

March 2022

Academy of
Medical Royal
Colleges



A framework of operating principles for managing invited reviews within healthcare



Royal College
of Midwives

Revised February 2022

Next review due by January 2025

Background

On 3 March 2015, Dr Bill Kirkup CBE published *'an independent investigation into the management, delivery and outcomes of care provided by the maternity and neonatal services at the University Hospitals of Morecambe Bay NHS Foundation Trust from January 2004 to June 2013.'*

Recommendation 41 of Dr Kirkup's [Report of the Morecambe Bay investigation](#) stated:

'We were concerned by the ad hoc nature and variable quality of the numerous external reviews of services that were carried out at the University Hospitals of Morecambe Bay NHS Foundation Trust. We recommend that systematic guidance be drawn up setting out an appropriate framework for external reviews and professional responsibilities in undertaking them.'

It was suggested that the Academy of Medical Royal Colleges (the Academy), the Royal College of Nursing (RCN), and the Royal College of Midwives (RCM) should take forward this recommendation.

This document replaces the earlier version published in 2016. It provides a framework of operating principles for royal colleges and other professional bodies (reviewing organisations) when undertaking invited reviews on behalf of healthcare organisations across the UK. Its 19 principles are arranged in four sections:

- The purpose of invited reviews
- Commissioning of invited reviews
- The format and management of invited reviews
- The next steps following invited reviews

The Academy would like to thank all organisations involved in the production of this framework (see the Appendix).

Contents

07 **Introduction**

08 **The purpose of invited reviews**

09 **Principle 1**

The primary purpose of any invited review is to provide expert opinion and external assurance around quality of care that may lead to improvements to patient safety and service provision. Invited reviews are designed to facilitate reflection and learning.

10 **Principle 2**

Invited reviews use an independent, objective and expert review process to assure patient safety and improve patient care and/or services. They are an advisory service undertaken on a voluntary basis.

11 **Principle 3**

Invited reviews are carried out in partnership with patients and the public.

12 **Commissioning of invited reviews**

13 **Principle 4**

Invited reviews only take place when formally commissioned by a healthcare organisation(s) that has agreed to:

- be responsible for the review
- the reviewing organisation's published terms and conditions for undertaking invited reviews, and
- formally indemnify the reviewing organisation for their work undertaking the review.

14 **Principle 5**

Healthcare organisations commissioning invited reviews should be open and transparent about the circumstances of the review.

15 **The format and management of invited reviews**

16 **Principle 6**

Governance of invited review services is a matter for the individual reviewing organisation undertaking them.

17 **Principle 7**

Invited reviews will have clear terms of reference. Reviews will follow a structured, clear and consistent process that is set out in a published document.

18 **Principle 8**

Invited reviews offer expert advice from clinicians with relevant expertise in the areas being reviewed, while being independent of the service being reviewed.

19 **Principle 9**

Invited reviews are carried out on a confidential basis to support those involved in providing patient care to speak up where they consider that improvements to patient care could be made.

20 **Principle 10**

Invited reviews seek to understand the practice of individual clinicians within the wider organisational context of their practice and to offer solutions that take account of these.

21 **Principle 11**

Reviewers have clear role descriptions and are fully briefed on what is expected as part of the review.

22 **Principle 12**

An invited review report will follow a clear structure including reasons for the review, terms of reference, information gathered by the reviewers, conclusions and recommendations including a timeline for actions. A declaration that all reviews will be conducted in accordance with the principles set out in this framework is included in the Appendix.

24 Next steps following invited reviews

25 Principle 13

The healthcare organisation is responsible for immediately addressing any urgent patient safety risks identified by the review team, including contacting regulator(s) as appropriate/if required. If this does not occur, the review team has the responsibility and duty to refer these concerns to the appropriate regulator(s) as soon as possible to support resolution of the problems identified.

27 Principle 14

Healthcare organisations commissioning invited reviews will be responsible for addressing patient safety risks and being open and transparent about them [see principle 5]. Where clear patient safety risks are found, immediate action needs to be taken by the healthcare organisation.

28 Principle 15

Reviewing organisations will work closely with regulators and other external bodies involved in assuring the quality and safety of patient care.

29 Principle 16

The reviewing organisation will seek a timely update on the actions taken by the healthcare organisation to address recommendations made in an invited review report. Further advice and support will be provided where required.

30 Principle 17

Processes will be in place to ensure that feedback is received by those carrying out the invited reviews.

31 Principle 18

The reviewing organisation will have a clear, formal method of handling concerns arising from reviews in order to inform service development and improvement.

