Hospital clinicians are exposed to significant situations of stress, emotion, and trauma (BA, Early, Mahrer, Klaristenfeld, Gold, 2014). Research shows that peer-to-peer support may reduce emotional distress following clinician-related adverse events. By creating and implementing a peer-to-peer support network, an organization can enhance patient outcomes, (Dennis, 2013), decrease levels of compassion fatigue (Aycock & Boyle, 2009), increase staff retention (Gillespie, Wallis, Chaboyer, 2007), and help to develop a culture of safety (Pronovost & Hudson, 2012).

Administered anonymous paper pre-surveys to RNs.
Presented educational content to RNs during January staff meeting.
Anonymous post-surveys were administered directly after the educational session.

Please indicate the likelihood you would seek support from the following situations:
- Personal fatigue
- Personal Burnout
- Medical error
- Adverse patient outcome
- Poor patient outcome

Please indicate the likelihood you would seek support from the following individuals:
- significant other
- Friend
- Spiritual advisor
- Counselor
- Co-worker peer

Please indicate the likelihood you would utilize peer to peer support in the following situations, if available to you:
- Personal fatigue
- Personal burnout
- Near medical error
- Medical error researching (Patient with no harm)
- Medical error researching (Patient with harm)
- Poor patient outcome
- Mental health illness
- Interpersonal conflict at work

Stress on staff members following a medically induced trauma could be significantly reduced by implementing the peer to peer program at EMMC.

Every nurse surveyed on Grant 8 Pediatrics strongly supports the peer to peer support program.