



CORRECTIONS MEDICINE
Peer Review
ACA Standard: 4 ALDF – 4D – 25

Effective: December 2015
Revised: April 2019, July 2019
Reviewed:

Policy Number:
CM – 06.1

- I. **PURPOSE:** To establish guidelines for a peer review audit.
- II. **POLICY:** An external peer review program for physicians, mental health professionals and dentists is implemented. Criteria are determined and chart reviews are done no less than annually.
- III. **RESONSIBILITY:** All Corrections Medicine staff and other medical providers are responsible for the content of this policy and procedure as well as adherence to the policy.
- IV. **PROCEDURE:**
 - 1. Patient charts shall be reviewed no less than annually using established criteria. Current criteria for medical review include the following: (Currently utilized peer review tool is included in Attachment 1.)
 - a. The reason for the visit (i.e. chief complaint) was recorded and reflected in the ICD-10 Codes in the assessment.
 - b. The past medical history pertinent to the reason for visit and assessment was recorded or updated.
 - c. The physical exam was consistent with the reason for the visit and assessment.
 - d. The assessment was consistent with symptoms, physical and current/past lab findings.
 - e. The plan, including treatment, labs, and testing was consistent with the assessment.
 - f. The provider counseled about lifestyle issues (i.e. substance abuse, obesity, exercise, diet)
 - g. The provider referred to clinical pharmacy, psychology, psychiatry, and/or dental for additional evaluation, treatment, and/or education, when indicated.
 - h. An outside facility specialty referral was accompanied by adequate clinical reasoning/need.
 - i. The patient was given a follow up appointment or recommendation for follow up, either in the Buzz Westfall Justice Center or at a community health center or practice.

2. After review of the charts has been completed, analysis of the compliance is done by the Lead Physician or the Saint Louis County Department of Public Health Chief Medical Officer, and if necessary corrective action is identified.

V. **REFERENCES:**

American Correctional Association; Performance-Based Standards for Adult Local Detention Facilities, fourth edition; 2004; Standard 4-ALDF-4D-25

National Commission on Correctional Health Care; Standards for Health Services in Jails; 2015

VI. **ATTACHMENT:**

Attachment 1: Peer Review Tool

ATTACHMENT 1. PEER REVIEW TOOL

Reviewer							% Compliance	Analysis
Provider								
Patient Visit Date								
Patient Initials								
Patient ID								
The reason for the visit (i.e. chief complaint) was recorded and reflected in the ICD-9 Codes in the assessment.								
The past medical history pertinent to the reason for visit and assessment was recorded or updated.								
The physical exam was consistent with the reason for visit and assessment.								

The assessment was consistent with symptoms, physical, and current / past lab findings.								
The plan, including treatment, labs, and testing, was consistent with the assessment								
The provider counseled about lifestyle issues (e.g. substandard abuse, obesity, exercise, and diet)								
The provider referred to clinical pharmacy, psychology, psychiatry, and / or dental for additional evaluation, treatment, and / or education, when indicated								

An outside facility specialty referral was accompanied by adequate clinical reasoning / need								
The patient was given a follow up appointment or recommendation for follow up, either in the Justice Center, or at a community health center or practice.								