32 Principle 19

There will be a clear process for reviewing organisations to collate feedback and learning arising from their reviews and to enable sharing of themes and learning.

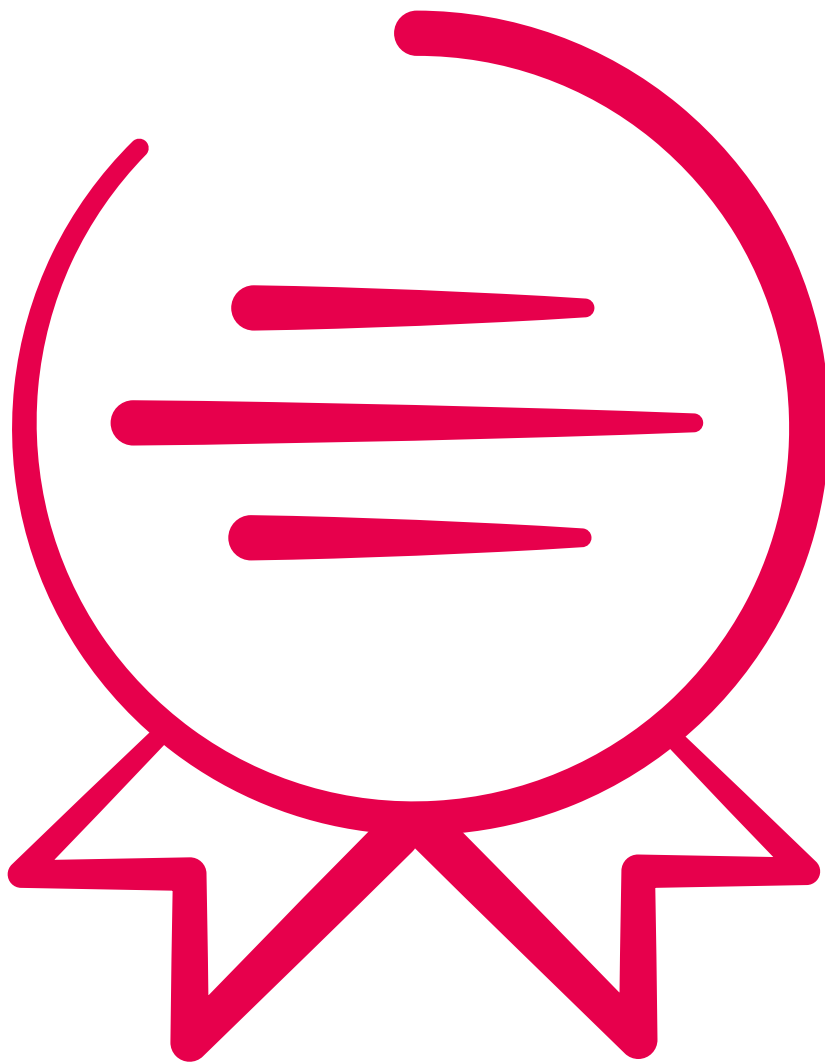
33 Appendix Organisations involved in producing the framework

Introduction

Healthcare organisations recognise the value of expert, independent advice to help them improve the safety, effectiveness, and patient experience of clinical services. For some years, royal colleges and professional bodies have offered such services in the form of invited reviews. A form of peer review, these are a valuable resource and provide in-depth assessments of services, identifying issues of concern or areas for improvement. Invited reviews are not a replacement for existing local and national systems for managing commissioning and performance oversight.

The specific type and nature of the invited review services offered varies depending on the royal college or professional organisation involved, their experience of offering invited reviews, and the resources and capacity they have available to undertake the work. Each reviewing organisation acts as an independent organisation, individually contracted by the healthcare organisation that commissions the review, with each sharing the same core purpose.

The purpose of invited reviews



Principle 1

The primary purpose of an invited review is to provide expert opinion and external assurance around quality of care that may lead to improvements to patient safety and service provision. Invited reviews are designed to facilitate reflection and learning.

Invited reviews provide NHS and other healthcare organisations with vital information, clinical expertise, and external assurance, which supports the organisation, its board and staff in driving up the quality of care and its ability to recognise and address issues and concerns.

Invited reviews can include service reviews, individual reviews and clinical record reviews. The nature and scope of services will vary according to what the reviewing organisation can offer.

A unique benefit of invited reviews is that it is a peer-led process that relies on input from professionally registered clinicians to embed and maintain standards of patient care.

Why is this important?

Invited review work often involves complex and sensitive circumstances, requiring difficult judgements to be made about the standard of patient care that has been, or is being, provided.

