



## **Nursing Peer Review**

# Mission

Jersey City Medical Center Peer Review Committee is comprised of Clinical Nurse Leaders, Clinical Nurse Specialists, Nurse Educators and Clinical Ladder III Nurses. The Peer Review Committee provides a comfortable forum for staff nurses to discuss main issues of the unit and discuss solutions using evidence based practice. The committee will provide support and assistance by facilitating open dialogue when nursing issues and system problems have been referred. The committee will provide the forum for thoughtful examination of nursing practice, practice patterns, and nursing actions related to compromised or adverse patient outcomes. It is our goal to prepare nurses for discussion at the staff level and find solutions using evidence based sources to mitigate adverse outcomes and overall improve nursing practice and patient safety.

# What is Nursing Peer Review?

Peer review is a systematic approach to critically appraise practice by one's peers. It is the evaluation of an individual event or professional's performance with the goal of objectively evaluating patient care to identify opportunities for improvement.

The evaluation is based on generally recognized standards of care. Through this process, nurses receive feedback for personal improvement or confirmation of personal achievement related to the effectiveness of their professional, technical, and interpersonal skills in providing patient care.

It is an opportunity for professional peers to make evidence-based recommendations for individual, systems, and practice change.

Jersey City Medical Center Nursing Peer Review Program will be conducted in a non-punitive fashion. The Peer Reviewers shall not have a conflict of interest or be directly involved in the case. Supervisors capable of disciplining a staff member will not be part of the Peer Review Case Evaluation.

# Objectives

- To demonstrate an organized effort to critically appraise, systematically assess, monitor, make judgments, determine strengths and weaknesses, review quality of practice
- To provide evidence to use as the basis for recommendations
- To take a non-punitive approach to corrective action and practice change
- To allow for an open forum to discuss nursing-related issues amongst peers
- To provide feedback to individuals regarding quality of patient care
- To discuss action proposals/plans
- To review patient outcomes related to nursing care
- To provide a learning experience for nursing professionals

# **What is reviewed?**

## **“What makes a good case?”**

Any nursing-related issues can be reviewed by the Peer Review Committee (PRC). The PRC is the facilitating body of the hospitalwide peer review process, consisting of RNs who are not at all involved in the disciplinary process.

Any nursing-related issues can be referred to the Peer Review Committee for approval. The PRC will deem appropriate any cases before they are reviewed by individual units.

Cases can be evaluated for:

- Adverse patient occurrences/outcomes
- Sentinel events/near misses
- Unusual clinical pattern of care identified (positive or negative)
- Departmental head request
- Communication

However, Nursing Peer Review will follow the non-punitive model and not review the following:

- Occurrences reportable to the State Board of Nursing
- Non-nursing related cases
- High profile patients/cases
- Any event involving criminal activity

# Example Case

Mr. J is a 68 year-old male who was admitted to the hospital for pneumonia. Thus far, his hospital stay was unremarkable. On his third hospital day, the day shift nurse went in to assess the patient at 0730. In the RN notes, she documented that Mr. J complained of constant chest pain that began during the night. The assessment documentation included stable vital signs, the pain assessment of 5/10, and diminished right lower lobe lung sounds. The nurse administered 650mg PO Tylenol that was ordered as needed for pain (0800). At 1200, the nurse documents, "Patient tolerated lunch, asleep now." At the end of her shift (1900), the nurse went back in to inform her patient that she was leaving for the day. Mr. J complained that the Tylenol did not help and that he still had the pain.

During shift change RN-to-RN report, the day nurse informed the night nurse that Mr. J had chest pain, but "I gave him some Tylenol and told him it was because he has pneumonia". She also reported stable vital signs and no change in his plan of care.

When the night nurse went in to assess Mr. J at 1945, she noted that he was pale, diaphoretic, and clutching his chest. He stated, "Please help me, I can't stand this chest pain anymore!"

The nurse immediately activated a Rapid Response Team, who identified that the patient was having an acute myocardial infarction and transferred him to the cardiac cath lab for intervention.

*Can you identify an adverse patient occurrence?*

*Was there a lack of critical thinking?*

*Was there a knowledge gap?*

# **Who is Reviewed and When?**

The Nursing Peer Review is opened to any Registered Professional Nurse working at Jersey City Medical Center.

