

## An Innovative Faculty Development Process: Peer Review

Sally Cantwell PhD, RN<sup>1\*</sup> and Melissa Neville DNP, APRN, CPNP-PC<sup>2</sup>

<sup>1</sup>ADN Program Director/Associate Professor, School of Nursing, Weber State University, USA.

<sup>2</sup>MSN Program Director/Associate Professor, School of Nursing, Weber State University, USA.

### \*Corresponding author

Sally Cantwell PhD, RN, ADN Program Director/Associate Professor, School of Nursing, Weber State University, USA, E-Mail: sallycantwell@weber.edu.

Submitted: 31 May 2017; Accepted: 06 June 2017; Published: 12 June 2017

### Abstract

**Background:** Peer evaluation in clinical nursing practice is a process that has been well documented. However, little has been written, or developed regarding the peer review processes of nurse educators in the academic setting. There are a number of reasons for peer review in nursing education. Peer review can be implemented to ensure the preparation and delivery of nurse educators and promote evidence-based teaching in nursing education. Additionally, peer review can be utilized for faculty development and peer mentoring.

**Method:** The purpose of this qualitative interpretive descriptive design study was to examine an innovative faculty development process related to faculty peer review at our institution.

**Results:** The results of this study, demonstrated that peer review of teaching is a beneficial process and source of positive peer influence and faculty development. Based upon the experience at our institution, we are convinced of the necessity for a faculty development process that includes peer review of teaching. This paper presents a brief overview of the reasons for including peer review in evaluating teaching performance and promoting faculty development.

**Conclusion:** Based upon the results of this qualitative descriptive study, a faculty driven peer review process resulted in highly satisfied nurse educators, promotes faculty development and improvement of teaching at our institution.

### Introduction

Within nursing education, there have been numerous calls for educational reform and advancement of the profession. Following the Institute of Medicine's (IOM) call for transformation in nursing education (2010), there has been a dramatic shift in nursing education in undergraduate education [1]. In order to implement these changes, there is a need for faculty mentoring and refinement of teaching methods. For instance, a study conducted by Benner, Sutphen, Leonard and Day (2010), showed that there were multiple deficiencies in classroom teaching in nursing due to weak pedagogy, lack of practical integration and poor development of clinical reasoning skills [2]. Furthermore, the traditional content heavy, teacher-centered nursing curricula has required a shift to conceptually driven, competency based education, which many nursing faculty are unfamiliar. As a result, nursing programs have a responsibility to ensure that educators are grounded in sound clinical and pedagogical practices, and are able to facilitate high quality teaching and learning experiences. At our institution, a method that has been utilized to evaluate and develop faculty teaching methods and performance is institutional peer review.

### Background

Historically, the evaluation of teaching effectiveness has been

measured by course and student evaluations at the end of an academic semester. While useful, this assessment strategy provides limited perspective regarding pedagogy, obtainment of student learning outcomes and actualization of student clinical reasoning skills. Furthermore, personality discrepancies, grading practices, or a student's general dislike of course material may result in bias and questionable validity of evaluation results. This may leave the nursing instructor and administrator with an unclear picture of the faculty's actual teaching ability. To bridge this gap, the Weber State University School of Nursing designed a peer evaluation process to assess the degree to which faculty were incorporating concept-based pedagogy in their teaching and instructional design as it related to student education delivery. It was determined that a peer instructional assessment would include a peer review process of all full-time nursing faculty following implementation of the newly designed concept-based curricula.

An organized and constructive peer review should be considered an integral aspect of quality improvement and faculty development in nursing education [3, 4]. The peer evaluation process at our institution was developed by faculty to review teaching methods, provide mentoring and offer instructional development. The peer review process was designed by nursing faculty who were

known for their innovative teaching methods, high-level of student satisfaction reported on evaluations, and number of years teaching. It was determined that a summative and formative evaluation process would be used. For summative evaluation, a standardized checklist was developed with two or more evaluators using the checklist independently to rate instructional materials (syllabus, learning objectives, assignments, tests, and other items). In addition, at least two peer evaluators attended at least one classroom teaching session. For formative evaluation, one of the peer evaluators sends the results along with recommendations regarding overall teaching performance and instructional materials. At this time, the peer evaluator discusses methods for mentoring and faculty development and provides instructional resources to the faculty. The results of the evaluation are shared with just the faculty member being rated, and are not used as part of his/her overall teaching performance evaluation. Pilot test results of the standardized checklist that was conducted prior to implementation of the peer review process demonstrated a high level of inter-rater reliability.

