EP15 – 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 <u>clinical nurses</u> 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 <u>nurse leaders*</u> using periodic formal performance review that includes a self-appraisal and peer feedback process to enhance competence or professional development. (*including CNO and nurse educators)

Introduction:

Self-appraisal and peer feedback are important aspects of professional nursing practice. There are several structures that support this activity for nurses at all levels in the organization. All registered nurses are PNSO members and are required to participate in self-appraisal and peer review during each annual performance evaluation cycle. The same expectations apply for clinical nurses and nurse leaders.

The PNSO bylaws describe this expectation in Article III, Section 2, Item 3.

Section 2. Responsibilities and Rights of Members

1. Members are individually accountable for their nursing practice.
2. Members are collectively accountable for the outcomes of nursing care provided by the institution.
3. **Members are expected to participate in self-evaluation and peer review processes.**
4. Members utilize the mechanisms of the organization to address nursing matters. Members are responsible for being informed about the actions and activities of the PNSO.
5. Members may nominate candidates for office in the PNSO.
6. Members vote in the annual election.
7. Members participate in shared governance activities.

Annual Performance Evaluation:

All nurses in any clinical or leadership role receive a formal performance evaluation on an annual basis from their direct line manager. UVA employs an online system for recording performance management activity, called ePerformance, which supports all

performance evaluation activity and documentation in a standardized manner. In addition to completing the annual performance evaluation, the system enables managers to capture performance management material all through the year via a function called "performance notes." This function provides a mechanism for ongoing coaching and documentation that occurs throughout the year.

Peer Review Component:

Managers utilize a system function called "colleague input" to solicit peer feedback for every nurse. Designated peers receive an email with a link to the online form. Once colleague input is entered, the colleague is encouraged to review the peer feedback with the receiver prior to the performance evaluation meeting with the manager. This occurs for clinical nurses and nurse leaders.

Self-Evaluation and Goal-Setting Component:

Likewise, each nurse is required to complete a self-appraisal recorded in the online system. The self-appraisal includes personal professional goal setting that is reviewed at the formal performance evaluation meeting with the manager.

Managers first review the nurse's performance and competency validation for the current performance period and ensure that self-appraisal and peer feedback processes have been completed. Once those steps are completed, the formal performance evaluation meeting between the nurse and manager occurs.

In addition to annual performance cycle activities, nurses are encouraged to engage in continuous self-appraisal throughout the year. The ePerformance system can be accessed by the nurse at any time during the year so he or she can view a copy of his or her current evaluation for progress reporting purposes.

Clinical Career Ladder:

For many years, our Clinical Career Ladder has integrated self-appraisal, goal setting, and peer feedback into the advancement and validation / revalidation process. The career ladder review panels are all composed of peers who serve two-year terms and are approved by the PNSO Cabinet. These panels determine whether candidates will be advanced or validated.

In April 2013, our PNSO Professional Development Committee (PDC) identified a goal to strengthen peer review expectations and guidance documents for all nurses (clinical nurses and nurse leaders). A literature review was conducted to help inform this important work. The committee worked for several months to hone a position statement, which was brought to Cabinet in the summer of 2013 as an Operational Guideline (OG),

an addendum to the PNSO bylaws This OG contains summarized guidance for nurses on the following dimensions of this process:

- Annual self-evaluation and peer review
- Clinician 3 clinical leadership peer review process and tool
- Career ladder process incorporating self-appraisal, peer review and goal-directed professional development
- In-the-moment peer feedback to improve practice
- Peer case review for practice review and quality improvement

Cabinet furthered strengthened language brought by the PDC. The OG was subsequently approved with edits by Cabinet in August 2013.

Additionally, language was crafted by the PDC to further strengthen the PNSO bylaws' core guidance documents for nurses, by delineating the expectation of all UVA Health System nurses to engage in self-evaluation and peer review. This amendment was added to the ballot in the fall of 2013 and passed by a vote of the membership.

PDC leaders developed a peer review CBL module with embedded role-play video in May 2014 for nursing staff in preparation for the 2014 performance management cycle. Drop-in skills sessions were conducted in May and June 2014 for those staff interested in honing their feedback delivery skills, with a focus on live practice via role-play of peer review scenarios. A communication plan was launched in May 2014 to address Clinician 3s and their managers regarding the requirement for use of the Clinician 3 Peer Review Tool within the 2014 performance evaluation cycle.

