



WARM Peer Review Policies and Procedures

Peer Review is routine, confidential, professional, non-punitive and educational. Peer Review brings midwives in an area together on a regular basis to discuss their cases and learn from each other. It is an opportunity for cohesiveness within a community and can serve as a foundation of support when difficult situations arise.

- WARM will maintain WA CQIP status for approved peer review.
- Licensed midwives in WA State are required to present 5 cases at Peer Review every 2 years and CPM recertification requires 5 hours every 3 years.
- It's recommended to focus on cases involving consultation, transfer of care, transport to the hospital, cases outside of practice guidelines, cases needing input from other providers, interesting cases or cases that led to a learning opportunity.
- All those attending need to be WARM members and a minimum of 3 need to be WA state licensed, WARM professional members (LMs or CNMs) and from separate midwifery practices. Other practicing midwives may also attend and/or present cases.
- Student midwives/apprentices who are members of WARM can be included in Peer Review, as will be determined by each peer review group and must be accompanied by their current preceptor or another WARM midwife sponsor. All those attending the peer review will be notified ahead of time that student midwives/apprentices will be present.
- One midwife will act as the facilitator to lead the review, submit proper documentation to the Review Committee and may host the meeting, though not required to.
 - Facilitator Form needs to be submitted at least one week prior to the Peer Review so that WARM membership can be verified for all participants prior to the meeting. If additional participants are added after submission, 48hrs notice is requested.
 - Facilitator will present basic peer review guidelines at the start of Peer Review
 - Upon completion of the review, Peer Review Agreement forms will be submitted to Review Committee in a timely manner (1-2 weeks)
- Peer Review Guidelines
 - The information presented at Peer Review is confidential.



- The intention of peer review is not punitive or critical but supportive, educational, and community based. Positive feedback is encouraged, concerns should be raised respectfully and with the assumption that feedback is welcome. Peer Review is not a platform for judgment or satisfying personal agenda.
- Allow people present to introduce themselves and explain their credentials, if they are a practicing provider or student midwife/apprentice, etc.
- While a midwife presents a case, everyone remains quiet. Questions are asked after the midwife has finished.
- Recommendations for follow-up are made individually and/or by consensus, and the group offers support.
- Peer Review will be encouraged to be "Case Presentation" Style
 - Before presenting, the midwife should briefly describe their practice
 - When presenting a case, the following information should be available:
 - Gravity and parity of client along with any significant medical or OB history or psychosocial concerns; Relevant lab work and test results; Significant information regarding pregnancy, birth and postpartum; Consultations with other providers (midwives, MDs, DCs, NDs, DOs, etc.); and include the present care plan and how that may change with the ongoing situation
 - Midwives presenting will have at least one HIPAA compliant copy of charts presented with PHI removed to share with others for comments/feedback if desired or requested. The copied cases will be returned to the presenting midwife for shredding.
- In instances of extreme concern, a recommendation may be given to submit the case to a WARM Incident Review.
- Facilitator will check that the number of cases actually presented matches what the midwife put down on the Peer Review Agreement form.
- Once all paperwork is returned to the Review Committee, Certificates of Peer Review Participation will be sent to the midwives who attended. Documentation will be available within one week via electronic correspondence unless other method was requested.

Sources: North American Registry of Midwives (NARM)

<http://narm.org/accountability/community-peer-review-guidelines> (2019)