Attendance by the RN involved in the case is mandatory. All other RNs from the same unit are strongly encouraged to attend to assist in the review process and make recommendations. Each peer review will have a facilitator from the Peer Review Committee to assist in the review process, and who will act as a participant observer.

A peer review session will be held on each nursing unit on a rotating basis. Each nursing unit will be made aware of their rotation at least one month in advance to begin preparation.

Any nursing unit who wishes to conduct additional peer reviews is encouraged to do so, and will also be assisted by a Peer Review Committee facilitator.

# **The Peer Review Process**

1. A case is referred to the Peer Review Committee (PRC).
2. The PRC will approve each case on an individual basis.  
--Cases will be screened for appropriateness
3. A peer review will be set for the nursing unit.
4. The involved nursing staff will organize the case to present to their unit with the assistance of their designated facilitator.
5. The peer review presentation takes place on the nursing unit.
6. Guideline questions are used to facilitate the exploration of the case.
7. An open-forum discussion critique of the case ensues.
8. Ideas for change are generated from the guidelines and discussions.
9. A tentative plan for change may occur.

## **After the Peer Review**

Often, many positive ideas for change arise from peer review meetings. The facilitator and/or presenter will bring these ideas back to nursing management. At the discretion of the Nurse Manager, an action plan may be implemented or a project can be started.

The Peer Review Committee will follow up with the respective nursing unit quarterly to evaluate project outcomes.



# Goals

1. Improve the quality of care provided to the patient
2. Monitor the performance of nurses
3. Identify opportunities for performance improvement
4. Monitor significant trends by analyzing aggregate data



**NURSING PEER REVIEW REFERRAL FORM**

**Referral by:** \_\_\_\_\_ **Department/Unit**

**Referral for:** \_\_\_\_\_ **Unit**

**Reason for referral:**

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**Reason for referral (nursing):**

- Adverse patient occurrence
- Sentinel even/ near miss identified
- Unusual clinical pattern of care identified
- Requested by Departmental Head

**Initial Case Evaluation:**

Were nursing policies/procedures followed? \_\_\_\_\_

Did the patient have a clearly defined adverse outcome? \_\_\_\_\_

If no, was there a significant risk for an adverse outcome? \_\_\_\_\_

Is the adverse outcome or risk thereof related to the natural course of the patient's condition? \_\_\_\_\_

Is the adverse outcome/risk related to any contributing factors such as systems issues or performance of other health care professionals? If yes, please explain.

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**Staff Required for Attendance:**

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**To be determined by the Nursing Peer Review Committee**

**Date for Peer Review:** \_\_\_\_\_ **Facilitator:** \_\_\_\_\_



**Peer Review Committee Approval Screen**

**Date of Referral:** \_\_\_\_\_

**Unit:** \_\_\_\_\_

**Facilitator:** \_\_\_\_\_

**Description of case/event:**

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**Appropriate for Nursing Peer Review**

- Yes**
- No, please explain**

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**Exclusion Guidelines:**

- Reportable to the State Board of Nursing**
- Sentinel event resulting in death**
- Non-nursing related**
- High-profile patients/cases**
- Any event involving criminal activity**



### **Nursing Peer Review Case Evaluation Form**

*These guide questions are provided to assist you through the peer review process.*

- 1. Was the nursing practice based on policies, procedures, and/or guidelines?**
- 2. Were there any major gaps/omissions in handoff/communication?**
- 3. Were the actions of the nurse based on best practice?**
- 4. What, if any, were the confounding variables? (Ex. Staffing, patient acuity)  
Were appropriate resources available? (Ex. equipment/supplies, information)**
- 5. Was the plan of care clearly identified and thoroughly developed? Explain.**
- 6. Was communication among the staff and patient/family comprehensive and effective?**
- 7. Was there any knowledge deficit with staff?**
- 8. Was there a lack of critical thinking amongst the nurses involved with the event?**
- 9. Did the patient have a clearly defined adverse outcome?**
  - a. If yes, please explain.**
  - b. If no, was there a significant risk for an adverse outcome?**
- 10. Is the adverse outcome or risk thereof related to the natural course of the patient's condition? Explain.**

**Could you identify an error(s)?**

**What have we learned from this case?**

**How can the specific outcome be prevented/enhanced in the future? What is our plan?**