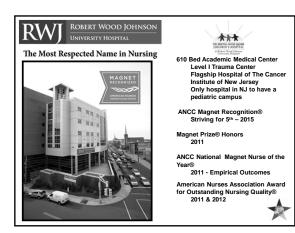
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Nursing Peer Review: Advancing the Process through Technology

Stephanie D. Conners, MBA, BSN, NEA-BC Senior Vice President Operations Chief Nursing Officer Robert Wood Johnson University Hospital

& Kathy Easter, RN, CCRN Magnet® Program Director Robert Wood Johnson University Hospital



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Objectives

- Define peer review
- Identify challenges in planning and developing a new peer-review process
- Understand the steps involved in developing a fully automated peer review tool and process
- Discuss post implementation evaluation

Peer Review Defined by the American Nurses Association

"A collegial, systematic, and periodic process by which registered nurses are held accountable for practice and which fosters the refinement of one's knowledge, skills, and decision-making at all levels and in all areas of practice" (American Nurses Association [ANA], 2004).

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Scope and Standards of Practice

- "Registered nurses are bound by a professional code of ethics and regulate themselves as individuals through peer review of practice" (ANA, 2004,p. 11).
- "Self-regulation by the profession of nursing assures quality of performance, which is the heart of the profession's social contract between the profession of nursing and society" (Nursing's Social Policy Statement, 2003 as cited in ANA, 2004, p.11).

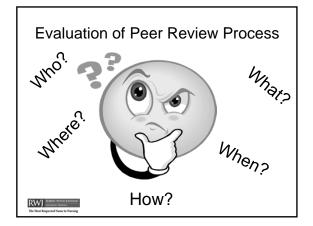
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2014 Magnet® Application Manual EP 15

"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" (American Nurses Credentialing Center [ANCC], 2013, p. 47).



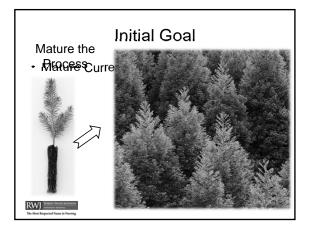






Team Formation Direct Care Nurses -Critical Care Performance Improvement Analyst • Leadership -Perioperative Services - Nursing Director Professional Advancement System/Clinical Ladder - Clinical Nurse -Medical/Surgical • Bargaining Unit Leadership/CPC Member Educator – MPD -Ambulatory/Outpatient - HR Department -Advanced Practice · Information Systems Nurses -Women's and Children's

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Team Development

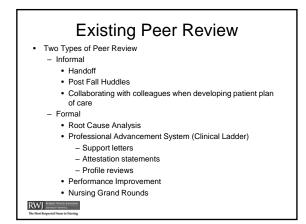
- Literature review
- Selected, read, and discussed peerreviewed journal articles
- Contacted other Magnet Organizations looking for "Best Practices"
- Identified "opportunities for improvement"
- Brainstorming sessions

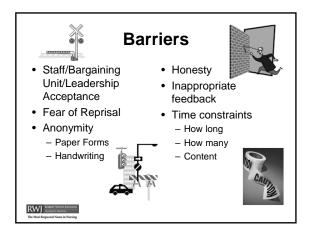
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Initial Considerations

- Size of Organization
- Reporting Structure
- 1900 Nurses
- Practice Settings
- Roles
- Responsibilities
- Common Themes
- New Performance Appraisal Process

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Maintain positive relationships with peers and colleagues that support a healthy work environment.

RWJ ROBERT WOOD JOHNNON Inference





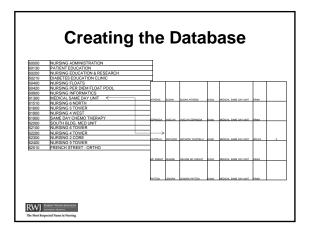
Project Charter for: Nursing Peer Review	
Problem Statement: Limited formalized peer review processes exist within the professional nursing division at RVAIN. The purpose of this committee is to expand, develop, and implement the formalized peer review processes at all levels in the nursing division.	Start Date: 2/3/11 Planned End Date: Phase I & II 12/2013 Executive Sponsor: Stephanie Conners
Objectives: Develops an electronic nursing peer review tool Educate all levels of the professional nursing division on this tool Inginema if many all per review the borned with the objective to espand the primary peer review tool to incorporate unit-specific safety/quality/technical/ clinical components of respective nursing practices. • Espand program to all professional nurses at all levels within the nursing division Herrics.	Project Owner: Kathy Easter PI Facilitator: Brandi Handel PI Mentor: Kelly Young
If staff educated on peer review process muraing astimistation accord of stopic completed of stopic completed by pair nursing unit evaluations completed by pair nursing unit *% of overall participation post house-wide implementation	Team Members: Kathy Easter Dawn Tortajada Claudia Pagani Judy Danella
Project Score Information: Diration for to By Munch 31, 2011 Present draft to galance 31, 2014 Diration for the Schwart 31, 2014 Diration for the Schwart 31, 2014 Diration for the Schwart 31, 2014 Choose gold number of the Schwart 31, 2014 Diration for the Schwart 31, 2014 All Schwart 31, 2014 Diration for the Schwart 31, 2014 Diration	Christine Conklin Marty Everhart Myrna Young Carla Boyle Kobi Walsh Jackie Gladdis Pauline Chan



