title
<b>Executive Sponsors/Leadership</b>		
Paula Spears, RN	THR	VP, Professional Practice Research & Magnet
Lori Krogman, RN	THHIB	Manager II, Nursing
Elaine Nelson, RN	THFW	Chief Nursing Officer
Lori Donovan, RN / Julie Holland, RN	THAM	Chief Nursing Officer - Manager Nursing Admin
Cindy Ekes, RN	THD	Director Nursing, Med Surg/ONC
Kelly St Clair, RN	THK	Clinical RN - Chair, Nursing Congress
Sarah Comen, RN	THSH	Clinical RN - Vice Chair, Nursing Congress
<b>15 Entity Representatives</b>		
Gerianne Holley, RN	THAM	Clinical RN
Melissa Wallace, RN	THA	Clinical RN
Todd Hobbs, RN	THAL	Clinical RN
Jamie Ball, RN	THAZ	Clinical RN
Schantle McCray, RN	THC	Clinical Charge RN
Munera Nawar, RN	CSO	Clinical RN
Amanda Dalto, RN	THD	Clinical RN
Dana Kennedy, RN	THDN	Nurse Navigator - ED
Jennifer Bruce, RN	THFW	Clinical RN
Nick Orner, RN	THHIB	Clinical RN, Supervisor
Tange Anderson, RN	THK	Clinical RN
Sam Koskavong, RN	THP	Clinical RN, Supervisor
Leslie Poliquin, RN	THSW	Clinical RN
Crystal Schramm, RN	THSH	Clinical RN
Jodi Tadlock, RN	THS	Clinical RN

Meeting Dates  
March 31, 2014  
April 29, 2014  
May 29, 2014  
June 9, 2014  
July 21, 2014  
September 2, 2014  
October 3, 2014




### Scope of Task Force's Work

- Not Included:
  - Texas Board of Nursing Peer Review is an important type of peer review and no changes to that process were needed
  - Review or development of process for managers



## Section II

### What is Peer Review?




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### What does Peer2Peer mean to my practice as a Direct Care RN?

- Video for Slide 11




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### ANA Definition

- 1) ANA definition:
  - *An organized effort whereby professionals review the quality and appropriateness of services ordered or performed by their professional peers.*




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## ANA Definition cont.

### 2) ANA definition:

- *“the process by which nurses systematically assess, monitor, and make judgments about the quality of nursing care provided by their peers as measured against professional standards of practice.”*

Source: “Peer Review in Nursing: Principles for Successful Practice” by Barbara Haag-Heitman and Vicki George




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## The Many Faces of Peer Review

### • Formal

- Shared Governance Councils / Unit Based Council
  - Review of Nurse-sensitive outcomes
  - Review of HCAHPS survey results
  - Review of audits of compliance with new processes or documentation
- Nursing Career Ladder
- TX Board of Nursing Incident-based Reports
- TX Board of Nursing Safe Harbor Reports
- Annual Peer to Peer (Task Force’s Work)




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## The Many Faces of Peer Review

### • Informal

- Bedside Report
- Daily Teamwork
- Briefs or Huddles
- Team Meetings
- Nurses do peer review often
  - Collaboration on best practice/standards
  - Collaboration on a patient’s plan of care




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### ANA's 6 Elements of Peer Review

- 1) A peer is someone of the same rank
- 2) Peer review is practice-focused
- 3) Feedback is timely, routine, and a continuous expectation
- 4) Peer review fosters a continuous learning culture of patient safety and best practice
- 5) Feedback is NOT anonymous
- 6) Feedback incorporates the nurse's developmental stage




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### Outcomes of Professional Practice and Peer Review

- 1) Role Actualization
  - Advancing a nurse as an individual
  - Performing at the top of his or her license
- 2) Quality and Safety
  - Evaluate quality of nursing care and quality of nursing care provider
- 3) Practice Advancement
  - Advancing nursing as a profession
  - Autonomy and accountability


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## Section III

### The Professional Practice and Peer Review

#### Design, Process, and Tools




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## Scope of Task Force's Work

