

## Department of Anesthesia

**Title:**

Peer Review Committees

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1

**Attachment:**

### **Anesthesia Department Practice Committees**

Anesthesia Department Practice Committees have been established for the purposes of:

1. Develop and monitor quality indicators relevant to departmental practice
2. Develop and implement clinical pathways where applicable
3. Review qualifications and competencies of healthcare providers applying for privileges so as to advise the Chair in MGUH's credentialing process
4. Assure compliance with regulatory requirements for practice
5. Implement and monitor Performance Improvement Plans, and
6. Receive and review complaints from other clinical departments regarding quality of care

Three department committees are established to fulfill the above stated purposes.

1. Committee for Staff Evaluation and Performance Improvement (Faculty Practice Committee) for the purposes of 1,2,3, and 6 stated above, and
2. QA/QI and JCAHO Committees for the purposes of 4 and 5 stated above.

Each Department practice Committee will regularly report their activities to a newly formed GUH-wide Practice Committee either through the minutes of the meeting or through formal reports of findings and recommendation by the committee.

### **FY 16 Faculty Practice Committee Members:**

Members:

- Sudha Ved, MD - Chair
- Kerry DeGroot, MD
- Matthew de Jesus, MD
- Lorenzo DeMarchi, MD
- Ellen Gibby, CRNA
- Annabelle Wylie
- Hannah Schobel, MD
- Kumu Hendrix, MD

QA/QI Committee:

- Matthew de Jesus, MD – Chair
- George Hwang, MD
- Sudha Ved, MD

Joint Commission Committee:

Members:

- Sudha Ved, MD – Chair
- Kerry DeGroot, MD
- Matthew de Jesus, MD

The Department Practice Committees will function as peer review committees and as such the process will be protected and confidential by the following steps outlined below

- The committees will be designated as “Peer Review Committees” and identified as such on all organizational charts, meeting minutes and other documents produced by the committee
- Education of members regarding peer review and maintaining confidentiality of meetings and documents/minutes produced by the committee
- Records/minutes of committees will be maintained and recorded for the purposes of reporting their activities to the Chair and to a newly formed GUH\_wide Practice Committee
- Reports/minutes generated by the committee will be marked “Privileged and Confidential – Subject to Peer Review and All Other Applicable Privileges – Do Not Distribute or Forward”
- Discussion of peer review matters will take place only in meetings of peer review committee itself and not in “hallways and locker rooms”. Statements made outside peer review may result in loss of privileges.
- Peer review documents will be collected from each members at the end of each meeting and stored in a secure, confidential filing location
- Record retention and disclosure to outside parties will be governed by law and in consultation with Hospital legal counsel and Risk Management department
- Peer review information via e-mail should not be used. However, e-mail communications regarding meeting notification and cancellation are acceptable. Detail meeting agenda items should not be detailed via e-mail.