New Knowledge Innovations & Technology

- Develop Tool
- Invite I.T. to the table
- Obtain Lists from H.R.
- Determine Reporting Structure
- Build Database
- Demonstrate System

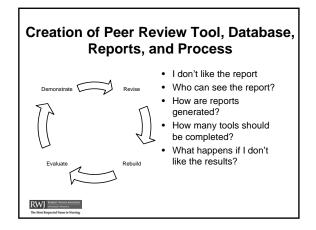
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		Creati	ng	Re	ports	
Conners	Stephanie	EXECUTIVE OFFICES	90001	AA002	SR.VICE-PRESIDENT	Access to All Peer Review
MALAST	TRACEY	NURSING 6 NORTH	61510		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	5 NORTH	68500		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	4 NORTH	68400		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	BMTU	68800		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	FRENCH STREET - ORTHO	62510		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	NURSING 9 TOWER	62400		ASSISTANT VICE-PRESIDENT	
MALAST	TRACEY	NEUROSCIENCE - 7 TOWER	62800		ASSISTANT VICE-PRESIDENT	
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Implementation

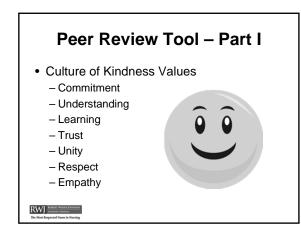
- Provide education
- Select pilot units
- Evaluate process
- Implement electronic peer review process house-wide

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Pilot Units

- MSD, 7Tower, SICU Core, SICU West, Peds 5 and Adolescent Unit
- Education provided by team members
- Pilot initiated on 12/1/2011
- Pilot concluded 12/15/2011
- Evaluations completed
- Process and reports amended based on staff recommendations



Guidelines for Selecting Peer Reviewers

- Registered Nurse will select 2 peers from own unit/workgroup
- Registered Nurse will select 1 peer from a unit/workgroup or department with whom they interact on a regular basis
- Clinical Director/Leader will select 1 peer from within unit/workgroup

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How Do I Choose Who Will Complete a Peer Review?

Examples

- · Someone you work with frequently
- · Someone in your unit/workgroup who works a different schedule
 - · Opposite weekends
 - Opposite shift
 - · Per-diems
- Someone outside your unit/workgroup
 - Someone from a unit/workgroup outside of your own:
 - · Sending & receiving department

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Process & Report Generation

- A maximum of 4 Peer Review Tools will be completed on each RN System locks out after 4 submissions
 - Peer Review System Live on January 9, 2012
- System Live during first quarter of calendar year during Phase I
 System Live during 4th quarter of calendar year during Phase II
 Averages computed electronically for each category

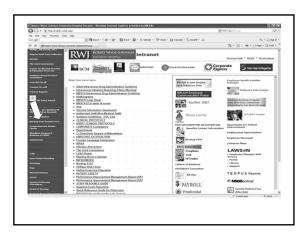
- Average overall score computed electronically E-mail notification sent to nursing leader that Peer Review Tool has been submitted
- Password protected reports Reports shared with direct reports •
- Electronic Submission ensures anonymity

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Location of Peer Review Tool

- Go to RWJUH Intranet
- Select Peer Review
- Select Cost Center and Unit
- Click "Filter"
- Select Employee
- Complete Peer Review Tool
- Click Submit

