Peer Review Structure

**Peer Review Principles**
- Confidentiality
- Impartial Review
- Protection for peer reviewers
- Findings & recommendations supported by evidence based research, protocols & guidelines
- System process Issues
- Tracking of Peer Review cases
- Non-punitive Education

**Peer Review Committee**
- Multidisciplinary Team Composition
- Establish duties
- Establishing peer review strategies
- Establish ground rules
- Disclosure of bias or conflict
- Policy development

**Peer Review Process**
- Identification of Cases for Review
  - Referrals from other Peer review committees
  - Pre-identified populations and complications ie: IV tPA, sICH, mortality
  - Monitoring of performance indicators
  - Review and investigation of adverse events
  - Review and assessment following a complaint or concern from a practitioner or patient/family
  - Near misses
- Decisions
- Who will review and prepare cases?
- Who will present cases?

**Peer Review Reports and Outcomes**
- Report of Findings:
  - Non preventable
  - Potentially preventable
  - Preventable
  - Or
  - Appropriate Care
  - Opportunity: Major/Minor
- Actions:
  - Provide feedback, identify barriers, develop action plans
  - System change recommendations
  - Referrals to other systemwide or departmental peer review committees
  - Categorizing root causes: error, delay, communication, documentation, individual performance and accountability, system inadequacy
  - Education
  - Monitor effectiveness of changes
  - Intensive interventions
  - Trending of Findings
  - Close case

**Systemwide Committee**

**Nursing Department/unit**

**Departmental Performance improvement Committee**

**Nursing Peer Review**

**Physician Peer Review**

**Closing The Loop**
- Documentation of actions with feedback to peer review committee

**Goal**
- Patient Care Improvement