Nursing Incident Based Peer Review: An Innovative Process for Improving Patient Outcomes

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Objectives

- Describe four components of implementing the nursing incident based peer review process in a Magnet hospital setting.
- Identify opportunities for nursing practice changes and improved patient outcomes through the nursing incident based peer review process.



Incident Based Peer Review Implementation Components

- Research & Development
- Structure of Incident Based Peer Review (IBPR)
- Process of IBPR
- Communication of IBPR



- 2007: CNO brought the idea of IBPR to Shared Governance Executive Council
 - Task Force formed to develop structure and process
- Task Force conducted a literature review and Magnet List
 Serv Inquiry
 - Very little found in literature
 - Only examples found were in Board of Nursing
 Statutes in mandatory incident peer review states and were related to process and structure



- Task Force developed the nursing IBPR process by mirroring the MD Peer Review Process
- Purpose of Nursing Incident Based Peer Review:
 - To review nursing-related patient care concerns using a standardized process.
 - To provide a process for fact-finding, analysis, and study of events by nurses in a climate of collegial problem solving. It is focused on obtaining all relevant information about an event, and to make recommendations of corrective actions.



- Committee Developed Policy for IBPR:
 - Outlined the review process
 - Identified Triggers
 - Forms
 - Data Collection
 - Identified membership of the review team

- 2008: Pilot
 - □ 3 Case Reviews
 - Finalized Process
 - Educated Hospital Staff
- 2009: Full Implementation
 - □ 10 Case Reviews
 - Presentations on Process Successes

- 2010: Expansion of Goals
 - □ 12 Case Reviews
 - Practice ChangeRecommendations
- 2011: Committee Expansion
 - Increased CommitteeMembership
 - □ 15 Case Reviews (*Goal)
 - Practice ChangeRecommendations



Structure of IBPR

- Incident Based Peer Review Committee was integrated into the hospital's Shared Governance Structure
 - IBPR is a Committee of the hospital-wide Quality
 Improvement (QI) Council
 - IBPR sets yearly SMART goals
 - Reports quarterly on goal progress to QI Council
- Membership of IBPR Committee
 - Quality & Outcomes Manager
 - APNs
 - Clinical Experts
 - Bedside RN Staff

- Case Referral
 - Multiple Avenues
 - Incident Reporting through Risk Management
 - Anonymous
 - Staff RN
 - Committee



Morristown Memorial Hospital Nursing Patient Care Concern Referral Form

Patient Initials	MRN Number	Admission Date	Date Referred
Date of Birth	Account Number	Date of Incident	Committee Use Only Case Number

A referral can be made for a patient concern related to the following

- Alteration from nursing process/practice
- Alteration from the MMH nursing standards of care/nursing policy/practice
- Actions outside of the nurse's scope of practice

Describe of reasincident):	son for referral/ incid	ent (include date, time, and location of
		_
		
		
		-
Referral Source:	: (Check which appli	es)
O Physician	O Staff Nurse	O Manager O Risk Management
O Quality	O Patient/ family	O Patient Advocate
O Other		
OPTIONAL:		
Name		Email
Phone		

- Case Review
 - Initial Review by Committee Member looking for:
 - Alteration in the nursing process, if so what caused the alteration
 - Adequacy of documentation
 - Contributing factors
 - Determination if the alteration in the nursing process caused harm to the patient
 - Possible recommendations



- Committee Review
 - All Members of Committee discuss case which is presented by initial reviewer
 - Committee Determines:
 - Patient Outcomes
 - Nursing Process Issues
 - Nursing Standard of Care
 - Analysis of Incident
 - Human Error Type
 - Recommendations

- Committee Recommendations
 - Multiple Outcomes can occur from a case review
 - Case may be referred to MD Peer Review
 - Refer practice issue discovered in case to appropriate Practice council/committee
 - Exemplary nursing care rendered-positive feedback given to staff involved
 - Professional Development Council referral for specific nursing education reinforcement



Communication of IBPR

- Success of Committee
 - Continuous Reinforcement of its Existence
 - Positive Outcomes from Process
- Bi-Annual Presentations made by Committee
 Members in various forums
 - Shared Governance Councils
 - Unit Leader (Educators, Coordinators) Meetings
 - Charge Nurse and Preceptor Training Classes
 - Executive Council

Opportunities for Change

- Nursing Practice
- Patient Outcomes



Nursing Practice Changes

- Nursing Practice Changes Made as a Result of IBPR:
 - Pain Management
 - SBAR Communication
 - IV Therapy
 - Assessment/Treatment/Safety of ETOH
 Withdrawal Patients



Nursing Practice Changes

- Practice Flashes:
 - Friendly Reminders about Common Nursing Practices:
 - PEG Care
 - Peripheral IV site care
 - Wound Irrigation Methods

IBPR Impact

- Helps nurses own their practice
- Increases nurses' accountability for their practice
- Creates an environment/culture where the Status
 Quo is unacceptable and questioned
- Gives nurses an avenue where it is possible to step up and address issues to improve nursing practice and patient outcomes



The Future of IBPR

- Increase number of Case Reviews completed each year
- Further expand staff nurse committee membership
- Continue to look for more practice improvement recommendations from case reviews
- Wider audience presentations- unit level meetings, off-shift staff, multi-disciplinary forums



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- Questions???
 - Thank You!
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