

# Epilepsy Peer Review Meetings

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## Introduction

Peer review is defined as a continuous systematic and critical reflection by a number of care providers, on their own and colleagues' performance using structured procedures with the aim of achieving continuous improvement of the quality of care<sup>1</sup>. In paediatrics, peer review meetings are held regularly and are a requirement by many trusts in areas such as safeguarding. Peer review helps share best practice and encourages reflective learning.

## Background

In South Derbyshire, 2/3 of paediatric epilepsy patients are seen in Epilepsy clinics by paediatricians with expertise in epilepsy. The Epilepsy 12 Audit<sup>2</sup> in 2012 highlighted that 77% of those newly diagnosed with epilepsy received input from a paediatrician with expertise in epilepsy, and 69% had input from the epilepsy nurse specialist. In 2013, epilepsy peer review meetings were started to help ensure more epilepsy patients receive input from paediatricians with expertise in epilepsy and from the epilepsy nurse specialist, and to help provide support to paediatricians in the management of epilepsy.

## Epilepsy Peer Review Meetings

The epilepsy peer review meetings are held once monthly for one hour over lunch. The meetings are well-attended by general paediatricians, community paediatricians, paediatricians with expertise in epilepsy, paediatric registrars, epilepsy nurses and the EEG lead technician.

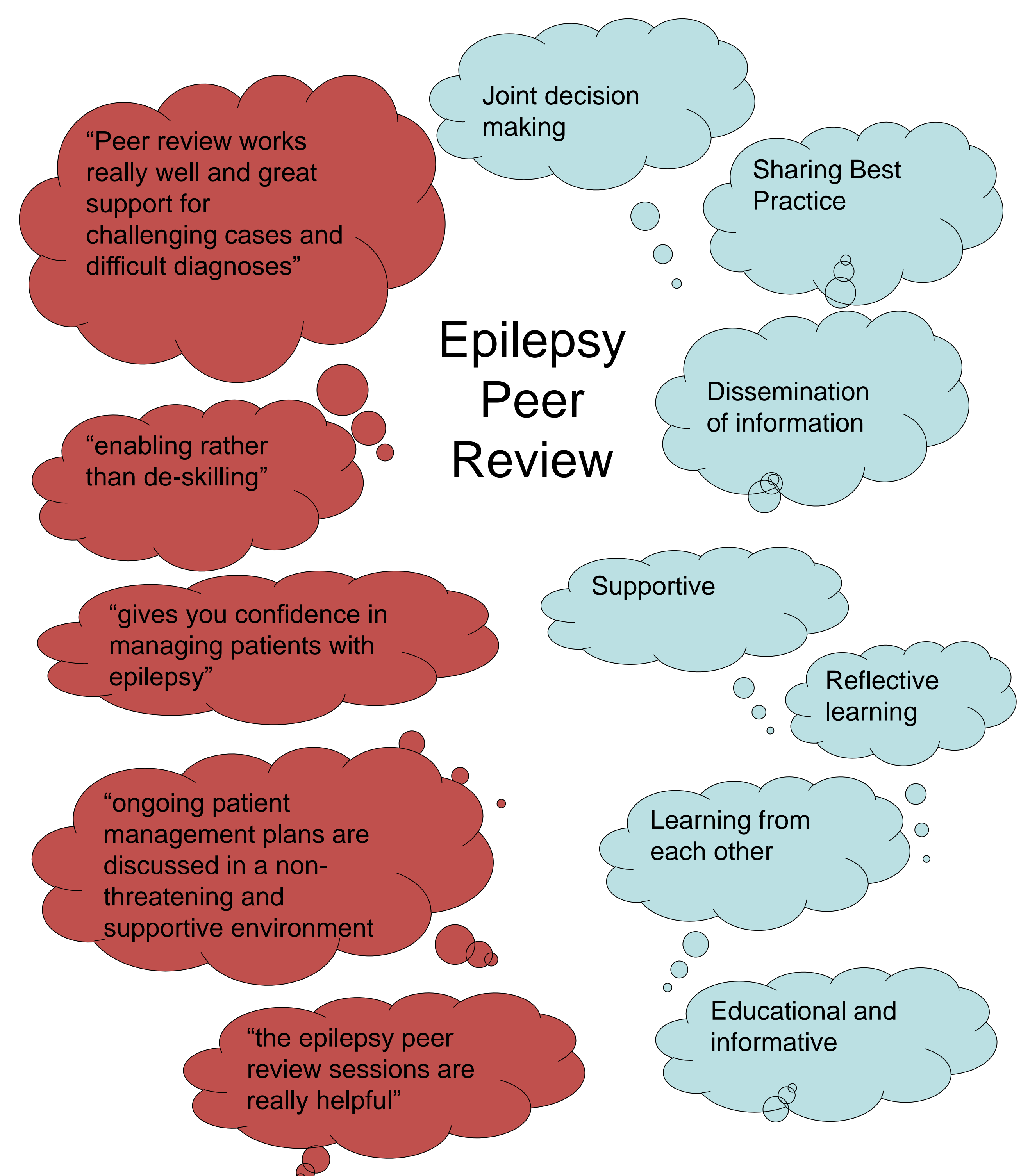
All paediatricians, including paediatric registrars, are encouraged to attend the peer review meetings and discuss their epilepsy patients. It is expected, where possible, that all those who have a new diagnosis of epilepsy are discussed at these meetings. We also encourage clinicians to discuss patients with an existing diagnosis of epilepsy who are followed up in general paediatric and community clinics, not known to the epilepsy team.

Our aim is to support the paediatricians in their management of their epilepsy patients, advising on investigations, treatments and where appropriate referral to other services. In these meetings, the clinical history is reviewed with all relevant information, investigations and treatments. The EEG Lead reviews the EEGs and shows video footage of the paroxysmal episodes, if these were captured during the EEG recording. This is proven to be very educational.

Through these meetings, it has been possible to identify patients with diagnostic uncertainty, those with drug resistant epilepsy, patients who would benefit from an emergency rescue plan and those who would be candidates for referral to other services eg Tertiary Neurology, Children Epilepsy Surgical Service (CESS), CAMHS or clinical psychology. In the meetings, clinicians are encouraged and supported in classifying the epilepsy. The meetings have helped promote closer working between health care professionals, community and hospital paediatricians, nurses and EEG technicians.

Towards the end of the meeting, a brief 10 minute teaching session on a topic of interest in epilepsy is given, provided time permits. The powerpoint slides are later shared with the rest of the team by email to ensure dissemination of information and learning to those who were unable to attend.

Following the introduction of epilepsy peer review meetings, the number of patients with a new diagnosis of epilepsy that had input from a paediatrician with expertise in epilepsy has increased to 89% and those receiving input from the epilepsy nurse specialist has risen to 86% (Epilepsy 12 Audit, Round 2).



## Conclusion

The epilepsy peer review meetings are supportive, they help facilitate sharing of ideas, learning from others, disseminating of information amongst clinicians on epilepsy and help ensure a high quality service is provided for all epilepsy patients.

### References

1. Grol R. Quality Improvement by peer review in primary care: A Practical guide. *Quality in health Care* 1994;3:147-152
2. National Epilepsy 12 Audit (Round1 and 2)- 2012, 2014- Derby data