Principle 2

Invited reviews use an independent, objective and expert review process to assure patient safety and improve patient care and/or services. They are an advisory service undertaken on a voluntary basis.

Invited reviews have no formal statutory or regulatory role, status or function, and the reviewing organisation has no formal power to compel the healthcare organisation to act on their advice. However, the reviewing organisation has a responsibility to ensure that the healthcare organisation addresses their recommendations, and, in certain circumstances, has the right and responsibility to inform regulators of patient safety risks that have been identified [see principle 15].

Participation in invited reviews by the healthcare organisation staff is voluntary. Therefore, while it is hoped that all staff would be happy to participate in the process, it is not a requirement. Should one or more individuals be unwilling to participate in an invited service review (or individual review), it would be for the healthcare organisation to agree with the reviewing organisation whether the planned review should go ahead.¹ If not, it would be for the healthcare organisation to resolve the situation and ensure that any patient safety risks were addressed, taking advice from regulatory bodies as required.

Why is this important?

Reviewing organisations believe that the best improvements to patient care are achieved when clinicians and patients work together to lead change. Participating in a review of this nature voluntarily provides a proactive and practical way for clinicians to achieve this aim.

1. An invited individual review (rather than a service or clinical record review) can only go ahead if the clinician being reviewed has agreed to participate in the process.

Principle 3

Invited reviews are carried out in partnership with patients and the public.

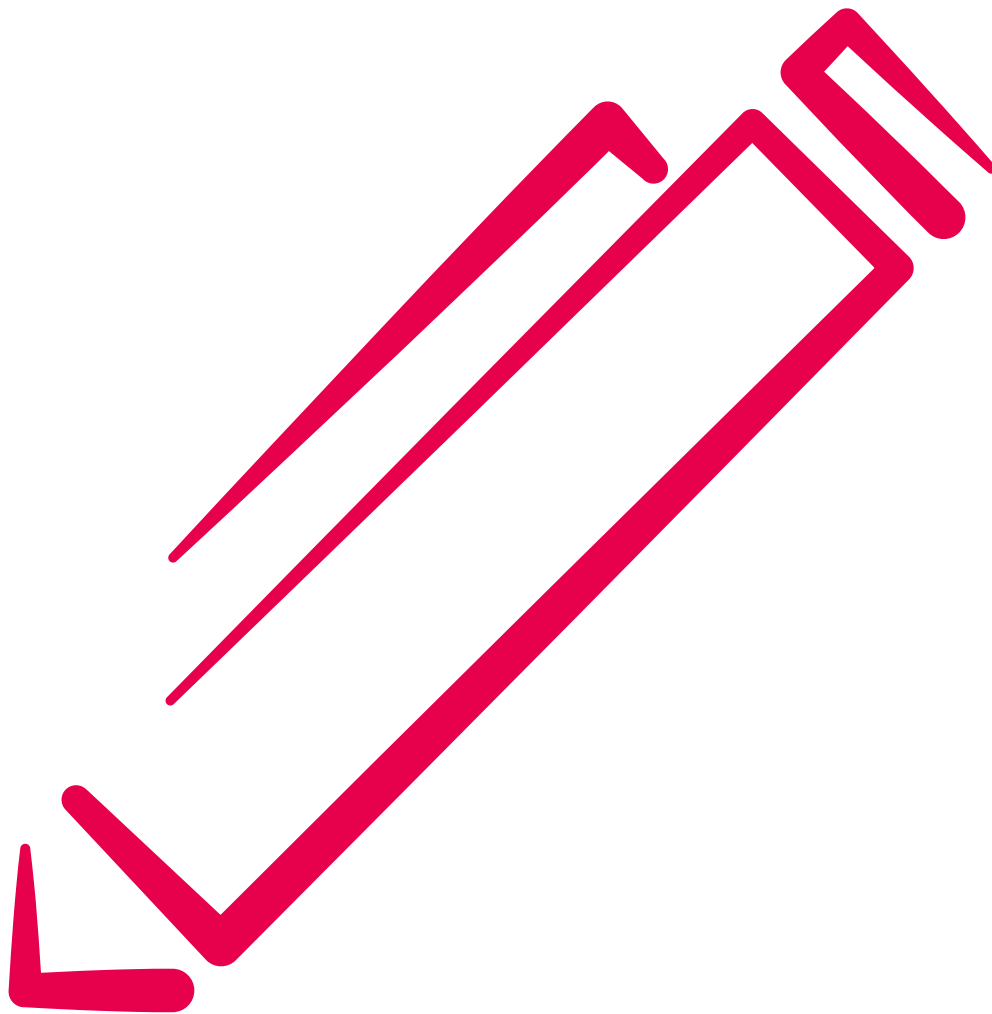
Ways of involving patients and the public will vary according to the organisation undertaking the invited review and the diverse nature of circumstances that could be reviewed. This may include:

- Being part of an invited review team representing the patient and public interest or providing the perspective of a service user
- Being interviewed as a representative of a patient group within an invited review visit programme
- Providing formal patient feedback about a service to the review team as a standard part of any invited review
- Quality assuring invited review reports on an oversight/quality assurance committee.