- Included:
  - Develop a conceptual framework
  - Develop a standardized process for clinical nurses
  - Develop a process to support a clinical nurses' self appraisal
    - Nurse uses that feedback to identify strengths, professional growth opportunities, and goals
    - Nurse can incorporate feedback in annual performance review
  - Avoid "pal eval"
    - feedback that affects co-worker's compensation
  - Create a process owned by clinical nurses




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## Ineffective Peer Review Feedback

- Video for Slide 20




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## Review of Professional Standards and Evidence

- ANA Peer Review Guidelines published in 1988
- ANA Code of Ethics:
  - Provision 3 Patient Advocacy: Maintain competency to protect patients
  - Provision 4 Accountability and Responsibility: Answerable for actions
  - Provision 5 Duty to Self and Others: Integrity to disclose practice issues
  - Provision 7 Advancement of the Profession
- ANA Scope and Standards
  - Standard 8 Attain Knowledge and Maintain Competency
  - Standard 14 Professional Practice Evaluation
- Magnet Standard EP 15:
  - Clinical nurses use periodic formal performance review that includes a self-appraisal and peer feedback process to enhance competence and professional development




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## The Team Members are Conceptualizing!!!




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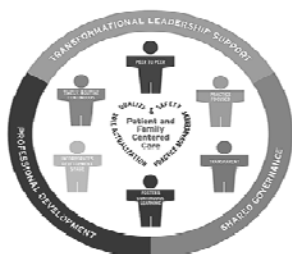
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## Conceptual Model



- THR leaders, professional development opportunities, and shared governance support a quality review process
- 6 core characteristics assure quality review process
- Outcomes for Nursing Practice includes Quality and Safety, Role Actualization, and Practice Development
- Patient Outcome is the center of the model

**THR Nursing Professional Practice and Peer Review Model:**  
Nurses advancing themselves, each other and the profession for the benefit of patients.




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## “Peer2Peer” Feedback Process

- Transparent or not anonymous
- Each person on unit participates
- Process is clinical nurse driven
- Management supports and facilitates coaching
- Feedback is about clinical performance
- Feedback received will guide new goal development
- Feedback is powerful tool for professional development




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## “Peer2Peer” Feedback Process

- Reviewer is of same rank or peer to peer
- Feedback goes directly and confidentially to the nurse being reviewed
- Nurse reviews completed peer review document
- Nurse seeks verbal, direct, open, and honest feedback
- Each nurse has opportunity to seek out a coach to help interpret feedback and assist in goal setting
- Nurse establishes goals to bring to annual review with manager




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## THR “Peer2Peer” Feedback

- “Peer2Peer” Feedback
  - Based on THR Nursing Professional Practice Model:
    - Teamwork
    - Professional Development
    - Shared Decision Making
    - Quality Caring Model
  - Process
    - Learning Management System Integrated Forms
    - Two peers: one chosen by the nurse, one selected by manager




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## Initial Tool for Annual Peer Feedback

- “Peer2Peer” (P2P) Feedback Form
  - Process
    - Clinical nurses will select one peer to complete a peer review assessment.
    - The manager will select one nurse for each clinical nurse.
    - The Learning Management System prohibits a single nurse from assignment to more than three assessments, while integration with email allows communication of assigned and completed reviews.
    - Includes all RNs reporting to nursing operations who are in non-management positions.




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### “Peer2Peer” Feedback Form



TEAMWORK	<25% Rarely	25-50% Sometimes	51-75% Usually	>75% Almost Always
Leads by example.				
Is a team player and works collaboratively with others.				
Is flexible and helps co-workers when needed.				
Sets others up for success.				

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



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### “Peer2Peer” Feedback Form


**Self-Identified Areas:**  
 The following items are some opportunities for improvement that I have noted in my practice. Please help evaluate how I am doing with these things and any suggestions to better myself are appreciated.

