It is not uncommon for me to have questions during a consultation about the “peer requirements.” Before addressing what is required for the Organizational Overview or application documentation, it is important to distinguish the difference between peer feedback, peer evaluation, and peer review. Moreover, who is considered a peer?

A peer is someone of the same rank, education, clinical expertise, and level of licensure who performs similar roles. I The ANA Peer Review Guidelines position statement says, “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.” II Given that, each nurse must participate with other nurses in the decision-making process for evaluating nursing care; this process is called peer review. It is the process of peer review that stimulates professionalism through increased accountability and promotes the self-regulating nature of the nursing profession.

Peer review is defined as “an organized effort whereby practicing professionals review the quality and appropriateness of services ordered or performed by their professional peers.” In nursing, it 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.” The focus of peer review is practice. It is the mechanism used to:

▶ Evaluate the quality and quantity of nursing care based on practice standards.
▶ Determine the strengths and weaknesses of nursing care based on practice standards.
▶ Provide evidence for change in practice protocols to improve care.
▶ Identify practice patterns that indicate a need for more knowledge.

III
Peer review is not intended to be punitive or anonymous. In addition to consideration of the rank of the nurse and nursing practice, it is intended to take into account the developmental stage of the nurse, to foster a continuous learning culture of patient safety and best practice, and to provide feedback that is continuous, timely, and routine.

Peer evaluation is an element of performance evaluation and is generally linked to professional goals, compensation, and consequences. Peer evaluation is always completed by a peer, but if it is done as a part of a 360-degree process, all members of the contributing team (some may or may not be peers) should complete the evaluation. Peer evaluation is voluntary; peer review is not. Conducting 360-degree evaluations is an option for the organization; peer review is NOT optional for a professional.

The Organizational Overview (OO-10) requires evidence of the following documents for nurses at all levels (staff nurses up to the CNO):

- Self-appraisal tools
- Peer feedback tools
- Performance review tools

The self-appraisal tool, sometimes referred to as the self-evaluation, is the tool that the individual utilizes to evaluate his or her own performance against specific standards, goals, and objectives. The peer feedback tool is the tool used by peers to evaluate their peer’s performance against specific organizational standards, goals, and objectives. It is designed to provide input based on observed performance and enables the receiver to have an understanding about personal and professional strengths and gaps in practice or performance. Peer feedback is a way for a staff member to gain additional insight about his or her performance and/or validate a personal perspective or point of view. It should enable the receiver to walk away understanding exactly what he or she did and the impact.

Exemplary Professional Practice (EP15) states, "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."

- Provide one example, with supporting evidence, of clinical nurses using periodic formal performance review that includes a self-appraisal and peer feedback process to enhance competence or professional development.

AND

- Provide one example, with supporting evidence, of nurse leaders using periodic formal performance review that includes a self-appraisal and peer feedback process to enhance competence or professional development.

Note: The CNO and nurse educators are included in nurse leaders.
As you can see, the requirements are specific and it is imperative that the terms not be confused, as the performance review, self-appraisal, and peer feedback processes are specifically designed in this source of evidence to enhance the competence or professional development of the clinical nurse or leader.

In conclusion, nurses are responsible for assessing their own competence.\textsuperscript{viii} Competence is a self-regulating duty. Nurses are responsible for both peer and self-assessments and must strive for excellence in their nursing practice, whatever the role or setting.

\textsuperscript{1} Barbara Haag-Heitman and Vicki George; Nursing Peer Review: Principles and Practice; \textit{American Nurse Today}; September 2011; Volume 6, Number 9; p 48-52.

\textsuperscript{2} Peer Review Guidelines; American Nurses Association; 1988.

\textsuperscript{3} Barbara Haag-Heitman and Vicki George; Peer Review in Nursing: Principles for Successful Practice; Jones and Bartlett Publishers; 2011.

\textsuperscript{4} Jennifer M. Dupee, MBA, BSN, RN; Neysa P. Ernst, BSN, RN; and E. Kelly Caslin, BSN, RN; Does Multisource Feedback Influence Performance Appraisal Satisfaction?; \textit{Nursing Management}; August 2014; p 10-20.

\textsuperscript{5} 2014 Magnet\textsuperscript{®} Application Manual.

\textsuperscript{6} Peer Feedback: Learning from College of Registered Nurses British Columbia; May 2006; p 1-4.

\textsuperscript{7} 2014 Magnet\textsuperscript{®} Application Manual.

\textsuperscript{8} Code of Ethics for Nurses with Interpretive Statements; American Nurses Association; 2015; p 16 and 22.