Why is this important?

An invited review should present a balanced view, in which patients and the public are represented, helping it to achieve its core purpose of protecting patient safety and improving patient care.

Commissioning of invited reviews



Principle 4

Invited reviews only take place when formally commissioned by a healthcare organisation(s) that has agreed to:

- be responsible for the review
- the reviewing organisation's published terms and conditions for undertaking invited reviews, and
- formally indemnify the reviewing organisation for their work undertaking the review.

Requests for invited reviews will normally only be accepted from the Chief Executive, Medical or Nursing Director responsible for the healthcare organisation in which the review will take place. Reviewing organisations may also accept requests for invited reviews from the commissioners of the healthcare service under review. It is the healthcare organisation's responsibility to take any recommended action to address patient safety risks identified by the invited review team. However, the review team reserve the right to refer to the relevant regulator, any patient safety issue identified during the review.

Principles 14 and 15 set out the information that should be provided to relevant regulatory bodies.

Why is this important?

All invited reviews must be carried out under the delegated authority of the healthcare organisation's Board of Directors and Responsible Officer(s), with clear lines of responsibility in relation to the circumstances reviewed, and organisational ownership of, and accountability for, the situation under review. An invited review supports, but does not replace, existing local and national systems for managing performance within healthcare organisations.

Indemnity against those involved for any claim made or action taken due to the invited review ensures that all parties can focus on the primary purpose of the invited review – protecting patient safety and improving patient care.

Principle 5

Healthcare organisations commissioning invited reviews should be open and transparent about the circumstances of the review.

Where patient safety risks or other issues relating to the quality of patient care have been identified, the healthcare organisation should take steps to make a clear summary publicly available [see principle 15].

The summary should include clear information on:

- The reason[s] for the invited review
- Its terms of reference, conclusions and recommendations, and
- The actions taken by the healthcare organisation to address the issues identified by the review and the recommendations made.

Information made available by the healthcare organisation regarding a review will vary depending upon the specific circumstances of the review. Any public information will need to take account of legal responsibilities towards the confidentiality of patients and staff and consider all relevant legal advice and statutory duties. Particular notice should be taken of the [Duty of Candour legislation](#) [updated October 2020].

Healthcare organisations should also work closely with the appropriate regulators, sharing information about invited reviews where necessary, to ensure that patient safety can be maintained. Where patient safety risks or other issues related to the quality of patient care have been identified, the healthcare organisation should be open and transparent with the relevant regulators and proactively share information about the review's findings, including sharing the report and any other relevant information.

Why is this important?

For an invited review to be successful, healthcare organisations should be open and transparent with patients and the public about the circumstances of the invited review. Support from the reviewing organisation can help the healthcare organisation to achieve this.

The format and management of invited reviews



Principle 6

Governance of invited review services is a matter for the individual reviewing organisation that undertakes them.

If the review requested involves more than one reviewing organisation or specialty, the governance arrangements should be confirmed before the review starts.

The Academy of Medical Royal Colleges is not involved in the governance of invited review services.

Why is this important?

Invited reviews are an independent and expert advisory service outside the formal regulatory system. Used well, they provide the potential for healthcare services to access timely expert review before patient safety issues arise.

Principle 7

Invited reviews will have clear terms of reference. Reviews will follow a structured, clear and consistent process that is set out in a published document.

Terms of reference will be formally agreed between the healthcare and reviewing organisations and shared with all participants. If a review is requested that covers more than one specialty and involves more than one college, one of the colleges will take a clear lead role. This may be reflected in the terms of reference and format for the review.

Should an issue arise involving patient safety and/or the health, wellbeing, conduct or probity of staff involved in the review, the reviewing team will not be limited by the terms of reference. In such cases, this will immediately (or as soon as an issue emerges at a later point in the process) be brought to the attention of the Medical Director or Chief Executive of the healthcare organisation. Recommendations will be made for further investigation and action.

Service reviews usually involve two components:

- A review carried out against clear specifications which will be based on the review team's understanding of the service. This information is provided either by the healthcare organisation or is based on other available performance data.
- Interviews with key personnel working within the service.