#### **The peer review process included the following steps:**

- Introductory letter
- Pre-observation consultation
- Teaching observation
- Written evaluation
- Post-observation feedback
- Anonymous reporting of peer review results to peer review committee
- Peer Review Chair reports to faculty development committee

The introductory letter included a synopsis of the peer review process, along with the names of the proposed peer evaluators. At that time, the individual undergoing peer review had the opportunity to accept the peer evaluators assigned to them or contact the peer review committee chair to ask for a change in proposed evaluators. The pre-observation process involved consultation with the faculty undergoing peer review. During this consultation, the faculty member provided course materials for review including a course syllabus, course guides, and course activities prior to the in-class evaluation. In addition, faculty had the opportunity during this meeting to discuss student's dynamics as well as any student concerns that might affect the review process. Two peer evaluators completed the observation of teaching during a two-hour class period. A summative evaluation checklist was developed and tested for validity and inter-rater reliability prior to institutional utilization (Appendix A). Peer evaluators outlined areas that needed further improvement during the written evaluation, post-observation consultation, and general feedback documentation. Following the post-consultation, peer evaluators presented results from the review to the peer review committee. The peer review chair would then take the summarized findings, without disclosing names of faculty reviewed, to the faculty development committee. The faculty development committee then had the opportunity to provide trainings to the general faculty based on common gaps and teaching concerns resulting from the peer reviews.

#### **Theoretical Framework**

A qualitative interpretive descriptive research design was used to examine the impact of a newly developed faculty-led peer review process at our institution. The goal of qualitative descriptive studies is to offer a comprehensive description of events

experienced by individuals or groups of individuals [5]. For this type of qualitative design, any purposeful sampling technique can be used (Lambert, V.A., & Lambert, C.E., 2012. While this type of qualitative framework cannot generate new theory, it can add to the existing literature related to the peer review process in the nursing academic setting [5].

#### **Literature Review**

In 1998, the American Nursing Association recommended peer review as a process through which the nursing profession could ensure quality nursing care in clinical practice [6]. Since that time, peer review has been expanded to include nursing education. When done effectively, peer review has been shown to promote collaboration, ownership, and creativity [6]. It can also provide nursing programs with another mechanism to promote instructional reflection, quality improvement, and peer-to-peer mentoring. Peer review has been utilized in nursing for formative (development) or summative (employee decision-making) processes. Generally, formative and summative peer reviews are independent from one another [7]. Depending upon the goal of the educational setting, components of peer review may include student evaluations, teaching portfolios, course materials, educator self-assessments, pre-assessment meetings, peer debriefing and evaluation rubrics [2, 8]. In contrast to the summative peer review, a formative peer review process is specifically aimed at improving instructional processes, which is shared only with the faculty member. A formative assessment process that promotes a climate of collegiality and self-improvement has been demonstrated to reduce faculty resistance to peer review [2]. Furthermore, an academic unit that promotes an open, positive environment where teams collaborate to develop curriculum are excellent environments for peer review [9]. The quality of the relationship between the evaluator and participant is also a vital component for successful peer review. Peer evaluators who are experienced, trusted, and have demonstrated a positive rapport among faculty help create collegial and productive experiences for the candidate undergoing review [10]. A thoughtful and organized peer review process for improvement of faculty teaching has been shown to be a critical component of professional growth and faculty development in nursing education [9].

#### **Method Design**

The purpose of this qualitative interpretive descriptive design was to assess faculty perception of the peer review process at our institution. Using a qualitative software package, categories and subcategories were derived from self-reports from the perspective of multiple participants. Prevalent themes were discovered by moving from a broad context to a narrow context until data saturation was achieved. The outcome of this study provides a straightforward description of the phenomenon of interest [5]. Credibility, transferability, and confirm ability were established through a number of methods. Stepwise replication occurred during the evaluation procedure where two researchers analyzed the same data independently using the same qualitative software package [11]. The results of the analysis were similar in terms of categories and themes. Following the independent data analysis, a peer debriefing session occurred wherein the results were reviewed by the researchers. and an independent reviewer for confirm ability of the study's findings. The independent reviewer analyzed the background information, research design, data analysis,

---

and research findings for consistency. At the conclusion of the study, respondent validation was used to improve applicability and internal validity of the study. All findings were shared with participants in an open forum, where participants were allowed to provide feedback regarding data analysis and study findings.

### **Sample and Recruitment**

The sampling method was purposive. All faculty involved in the peer review process were invited to participate in the study. Institutional IRB approval was obtained prior to beginning the study. All participants who chose to complete the study signed an informed consent. The desired number of participants was 10-15 individuals. Criteria for study inclusion included members of the peer review committee and faculty who had volunteered to undergo peer review.