Summary of expectations for peer review, self-evaluation, and goal setting:
- Clinical Ladder RN requirements:
  - Annual performance evaluation with self-evaluation and professional goals statement
  - Annual peer review utilizing "colleague input" function with face-to-face content review
  - Annual peer review for Clinician 3s: Use of paper CN3 Peer Review Tool with face-to-face content review
  - Advancement to CN3, CN4, APN 2, APN 3: Self-evaluation and peer reviews required per clinical ladder manual
  - Validation every two years: CN4 and APN 1-3 portfolio submission and review by peer panel. Required content per clinical ladder manual

- Requirements for RN Administrative Coordinators, Nursing Supervisors, Assistant Managers, Managers, Directors and Administrators:

- o Annual performance evaluation with self-evaluation, including evaluation of professional goals attainment. Establish upcoming year professional goals with specific connection to CNO goals for year
- o Annual peer review utilizing "colleague input" function with face-to-face content review

Internal Educational Opportunities:

Our Learning and Organizational Development team supports emerging and established nursing leaders in coursework that promotes leadership development skills. Many of our Clinician 3s and rising Clinician 2 leaders have attended the Informal Leaders series and benefited from the rich tools offered for feedback, including use of a proprietary 360º feedback tool. Since January 2012, 193 nurses have completed this course.

The Best Practices in Management II course also provides a 360º feedback activity, and students receive personal coaching to develop leadership strengths and set specific performance goals. Several proprietary tools from outside vendors are used to assess Style Under Stress, Learning Agility and other aspects of leadership. The manager participants' immediate supervisor also participates in companion classes designed to track the curriculum and provide reinforcement of class themes. Since January 2012, 133 nurse managers and nurse leaders have completed this course. These activities represent a significant investment of institutional resources in the guided self-appraisal and performance feedback for nurse managers, in order to maximize managers' and leaders' development and effectiveness.

These activities supplement our core requirements for self-appraisal and the seeking of peer reviews.

Example 1: Clinical Nurse

Aims Chamberlain, BSN, RN, CCRN, works in the Nerancy Neuro ICU. During the annual performance cycle, his self-evaluation included a goal to advance from a Clinician II to a Clinician III on the Clinical Career Ladder. His peer review and performance appraisal validated his readiness to advance.
Exhibit EP15.a: Chamberlain 2012 Self-Appraisal
Exhibit EP15.b: Chamberlain 2012 Peer Review
Exhibit EP15.c: Chamberlain 2012 Performance Appraisal

Through the portfolio process (Exhibit EP15.d: Chamberlain AdvCn2to3 Portfolio), Aims completed a thorough narrative self-evaluation (pages 12-20) detailing his achievement of Clinician 3 behaviors in his practice. Pages 21-23 are three peer reviews obtained in

support of his advancement. Pages 26-32 are practice exemplars demonstrating his readiness for advancement and clinical development.

Example 2: Nurse Leader

The tools used in the leadership category for performance evaluations are different than the tools used for staff-level employees. The ePerformance system that administers the process is the same, and the mechanics by which nurse leaders conduct self-evaluation, solicit peer review and receive their performance evaluations are the same. The leadership appraisal tool is based on organizational goal achievement and not based on individual role descriptions. This aligns goal achievement on an organizational level.

Mary Crandall, MSN, RN, is the Director for Continuum Home Health. The below documents are evidence of this process and tools used for nurse leaders.
Exhibit EP15.e: Mary Crandall Self-Appraisal
Exhibit EP15.f: Mary Crandall Peer Review
Exhibit EP15.g: Mary Crandall Performance Appraisal

As an accomplished nurse leader within UVA Health System, Crandall is committed to her own professional development. In addition to pursuing her PhD in nursing, she also enrolled in Best Practices in Leadership II in 2013. As described above, students enrolled in this course also receive personal coaching and engage in 360º evaluation using the Voices® tool. (Exhibit EP15.h: Mary Crandall 360)