If a clinical record review forms part of the invited review this will also follow a structured process including the chronology of the key events that have taken place as recorded in the clinical record, and the conclusions of the clinical reviewer on the standard of care provided.

If an individual review is being undertaken, the individual concerned will be asked to agree to participate once the healthcare organisation has provided them with full details of the purpose, terms of reference and arrangements for the review. This will include all documentation being reviewed and an opportunity to participate in an interview with the review team.

Why is this important?

Clear and agreed terms of reference and review format are required to ensure that the invited review has the correct focus and enables clear conclusions with realistic and achievable recommendations.

Principle 8

Invited reviews offer expert advice from clinicians with relevant expertise in the areas being reviewed, while being independent of the service being reviewed.

The clinical reviewers on the review team will be experienced clinicians with expertise relevant to the situation under review. They will be sufficiently prepared to undertake their role [see principle 11]. Reviewing organisations will collaborate where appropriate to ensure that all relevant specialty areas are represented. The membership and current employment of the review team will be given to the healthcare organisation so that it can be assured that the proposed review team is suitable to undertake the invited review. Reviewers will be asked to identify real or potential conflicts of interest that could call into question the independence of the review. In areas of clinical practice where there are only a small number of experts, individuals will likely have an awareness of one another. Again in this situation, any real or potential conflicts of interest will be openly identified and disclosed to the healthcare organisation.

If concerns are raised about an individual reviewer(s), the organisation undertaking the review will provide the reasons for the choices made, explain further how any conflicts of interest will be managed, and the safeguards that are in place to ensure that the invited review will be independent and objective. The final decision as to whether and how to proceed with the review will be made by the Medical Director or Chief Executive of the healthcare organisation. If this leads to a delay in timescales agreed, the healthcare organisation will be responsible for addressing any immediate patient safety risks relating to the situation being reviewed.

Why is this important?

To maintain confidence in the review process, reviewers must be seen as expert, independent, and objective.

Principle 9

Invited reviews are carried out on a confidential basis to support those involved in providing patient care to speak up where they consider that improvements to patient care could be made.

Invited reviews aim to provide a safe space for those involved in delivering care where active listening takes place and speaking up is supported.

As far as possible, the invited review report will be written in such a way as to avoid identifying individuals. Instead, themes raised from the invited review against the agreed terms of reference will be highlighted.

However, there are limits to the confidentiality afforded, for example where an interviewee brings immediate and unresolved patient safety risks to the attention of the review team, or where there are concerns raised about the safety of individual staff. Such instances will be highlighted to the Medical Director or Chief Executive of the healthcare organisation for action. While efforts will be made for this to be anonymised wherever possible there may be exceptional cases where this may not be practical, depending on the circumstances involved and the review team members' responsibility to their professional codes of practice.

To maintain confidentiality, the reviewing organisations will not disclose details of the reviews they undertake to third parties, except in the circumstances outlined in principles 13, 14 and 15.

Why is this important?

It can often be very challenging and demanding for those working in healthcare to raise concerns about patient care. This approach supports those involved in providing patient care to speak openly about problems and enables concerns to be raised and addressed in a safe space.

Principle 10

Invited reviews seek to understand the practice of individual clinicians within the wider organisational context of their practice and offer solutions that take account of these.

Those undertaking invited reviews understand that the delivery of healthcare can be complex, and problems can occur for many reasons and in many ways. Sometimes problems relate to an individual's practice and/or clinical skills, but most will require an understanding of both individuals and the organisational systems in which they work. The review team need to offer solutions that take account of healthcare systems and represent patient/public interest.

Both the reviewing organisation and the healthcare organisation must be sensitive to the potential impact of an invited review on individuals within the healthcare organisation. Healthcare organisations should ensure that individuals have access to appropriate support and advice to protect their wellbeing and respond effectively to an invited review.

Why is this important?

Individuals and systems must be considered together so that the actions of individual clinicians are understood within the context in which they work.

Principle 11

Reviewers have clear role descriptions and are fully briefed on what is expected of them as part of the review.

Reviewing organisations will ensure that reviewers are sufficiently prepared and qualified to undertake their roles.

This will include:

- Expertise relevant to the circumstances under review
- Specific orientation or training to understand their role and responsibilities
- Clear role descriptions
- Detailed briefing in advance of the review on the work to be undertaken
- Access to the resources needed to prepare for their role while understanding the need to work within the limits of their competence in the role
- Guidance on conducting a review process that is sensitive to the environment and people involved in the review
- Access to advice and support before and during the review process
- Confirmation that, where registered, they are in good standing with their registering and/or regulatory body, and their employer
- Identification and declaration of any conflicts of interest, real or perceived, that might impact their role as a reviewer.