### **Inclusion criteria for peer evaluators and faculty was defined as:**

- Full-time faculty with primarily teaching & advising responsibilities
- Faculty with a minimum of 3-years of teaching experience
- Faculty with consistent overall teaching evaluations greater than 3.0
- Faculty who are willing to dedicate the required time to accomplish the PR evaluation process
- Completed the first-year new faculty orientation period and a minimum of two semesters teaching the same course
- Full- or part-time faculty whose primary assignment is teaching and student advisement

### **Data Collection**

An anonymous questionnaire was developed by the researchers and made available to study participants through an encrypted web-based survey instrument. Subjects for the study were recruited through a solicitation e-mail sent to all faculty who had participated in the peer review process. The anonymous survey instrument (Appendix B) consisted of ten questions. Question 1 was participant informed consent. Question 2 was a ratio of years of teaching experience. Question 3 was a dichotomous response to previous peer review experience. Question 6 was a dichotomous response with an open-ended option to provide further details. Question 7 was a Likert Scale ranging from Strongly Disagree to Strongly Agree and an open-ended response. Questions 4, 5, 6, 8, 9, and 10 were open-ended responses. The open-ended transcripts were analyzed using NVivo 11 qualitative software.

### **Data Analysis**

Data analysis included descriptive statistics to analyze the demographic information and ratio scales. Participant narrative data was analyzed using a qualitative, interpretive descriptive design. This involved applying a coding system for narrative content to discover underlying themes and patterns that emerged from participant narrative data. Two researchers independently reviewed the qualitative data for discovering core themes. Utilizing NVivo to generate word-frequency lists based on analysis of words, key terms, and key words in context from the text were analyzed until data saturation was achieved. Following individual analysis, the researchers met together along with an independent reviewer to check for consistency in categories and thematic analysis. A consensus among the three researchers was reached regarding data-saturation for all open-ended questions (Questions

4-10). With researcher review and an internal reviewer, bias was reduced and trust worthiness related to the generation of categories and themes was increased during data analysis. Findings from the study were then shared with faculty at a department-level meeting for review and input.

### **Results**

Nine faculty members completed the 10 question on-line survey, resulting in a 69% return rate. Survey responses were quantitative and qualitative in nature. Faculty ranged in years of teaching experience from a minimum of 3 years to 8+ years. Survey results showed that 67% of participants had never had experience with a formal faculty peer review process. Data analysis of questions 4-10 resulted in the following categories and themes.

#### **Overall Peer Review Experience**

Participants had both positive and negative experiences during the process. The majority of participants would recommend the peer review process to their peers (88.89%). Overall, the open-ended responses were positive.

“It was an excellent experience.”

“Somewhat good and somewhat bad. I think that some people have opinions about you and don’t see all the work you do, so they don’t judge fairly.”

“Positive and low stress. It was exciting to have other faculty members observe my class and teaching style.”

#### **Faculty Development**

Overall, faculty viewed the peer review process about faculty development as a safe and positive experience.

“It would be more helpful if they could observe a couple of classes to provide more guidance on teaching techniques.”

“It encourages a safe environment and provides opportunities for growth from faculty members more experienced.”

“Great exercise. I would highly recommend it to occur on a regular basis, and be seen as a great feedback system to constantly improve our courses.

#### **Evaluation Documents**

Faculty found that the evaluation documents being utilized were well constructed. Suggestions were made on creating forms for the clinical faculty role and that little follow up was provided.

“After the peer review observation there was little follow up or suggestions made for improvement.”

“Feedback from the forms would be nice. The ones I filled out I felt were well constructed.”

#### **Positive Experience**

Faculty reported an overall positive response to their peer review experience.

“It highlighted the importance of carefully planning what you do in class with the concepts that your course emphasizes.”

---

“It was nice to have someone see my teaching and give me feedback.”

### **Negative Experience**

Regardless of the overwhelming positive remarks, faculty still reported some concerns with the peer review process.

“Bias opinions.”

“Thought it was part of the tenure process and I was freaked out.”

“Very little feedback afterwards, but maybe no news is good news.”

### **Suggestions Moving Forward**

“It needs to be fair.”

“Keep doing it and explain to faculty the purpose.”

“Keep up the good work.”

“A continued partnership with more opportunities for growth.”

Overall, the faculty felt the peer review process was a positive collegial experience, which helped them improve their teaching. The summarized negative feedback reported on the questionnaire addressed was that the process was time consuming for both evaluator and reviewer. An additional theme that emerged was that feedback from evaluators was slow and often too general for faculty to make teaching improvements or course changes.

### **Discussion**

The purpose of this qualitative interpretive descriptive design was to assess faculty perception of the peer review process at our institution. The majority of faculty indicated on the survey that they viewed the peer review process as positive and beneficial. The data demonstrated that the majority of faculty would recommend the peer review process to their colleagues. Faculty also reported that the summative evaluation documents were well constructed. The results of this study, demonstrated that peer review of teaching is a beneficial process and source of positive peer influence and faculty development. Study results are consistent with the literature in regards to reducing faculty resistance to peer review when there is a climate of collegiality and trust [3, 10].

