



MACPM Peer Review Policy

I. Participation

- a. Anyone involved in the practice of midwifery (midwives, assistants, and students, regardless of whether they are MACPM members) are welcome to participate in MACPM sponsored peer review.
- b. Students shall attend with their preceptor or other mentor midwife.
- c. Only the primary provider may present a case for review.
- d. By choosing to participate, one is accepting responsibility for maintaining standards of privacy consistent with HIPAA guidelines.¹
- e. One MACPM member will facilitate each peer review sessions. This role rotates among the participating members.
- f. Those attending peer review are expected to have informed their clients of their participation in a professional, confidential peer review process.²
- g. Remote (computer or telephone) participation is possible for those unable to travel to the site of the peer review. The participant is expected to choose a private location and maintain the same standards of confidentiality.

II. Process

- a. Upon arrival the facilitator will ask each midwife to list the cases brought for review including the nature of the case (prenatal, intrapartum, postpartum, or well woman) and the estimated time needed to present the case.
- b. The facilitator will prioritize cases as follows:
 - i. Cases involving mortality
 - ii. Cases involving morbidity
 - iii. Cases involving transfer of care
 - iv. Cases involving consultation
 - v. Cases for which the midwife is seeking feedback or support
- c. At the opening of the meeting the facilitator will review basic guidelines for peer review as follows:
 - i. Information presented in peer review is confidential, and likewise information presented in peer review is to be presented in a way that respects the confidentiality and privacy of the client.

¹ Participants are encouraged to review HIPAA standards and to present only minimally necessary and relevant information as part of peer review.

² HIPAA requires disclosure of participation in peer review to clients. This is most often done with a general disclosure, written or verbal, at the start of care.

- ii. Only relevant and necessary information should be included.
 - iii. The intention of peer review is to encourage best practices through education, support, and critical analysis.
 - iv. The midwife is to present the case without interruption.
 - v. At the conclusion of the case presentation those present are encouraged to ask questions, share information relevant to the case, make recommendations, or offer support.
- d. Midwives will then take turns presenting cases in the order outlined in II.b. Presentation of a case should be concise and should include:
- i. Gravity/parity
 - ii. Significant and relevant medical or obstetrical history
 - iii. Relevant lab work or test results
 - iv. Significant and relevant information about the pregnancy, birth, or postpartum
 - v. Consultation with other providers
 - vi. Current care plan and/or outcome
 - vii. Self-evaluation of the management provided
 - viii. The findings of any relevant research that was done regarding this case.
- e. After the case presentation other participants offer questions, information, recommendations, or support as appropriate.
- f. At the conclusion of peer review participants will receive written verification of their participation.

Approved 7/31/12