Peer Review of calls/consultations for Quality Assurance

http://www.rcgp.org.uk/clinical-and-research/clinical-resources/~/media/Files/CIRC/Audit/Urgent%20and%20Emergency%20Care%20Toolkit.ashx

The UK RCGP 'Urgent and Emergency Care Tool Kit' provider recommends

*…….the assessment of a minimum of 1% or 4 examples
of each individual's calls/consultations per quarter (for both
call handlers and clinicians) as a recurring routine audit
sample. A further 4 calls of individuals identified as having
'calls for concern', and 2% or 8 calls/consultations for
new staff members early in their employment; with more
extensive call reviews in response to adverse patient or
practice feedback or complaints;*

as the benchmark for any provider in the sector (as a minimum audit)

The call centre shift lead nurse should be undertaking peer review of :

- 1 example per week for both call handlers and clinicians
- 2 examples of new staff members for 3 months
- Where doubts are raised about an individual's performance (in a complaint, or in feedback from the patient's medical centre), then a prompt and more extensive audit may be necessary.

DAILY PROCESS

1200 hrs – Print off – 'Outcomes by clinician', 'length by clinician' 'Odyssey reception' outcomes – call handlers to highlight own contacts

Analyse data (equal spread of calls, range of outcomes, average call timings)

Run 1% audit of clinicians who require peer review
Randomly select call handler example

Using OmniPCXRecord tool within PAS, review chosen call with staff member

Ensure Odyssey screen is visible during peer review, by minimising PAS screen

Using 'audit tool for Clinicians/call handlers utilising Odyssey Tele Assess' review the call and provide feedback and encourage discussion