Areas of concern related to the peer review process were potential bias of peer evaluators and fear of the review being included on faculty annual performance evaluation. A peer review policy could be written to confirm the intent of the peer review process, keeping it focused on the individual improvement of teaching pedagogy of faculty and generalized faculty development for the School of Nursing. In addition, faculty undergoing review reported the need for a more detailed pre-review training and more opportunities for input into the peer review process. Although all tools and materials were reviewed and approved by all faculty members, research participants reported a need for more opportunities to provide input.

Findings from the study demonstrated inconsistent feedback for faculty undergoing review. Some participants felt there was no feedback given, while others were provided with quality feedback.

An area that is likely to increase faculty satisfaction would be to provide more detailed assessment and feedback tools to the faculty performing peer review so they can in turn communicate the areas needing development to the faculty on classroom instructional design.

Overall, an innovative, faculty driven model was used to develop a summative and formative peer review process. A majority of participants reported the peer review process to be helpful with teaching, learning, and faculty development. Participants did provide suggestions for moving forward in the peer review process, including more faculty-driven input for participation in the evaluation process. Adhering to this feedback will potentially increase faculty buy-in.

### **Limitations**

A limitation for this study was the number of participants who completed the survey. The study had a goal of 10-15 participants, and nine completed the questionnaire. Another limitation was the lack of clarity between participants who were peer evaluators and faculty members who underwent the peer review process.

### **Recommendations**

The findings of this study reinforced that when peer review is used as a formative evaluation process it promotes instructional mentorship and development. Faculty teaching in a concept-based curriculum who are seeking feedback should consider participating in a peer review process. After review of the process and performing this study, recommendations are centered on improving feedback and evaluation documents, including all faculty for peer review, and improved training for peer evaluators. In addition, ensure communication between peer review committee and faculty development committees is well defined, and ensure that faculty are educated on and committed to the materials and process.

Additional instructional formats at our institution that would benefit from the peer review process include clinical and online education.

### **Conclusion**

Any nursing institution undergoing a change in their curriculum as a result of the IOM's call for transformation reform (2010), has the responsibility to ensure nurse educators are facilitating high quality teaching and learning experiences [1]. No longer are the content-heavy, traditional classrooms enough to challenge students to develop the clinical reasoning and critical thinking techniques required of them upon graduation. In order to support faculty members in this change in teaching methods, institutions must develop a way to assess faculty in their classrooms and provide the summative and formative feedback required to improved instructional design. Based upon the results of this qualitative descriptive study, a faculty driven peer review process resulted in highly satisfied nurse educators, promotes faculty development and improvement of teaching at our institution [12, 13].

### **References**

1. Institute of Medicine (2010) The future of nursing: Leading change, advancing health. Retrieved from <http://www.nationalacademies.org/hmd/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>
2. Benner P, Sutphen M, Leonard V, Day L (2010) Educating

- 
- nurses: A call for radical transformation. San Francisco, CA: Jossey-Bass.
3. Blauvelt MJ, Erickson CL, Davenport NC, Spath ML (2012) Say yes to peer review: A collaborative approach to faculty development. *Nurse Educator* 37: 126-130.
  4. George V, Haag-Heitman B (2011) Nursing peer review: The manager's role. *Journal of Nursing Management* 19: 254-259.
  5. Lambert VA, Lambert CE (2012) Qualitative descriptive research: An acceptable design. *Pacific Rim International Journal Nursing Research* 16: 255-256.
  6. American Nurses Association (1998) Peer review guidelines. Kansas City, MO: Author.
  7. Ciesla JS, Lovejoy NC (1997) Peer review: A method for developing faculty leaders. *Nurse Educator* 22: 41-47.
  8. Boehm H, Bonnel W (2010) The use of peer review in nursing education and clinical practice. *Journal for Nurses in Staff Development* 26: 108-115.
  9. Morby SK, Skall A (2010) A human care approach to nursing peer review. *Nursing Science Quarterly* 23: 297-300.
  10. Carter VK (2008) Five steps to becoming a better peer reviewer. *College of Teaching* 56: 85-88.
  11. Anney VN (2014) Ensuring the quality of the findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Educational Research and Policy Studies* 5: 272-28.
  12. Fernandez CE, Yu J (2007) Peer review of teaching. *The Journal of Chiropractic Education* 21: 154-16.
  13. Watson J (2007) Retrieved from <http://watsoncaringscience.org/about-us/caring-science-definitions-processes-theory/>

**Copyright:** ©2017 Sally Cantwell. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.