1) \_\_\_\_\_  
 2) \_\_\_\_\_  
 3) \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Career Track Recommendations for Clinical Nurses in staff nurse roles (ONLY):**  
 Regarding the career tracks included in “My Nursing Journey” which one would you recommend I pursue? Please give a brief reason:

Clinical \_\_\_\_\_  
 Informatics \_\_\_\_\_  
 Education \_\_\_\_\_  
 Leadership \_\_\_\_\_



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### Summary and Goals Tool for Annual Peer Feedback

- “Peer2Peer” Summary and Goal Development Form
  - Nurse reviews the peer feedback provided on the two P2P Review tools received
  - Seeks additional information or clarification if needed from peers
  - Uses the information from the forms and discussions with peers to summarize their strengths, opportunities and goals.



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### “Peer2Peer” Summary and Goal Development Tool



TEAMWORK
What areas am I successful in:
What areas do I want to improve:
What do I need more information about:



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### “Peer2Peer” Summary and Goal Development Tool

**Goal Development:**  
(Goals should be SMART: Specific, Measurable, Attainable, Relevant, Timely)

**Goal 1:**

\_\_\_\_\_

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**Goal 2:**

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### Manager’s Role

- Know and support the process.
- Assure all nurses are involved.
- Make assignment of one peer for each nurse.
- As requested, coach or identify a coach:
  - To develop or improve skills for how to provide constructive peer feedback.
  - To help nurses process the information from peer review.



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## Section IV

### Education and Training: Process and Challenges




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### Education/Training

- Team recognized three significant challenges:
  - 1) Skill development for “Giving and Receiving Feedback”
  - 2) Understanding the why & the how
  - 3) Transitioning from paper to e-process
- Pilots on the Task Force members’ units completed and many lessons learned




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### Education Toolbox

- Introductory Overview from CNE (2 min video)
- Web based narrated slide presentation
- Job aids for the e-forms
- Handouts: Peer Feedback Process/Timeline & FAQs
- THR Nurse E-Newsletter article
- What does Peer2Peer mean to my practice as a Direct Care RN? (flashcard 4 min video)
- Video on ineffective peer feedback (“pal-eval”, >2 min)
- 3 Videos on effective peer feedback (1.5 – 2 min)




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## Giving and Receiving Feedback

- Limitation of only training module available internally:
  - Title = "Receiving Feedback and Criticism" (NOT criticism)
  - Content = Sales setting (not clinical)
- Unable to locate professional video training for clinicians
  - Please let us know if you have found this source
- THR training videos on effective peer feedback
  - Note our colleagues are not professional actors, these are real nurses!!!!
  - We think it is "fun" that at the end they are so excited because they FINISHED their perhaps "final cut"
  - We share those with you now




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## Feedback on Nurse Communication and Preceptor Orienteer

- Video for Slide 38




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## Feedback on Adoption of Evidence-based Practice

- Video for Slide 39




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## Effective Peer Review Feedback

- Video for Slide 40




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## Summary

- Shared governance structure allowed a frontline team of nurses to design a nurse led process
- Team:
  - Reviewed the best practice and the literature
  - Developed a conceptual framework for professional practice review that includes all forms of peer review and also peer feedback
  - Designed the forms and process with an electronic solution
  - Piloted the process on their units
  - Developed the educational strategies
- Launched the new process system-wide with involvement of education leaders and team




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## Journey to Magnet

- **EP 15:** Nurses at all levels engage in periodic formal performance reviews that include a self-appraisal and peer feedback process for assurance of competence and continuous professional development.
- **At THR:** Nurses participate in a “P2P” feedback process that occurs as a part of and for the nurse’s integration into their self-appraisal and goal development. The nurse then shares their self-appraisal with their manager at the time of their formal performance review.




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## Discussion and Questions

We would love to learn from you regarding your peer feedback process

Jennifer Bruce: [JenniferBruce@texashealth.org](mailto:JenniferBruce@texashealth.org)

Todd Hobbs: [ToddHobbs@texashealth.org](mailto:ToddHobbs@texashealth.org)

Dana Kennedy: [DanaKennedy@texashealth.org](mailto:DanaKennedy@texashealth.org)

Paula Spears: [PaulaSpears@texashealth.org](mailto:PaulaSpears@texashealth.org)  
THR System Nursing Operations  
Phone 682-236-6740




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