Why is this important?

Following these principles will ensure the integrity of an invited review process and that reviewers have appropriate expertise to undertake the role, are clear on what they are being asked to do and are appropriately prepared to undertake the work.

Principle 12

An invited review report will follow a clear structure including reasons for the review, terms of reference, information gathered by the reviewers, conclusions and recommendations including a timeline for actions. A declaration that all reviews will be conducted in accordance with the principles set out in this framework is included in the Appendix.

An invited review report will clearly detail the sources of information that have been used to support the conclusions reached and the recommendations made.

Where the review team are making judgements about standards of clinical care or behaviour, these will, where possible, be linked to published standards documents within the specialty concerned. Where these do not exist, or the issues being considered are more general, documents such as the General Medical Council (GMC)'s [Good Medical Practice](#) and [Generic Professional Capabilities](#) may be referenced. Reviewers may also apply the test of what they consider would be the view of a reasonable body of clinical professionals in a similar situation.

Where possible, the review team will seek to corroborate the information that they have gathered and not rely on a single source, unless the issue raised is of such significance that it needs to be highlighted to the healthcare organisation for further investigation.

If the report presents information provided by an interviewee without corroboration, it will usually be described as having been reported to the review team. It will be left for the healthcare organisation to determine whether or not the statement can be formally substantiated.

If the healthcare organisation disputes the factual accuracy of the report, it will be for the healthcare organisation, not the reviewing organisation, to resolve any discrepancies. This would be best managed by the reviewing organisation sending draft reports for review of factual accuracy and amendment if necessary before the final report is submitted.

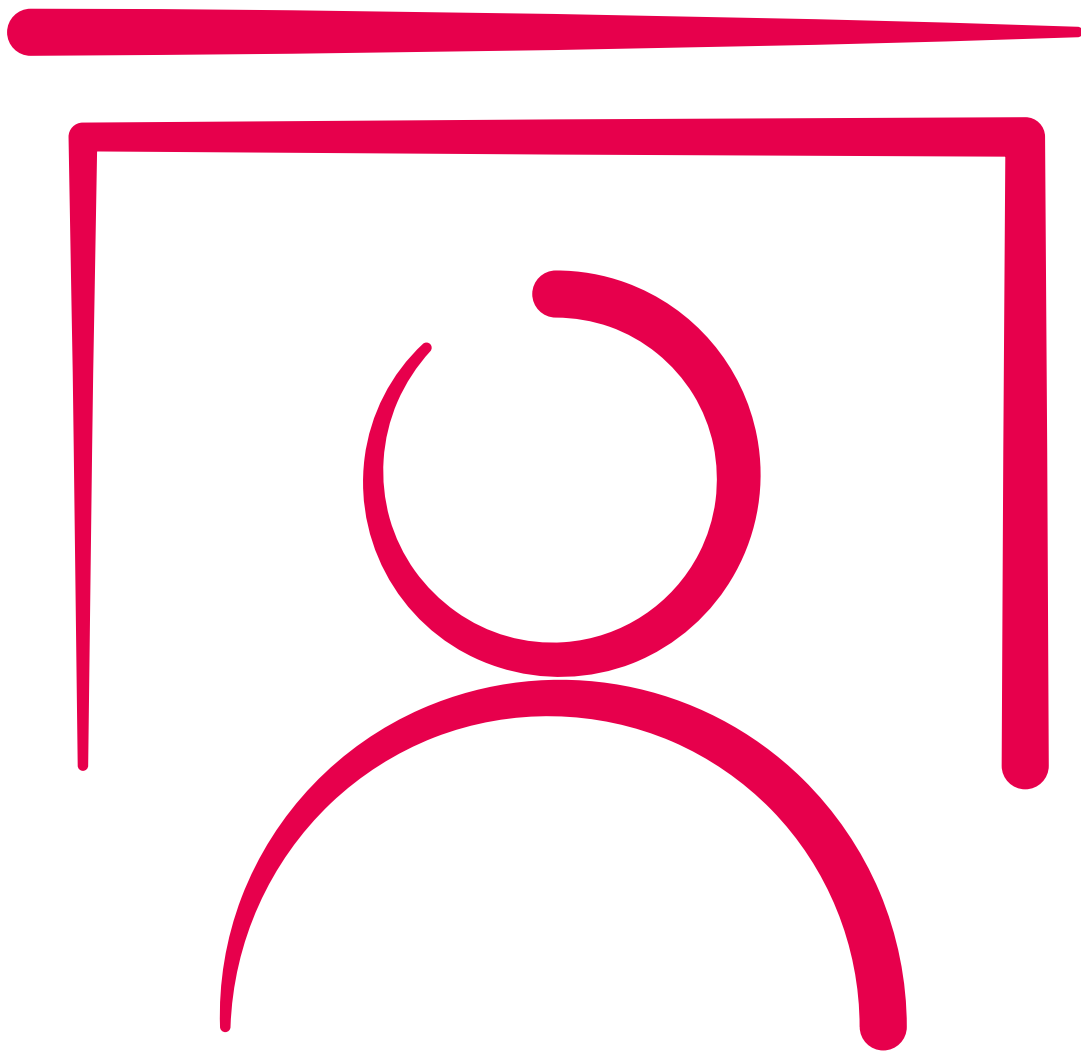
Draft reports will be quality assured internally by the reviewing organisation before issue. This may include independent reviews by lay, specialist society, senior college representatives, and legal experts as necessary.

