



Peer Review

THE CONCEPT:

Strength-based strategies for increasing staff engagement and ownership of best practice standards.

“How can you increase staff engagement and add clinical value to the Peer Review process?”

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Like any other organization, our agency had challenges to conducting successful and productive Peer Review processes:

- **It feels administrative.**
How can we make it more valuable to participants?
- **It is primarily driven by compliance needs.**
How can we emphasize more clinical significance, and integrate our agency’s commitment to wellness culture?
- **There doesn’t seem to be any accountability.**
How can we increase clinical engagement and staff ownership of the process?

In creating solutions to these issues, we turned to the strength-based models of our clinical work, and our agency’s wellness culture. We implemented a variety of new tools, yet they all mirrored our belief that “everyone wants to be great”, and leveraged the pride and teamwork of our clinical programs.

Additionally, we have started to integrate our multi-perspective outcomes reporting into the Peer review process. This has provided training and feedback opportunities to increase the value of recovery data collection as a clinical process (rather than an administrative process) for strategic treatment planning and enhanced assessment of consumer needs.

Results of the subsequent Peer Review sessions generated both quantitative data and qualitative data that suggested a positive influence from the tools:

- As an agency, there were increased scores across all four sub-categories of the review.
- In response to the focus of one team’s Action Plan, the signed Treatment Plans rose from 40% to 100%.
- Another team scored 100% compliance in 16 out of the 23 review items, and perfect scores in all service category items.

Quotes from Team Action Plans:

- “The team work between the Front Desk staff and the clinical staff was positive and productive.”
- Clinician expectations are more in line with consumer expectations.”
- “The treatment plans were more relevant, measurable, and specific with increased consumer participation.”

“Interestingly, the consumer feels their symptom management has gotten worse over the past year, yet the clinician indicates that the consumer is doing quite well in that category— it might be helpful to discuss this difference in perception. How does the consumer’s substance use impact either party’s perception of symptoms?”

“The consumer reports positive movement in growth and social activity from Apr to Oct— would they attribute that to their change in employment and education engagement, or something else? Regarding symptom management, consumer reports it was better in Oct than Apr, but the clinician indicated symptoms were worse in Nov—did that occur in the couple of weeks difference between data collection dates, or was it due to a difference in perception between the consumer and clinician?”

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