

# COLLEGE OF MIDWIVES OF BRITISH COLUMBIA

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## PEER CASE REVIEW POLICY

As a part of CMBC's Quality Assurance Program, every practicing midwife must participate in a minimum of eight case reviews during at least four peer case review sessions every registration year (April 1<sup>st</sup> – March 31<sup>st</sup>). For every three-month period that a midwife is non-practicing this requirement is reduced by one session.

Peer case reviews should be educational and should be conducted in a confidential and non-punitive environment. Each of the peer case review session will:

- consist of at least four midwives;
- discuss the clinical care of clients; and
- address care provided during a planned or unplanned home birth (at least one case review per year).

Peer case reviews carried out by a group of midwives in a hospital department may count toward meeting the peer case review requirement.

Each midwife must also participate in at least one peer case review each year that includes participation from midwives belonging to at least two different practice groups. Where practices are small and the review must be done among midwives that are at a distance, peer case reviews may be conducted by conference call or other electronic means.

The midwife presenting a case must be able to refer directly to the chart at the review. The client's identity must be protected at all times. Ideally the peer case review group will also review the chart for the case. When the group reviews the chart, the client's name, address, PHN and other identifiers must be hidden.

A peer case review shall include:

- 1) A presentation of a case history to date including available information on medical, family, obstetrical and psychosocial history, family circumstance, relevant lab work, test results, ultrasound findings, and significant developments when applicable over the course of pregnancy, labour, birth and postpartum period.
- 2) How the case was managed by one of the midwives participating in the review, including consultations and/or transfer of care to other health care providers.
- 3) A discussion of the application of CMBC regulations, standards, clinical practice guidelines and policies to the case should take place.
- 4) Client feedback on care provided if available.
- 5) Observations and feedback provided to the midwife by peer case review participants.
- 6) Changes made or recommendations for potential changes in practice if applicable.

Each midwife shall maintain an annual peer case review log using the form attached to the policy. In this log, the midwife must record:

- the date of each review;
- the number of cases reviewed and when the birth has taken place;
- place of birth, (home, hospital or transfer in from home to hospital);
- the number of midwives who participated;
- the number of midwifery practices represented, and if the peer review was conducted in person, by teleconference or other electronic means.

No details of the cases reviewed should be recorded in any format. A review of this nature is not protected under Section 51 of the Evidence Act therefore it is important to ensure the anonymity of the cases being reviewed and not to produce any documents from the review outside the log.

The Peer Case Review Log shall be made available to CMBC for inspection upon request. CMBC may randomly choose midwives from 20 practices each year to submit their individual Peer Case Review Logs.