The Appendix of this document includes a declaration that all reviews will be conducted by the principles set out in this framework.

Why is this important?

Conclusions of reviews must be based on comprehensive and detailed information sources that can be corroborated and based on information sought from the review (or, where necessary, further investigated by the healthcare organisation commissioning the invited review). This results in reports that are expert and comprehensive in addressing the terms of reference set. It also makes sure that all parties are fully aware of the requirements and that safeguards are in place to ensure that everyone is treated fairly.

Next steps following invited reviews



Principle 13

The healthcare organisation is responsible for immediately addressing any urgent patient safety risks identified by the review team, including contacting regulator(s) as appropriate/if required. If this does not occur, the review team has the responsibility and duty to refer these concerns to the appropriate regulator(s) as soon as possible to support resolution of the problems identified.

The review team's primary responsibility will be ensuring patient safety and meeting the duties set by their professional regulator. If the review team identifies circumstances where patient safety may be at risk, appropriate recommendations will be made in their report for consideration and action by the healthcare organisation. Before the conclusion of a service or individual review, or the review team leaving the healthcare organisation (as appropriate), the reviewing organisation will provide verbal feedback on the conclusions reached. This will be followed by a formal letter.

Where any urgent issues are highlighted, the review team's concerns will be escalated to the Medical Director of the healthcare organisation (or another responsible officer) immediately, asking for an explanation and (if needed) any proposed action required. Responses to other actions will be dependent on the level of seriousness of the issue(s) identified. Healthcare organisations will be asked to confirm to the review team what actions have been taken within defined timescales. This will be followed up by the reviewing organisation.

Where required, it is the responsibility of the responsible officer(s) within the healthcare organisation to share serious issues regarding patient safety with the relevant regulator. This should happen within a defined timescale and the responsible officer(s) should confirm with the reviewing organisation when they have done this. If the reviewing organisation is concerned that the healthcare organisation has not taken action to address serious issues regarding patient safety or shared the information with the relevant regulator, the reviewing organisation will refer their concerns to the relevant regulator directly (and inform the Medical Director that this is being done).

Why is this important?

The healthcare organisation is responsible for managing an appropriate response to any potential concerns that exist about patient care. This remains the case before, during and after the review. One of the reasons for this is that the healthcare organisation has all the information available about the care that is being provided and the circumstances being addressed – invited reviews are often only one part of a wider patient safety picture. Any identification of immediate and unresolved risks must be addressed as a matter of urgency to maintain patient safety.

Principle 14

Healthcare organisations will be responsible for addressing patient safety risks and being open and transparent about them (see principle 5). Where clear patient safety risks are found, immediate action will need to be taken by the healthcare organisation.

If the reviewing organisation identifies clear patient safety risks, then urgent action needs to be taken by the healthcare organisation (Principle 13). This may include requiring the risk to be brought to the attention of the organisation's leadership and, if appropriate, to the attention of registering or inspecting bodies such as the GMC, Care Quality Commission /Care Inspectorate/Regulation and Quality Improvement Authority.

It is the responsibility of the healthcare organisation to:

- Address the content of any advice or written report provided by the reviewing organisation and take any actions considered appropriate to protect patient safety
- Ensure that the invited review report is shared with all appropriate members of staff, including all those who participated in the review
- Take immediate action if any patient safety risks have been identified.

The invited review report will include clear recommendations to address patient safety risks within clear timescales. It will also advise on those individuals or organisations with whom the reviewing organisation believe the report should be shared in order to maintain patient safety.

This may include, but not be limited to, the Care Quality Commission/Care Inspectorate/Regulation and Quality Improvement Authority, the healthcare organisation's board or Chair, and the families involved.

