

Midwife's Name: _____
Texas License Number: _____
NARM CPM Number: _____

Basic Guidelines for Community Peer Review

Why We Conduct Peer Review

Peer Review is required by the Texas Rules:

“§831.51 Standards for the Practice of Midwifery in Texas

(h) Midwifery care includes documentation of a periodic process of evaluation and quality assurance of midwifery practice. The midwife shall:

- (1) collect client care data systematically and be involved in analysis of that data for the evaluation of the process and outcome of care;
- (2) review problems identified by the midwife or by other professionals or consumers in the community; and
- (3) act to resolve problems that are identified.”

NARM requires Peer Review to recertify and suggests the following guidelines:

“The midwife is required to present all cases involving consultation, transfer of care, transport to the hospital, instances where the midwife is outside of practice guidelines (including in these the process of Informed Choice used), and cases where the midwife wishes more input from the community of midwives. It is also helpful to the community if the midwife also discusses interesting cases or situations.”

Brief Review of Basic Guidelines (to be read aloud)

1. The information presented at Community Peer Review is confidential.
2. 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.
3. Once a midwife has begun presenting a case no one will be allowed to enter the room until that case is complete.
4. While a midwife presents a case, everyone remains quiet. Questions are asked after the midwife has finished.
5. Recommendations for follow-up are made individually and/or by consensus, and the group offers support.
6. In instances of extreme concern recommendations for follow-up are reached by consensus and each participating midwife must agree to such binding decisions in the future. No recommendations are made that the other midwives would not themselves carry out.
7. Continuing education should be developed out of issues and topics arising in Peer Review.