

ABC Facility of Texas
1234 Some Street
Anywhere, Texas 77777

January 22, 2003

PRIVILEGED & CONFIDENTIAL

CERTIFIED MAIL # _____

RETURN RECEIPT REQUESTED

Nurse, License
555 Some Street
Anywhere, TX 77777

Dear A. Nurse:

The Nursing Peer Review Committee ["Committee"] has commenced an investigation based upon information alleging that you have engaged in nursing care that does not meet minimum acceptable nursing standards, as more fully described below. This investigation was initiated based on a report by _____ . *[Optional to identify person reporting nurse]*

On or about *[give date; (detailed) circumstances & conduct [error or omission]; time(s); location; individual(s) involved by patient number or initials]*.

The Committee will meet to review this matter on _____ *[must be at least 21 and not more than 45 calendar days from the date of notice]. This date may be changed by mutual consent or if appropriate review of external factors necessitates an extension.* Nurse Name, RN, is your contact person regarding all matters concerning this peer review proceeding. She can be reached at _____. All information concerning this matter is regarded as confidential.

At least 15 days before the hearing, you, in person or by your attorney, are entitled to review the documents concerning the events under review. You will also be provided a witness list and copies of written testimony and evidence at least 48 hours before the committee meets. Please contact the Chair person to make the appropriate arrangements.

You may be present throughout the meeting of the Committee and will be given an opportunity to make an opening statement, call witnesses, question witnesses, and be present when testimony or evidence is being presented, ask questions and respond to questions of the committee, and make a closing statement after all evidence is presented. You may also provide the Committee with a written statement at the time of your appearance.

You may also have an attorney or nurse peer accompany you to the meeting and consult with them during the meeting. If you intend to have an attorney at the meeting, you will need to notify the Chairperson at least seven days before the meeting of the committee or you may waive the right to have your attorney present. You are required to notify us only if your attorney will attend the meeting. You are not required to notify us that you will or have consulted with an attorney. *[State other rights that the nurse, nurse's attorney or nurse peer may have.]*

If an attorney representing (name of facility) will be at the committee's meeting, we will notify you no later than seven days prior to the meeting.

The peer review will commence at _____ in room _____. If the matter is not concluded by _____, the session may be adjourned and continued at a later date to be determined

by the chair of the Committee. The procedure and order of business in conducting this review will be governed by the peer review policies attached to this letter.

[Can list the members of the peer review committee (at least 1 member should be from the same practice area as the nurse under review.)]

At the conclusion of the peer review, the Committee will prepare a report of its findings within 14 calendar days. The Committee findings/recommendations may be one or more of the following:

1. no finding of conduct subject to reporting to BON
2. finding of conduct subject to reporting but found to be a minor incident not required to be reported to BON
3. finding of conduct subject to reporting that is not a minor incident and therefore subject to reporting to the BON
4. suggested corrective action
5. recommendation as to whether Committee believes disciplinary action by BON is warranted

You will have 10 calendar days from the receipt of the Committee's report to submit a written rebuttal statement of reasonable length. Your rebuttal statement will become a permanent part of the findings and will be forwarded to the Board of Nursing if the Committee files a report.

Enclosed is a copy of BON Rule 217.19 that governs nursing peer review and a copy of our peer review policies and procedures. I strongly encourage you to read this information carefully so that you are fully aware of your rights in the nursing peer review process.

Please retain this letter as it contains important information that may affect your rights and future nursing practice. Nursing peer review is a confidential proceeding protected by the Nursing Peer Review Law. Do not discuss this matter with anyone other than your personal attorney, the nurse peer who will accompany you to the meeting or Ms. Nurse Name. Do not contact the members of the Committee individually. You will have an opportunity to speak with the Committee members and answer their questions at the time of the review. You may discuss the incident with persons having information about it but should not share information you learn with anyone but your attorney or nurse peer. You and your nurse peer, if you select one, will be required to sign the enclosed confidentiality statement. The nurse peer should sign and return the statement prior to your discussing this matter with her/him. Enclosed is a confidentiality form for you to sign. Should you have any questions, please contact the Chairperson.

Sincerely,

_____, RN
Chair, Nursing Peer Review Committee

Enclosures