

Peer Review in Endocrinology

Planning a networked PR Visit:
Timetables & Templates

#### **Before the Visit**

- Request is received from an Endocrine Centre to have a networked review.
- A Lead Clinician in the Endocrine Centre is identified and provides his/her contact telephone numbers & e-mail address. It is the Lead Endocrinologist's responsibility to identify any Trusts that they would like to network with or feel are not suitable or would lead to bias.
- The Terms of Reference document is filled in, signed and returned to the Peer Review Team of the SfE
- The Peer Review Team of the SfE will identify four Reviewers for the visit, two
  consultant endocrinologists and two specialist endocrine nurses. Once the Peer
  Reviewers are identified, they will select a Chair. Other members of the team can be
  arranged by mutual agreement eg patient representative, trainee.
- The SAQ on line questionnaire is sent to centres (and available in PDF on the website or via email). This can be filled in across time and saved in draft and more than one person can contribute.

### Visit -1 month

- A Self-Assessment Questionnaire that has been sent to the Lead Clinician in the centre is completed and *returned to the SfE one month in advance of the peer review visit.*
- If helpful, members of the peer review team can attend an MDT as part of the peer review visit if permission has been sought.
- The Lead Clinician would be encouraged to send supporting paperwork including any:
  - > Endocrine Unit handbook
  - Protocol sheets
  - > Surveys (eg clinic appointment waiting times, letter turnaround, Trust patient surveys)
  - > Recent Endocrine Audit/QI reports
  - Unit Research summary
  - ➤ Web site URLs if appropriate
  - Patient satisfaction survey

# Recommended Template for the Visit - On line

### 09.00-09.30 (or 13:00-13:30): Reviewer discussion (on line).

Reviewers confer in private to discuss points raised by the Self-Assessment Questionnaire and supporting information and to decide on any specific focus issues for the day.

# 09.30-10.30 (or 13:30 - 14:30): Leads and Peer reviewers meet (on line).

Meet with Lead Clinician, lead Endocrine Specialist Nurse & Endocrine Service Manager to gain a General Overview and to discuss the Self-Assessment Questionnaire.

Particular emphasis will be placed on the nature of links with the other hospitals in the region and referral pathways in and out (eg shared care of the more complex endocrine patients, regional planning meetings, endocrine biochemistry across the region etc). In addition, this will be an opportunity to concentrate on the areas the hosting hospital want to focus on.

10:30 – 12:30 (or 14:30 – 16:30): Wider team invited to discuss key areas and draw on key areas of focus. Key people who may be invited: relevant consultants, trainees and non-training posts, surgical colleagues, admin lead, allied specialties (eg paediatrics, oncology, biochemistry) if felt relevant. A suggested timetable can be provided prior to the visit to subdivide if needed (either at the suggestion of the review team or the centre). Break out room available if needing to go into more depth over an issue or part of the service.

**12:30 - 13:00 (or 16:30 – 17:00): Debrief peer review team.** Private debrief with the peer review team and assigning writing report.

#### **Post Visit**

- 1. Following the visit, a draft report will be sent to the centre within 1 month for review with SMART objectives.
- 2. Within 3 months a networked event of a few (2-4) similar sized peer reviewed centres will have an afternoon meeting to share practice and innovations, facilitated by the peer review team.
- Examples of clinical protocols, pathways for networks of care or examples of innovation from centres shared with SFE for uploading and sharing amongst the wider endocrine community.
- 4. Data accumulated anonymously centrally with the Society to build up profile of centres and allow regular publication of outcomes to encourage and promote other centres to take part. A map of centres who have taken part on the website.
- 5. Ongoing 'checking in' from peer review team and other linked centres remotely at 12 months post review.
- 6. Consultants and Endocrine Specialist Nurses involved in the centre review invited to join review teams for other centres.
- 7. Revisiting reviews every 5 10 years is considered good practice.