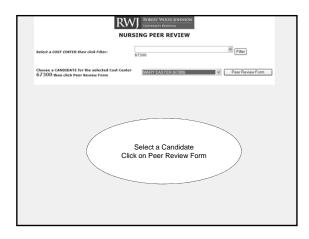
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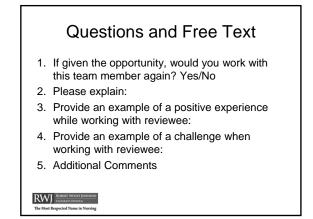
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CANDIDATE FOR REVIE DATE: 1/12/2012 CHECK ONE*:	aw: MARY EASTER				- Feyerres
	O SENIOR NURSING L	EADERSHIP O	CLINICAL DIRECTOR		
(O CLINICAL SUPERVISOR	CNS/CNE OH	EAD NURSE O STA	IFF NURSE	
SCALE: 1- Developmer	nt Needed 2- Strong Values 3- 0	Outstanding			
Value Category	Behaviors	1 Development Needed	2 Strong Values	3 Outstanding	Score"
Commitment is commitment is establishing ownership and dedication to personal, professional and organizational success with passion and purpose	Hy colleague always Walks through the threshold of RV2 and knows that he/she is privileged to work is a most outstanding & knowsteinal institution Hy colleague always asks 'How can E help you, because E will always make the time for you?'	ownership of projects and/or work assignments	 Assumes ownership of projects and/or assignment from start to finish Consistently transfers personal energy and passion into action to accomplish goals and objectives 	 Proactively initiates and seeks ownership of new projects. Ideas, and/or assignments beyond expectations Inspins and passionately leads others to reach and exceed goals and objectives in the face of obstacles 	×
Understanding is the ability to action-ledge the strength of others, appreciate their challenges and effectively recognize and support their needs.	Hy colleague always saics patients and viaitors' What is most important by our about your visit? and listens to their concerns and intervenes on their behalf	needs and provides information only when asked • Exhibits lack of engagement by ignoring others	 Consistently partners with others and supports those presented with challenges and/or barriers Consistently demonstrates reflective listening to build a high level engagement with others 	implements ideas to support others to work more efficiently and overcome challenges and/or barriers • Coaches others to	M

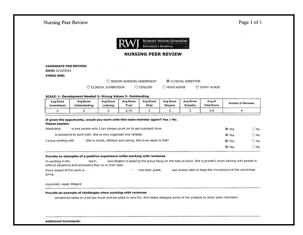




- Read the Culture Value Categories and Behaviors
- Select the number that characterizes the peer review candidate's values and behaviors
 - Rating Scale:
 - 1=Development Needed
 - 2=Strong Values 3=Outstanding
 - S=Outstanding
- Space provided for comments – Type comments in this section

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Editor Staff RN Peer Review Qu Mont Respected Name in Nursing ALL NURSING UNI		<u>s</u>		
Questions	Rare 1	Often 2	Always 3	N/A
Quality				
1. Supports the "No Pass" culture by promptly responding to call bells and alarms (i.e. cardiac monitor, bed exit, pumps)				
2. Performs hand hygiene according to WHO guidelines.				
3. Provides thorough bedside handoff using SBAR communication.				
	I	I		



Questions	Rare	Often	Always	N/A
	1	2	3	
Competency				
1. Provides effective patient education on				
medications throughout the course of				
hospitalization and in preparation for discharge.				
2. Promptly identifies rapidly changing situations				
and responds appropriately in an emergency.				
3. Demonstrates effective management of patient				
receiving continuous epidural analgesia and				
patient controlled epidural analgesia.				

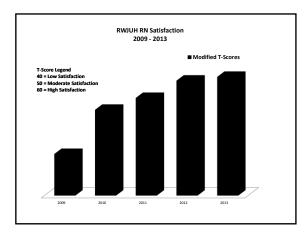
International UNIT: Mother Baby Unit				
Questions	Rare	Often	Always	N/A
Competency	1	2	3	
 Provides effective patient education on medications throughout the course of hospitalization and in preparation for discharge. 				
2. Promptly identifies rapidly changing situations and responds appropriately in an emergency.				
3. Manages an infant with respiratory distress using Neonatal Resuscitation guidelines.				
 Provides effective education that adequately prepares the new family for discharge. 				



Outcomes

Pilot Unit Participation Rate 96% House-wide Participation Rate – 88% RN Satisfaction Improved!

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Questions?????

Send questions and correspondence to: Kathy Easter, RN, CCRN Magnet® Program Director Robert Wood Johnson University Hospital One Robert Wood Johnson Place New Brunswick, New Jersey 08903 E-mail – <u>kathy.easter@rwjuh.edu</u>

References

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