The report will also include actions the reviewing organisation will take in the event of failure by the healthcare organisation to address the recommendations as agreed.

A healthcare organisation's action plan will be followed up by the reviewing organisation to ensure progress against the recommendations made.

Why is this important?

Where patient safety risks are highlighted, the healthcare organisation should be open and transparent in showing how they addressed them.

Principle 15

Reviewing organisations will work closely with regulators and other external bodies involved in assuring the quality and safety of patient care.

The primary responsibility for sharing information about an invited review lies with the healthcare organisation. This includes sharing proactively the summary and findings of the invited review with regulators such as the Care Quality Commission/Care Inspectorate/Regulation and Quality Improvement Authority and NHS England/Improvement. Reviewing organisations will work with the healthcare organisation to make sure this is done to ensure that prompt action is taken where a quality and/or patient safety concern is identified.

The same regulators will be informed by the reviewing organisation that a review has taken place allowing this to be taken into consideration as part of regulatory work.

The time intervals against which this will be done will vary depending on the nature and volume of the work undertaken by the reviewing organisation, but normally this will occur around twice a year/every six months.

Why is this important?

Working closely with regulators is essential to ensure quality of care and patient safety is maintained.

Principle 16

The reviewing organisation will seek a timely update on the actions taken by the healthcare organisation to address recommendations made in an invited review report. Further advice and support will be provided where required.

The reviewing organisation will request an update from the healthcare organisation on the actions being taken to address the recommendations made within the invited review report. The timescales and expectations for follow-up reporting should be clearly outlined in the reviewing organisation's handbook for the review process. This follow-up aims to establish that the report's recommendations have either been addressed or that an action plan has been put in place by the Medical Director and/or Nursing Director to ensure that they will be addressed. If the recommendations have not been addressed without a reasonable explanation, and the safety of patients is compromised, the reviewing organisation reserves the right to refer the matter and their concerns directly to a regulator, as above.

Why is this important?

This ensures that recommendations are acted on, and patient safety risks are addressed.

Principle 17

Processes will be in place to ensure that feedback is received by those carrying out the invited reviews.

Systems will be in place to ensure that feedback can be received from the healthcare organisation being reviewed and from individuals in the review team to inform service development and improvements [the specific processes followed will vary depending on the individual organisations involved].

Why is this important?

All feedback is invaluable to identify learning opportunities and areas for improvement in the way invited reviews are carried out to maintain standards and quality.

Principle 18

The reviewing organisation will have a clear formal method of handling concerns arising from invited reviews to inform service development and improvement.

The reviewing organisation will have a clear procedure to handle any concerns raised about the process or conduct of the invited review, which includes escalation to senior members of the healthcare organisation. The specific processes for an individual to provide comments/concerns will vary according to the reviewing organisation's structures. In the first instance, any concerns would be raised with the healthcare organisation.

The reviewing organisation will respond to any comments it receives about its services from those participating in, or affected by, an invited review. This may include the facility for someone who has not been directly involved in the process to respond to the comments. Reviewing organisations will seek to learn from any comments received.

Why is this important?

If an individual involved in an invited review wishes to comment on an invited review, it is important that they can do so and have their comments considered in order to ensure transparency and fairness of the process.

Principle 19

There will be a clear process for reviewing organisations to collate feedback and learning arising from their reviews and to enable sharing of themes and learning.

The reviewing organisation will collect, distil, and present information in a way that will inform improvements to clinical practice. Sharing major overarching themes between reviewing organisations will aid learning and may be of benefit to commissioning organisations in the future. It also provides reviewing organisations with the opportunity to review and learn from each other and/or discuss individually where they may wish to collaborate.

Why is this important?

Sharing themes that arise from invited reviews provides a significant resource for improving clinical practice and can help to inform policy and service standards in the future. By identifying and reporting themes, reviewing organisations make a significant contribution to assuring patient safety and improving patient care.

Appendix

Organisations involved in producing the framework

The below-named organisations contributed to the framework of operating principles. Each has confirmed that invited reviews will be delivered in line with the principles set out in this document and will indicate this on relevant invited review service web pages.

British Paediatric Neurology Association
Royal College of Anaesthetists
Royal College of Emergency Medicine
Royal College of Midwives
Royal College of Obstetricians and Gynaecologists
Royal College of Ophthalmologists
Royal College of Paediatrics and Child Health
Royal College of Pathologists
Royal College of Physicians
Royal College of Physicians of Edinburgh
Royal College of Psychiatrists
Royal College of Radiologists
Royal College of Surgeons of England

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