

SECTION	PEER REVIEW		
POLICY NAME	Referrals to the Registrar from Peer Review		
APPLICABLE LEGISLATION	<i>Medical Act of Nova Scotia – Section 64</i>		
Approved by : Peer Review Committee Assessment Committee Council	Approval Date September 18, 2020 N/A October 9, 2020	Reviewer Director, Physician Performance	Review Date June 2022

Preamble

As per Section 64 (3) of the *Medical Act* of Nova Scotia, every member selected to participate in the practice assessment program has a duty to fully comply with all requirements of this program. Section 64 states “where a member has not complied with the requirements of the practice assessment program (a) the Registrar may lay a complaint against that member; and (b) the member’s licence is not eligible for renewal until such time as these requirements have been met.”

This policy outlines the conditions under which the Peer Review Program will refer a physician to the Registrar of the College, as follows:

1. Compliance

The peer review process is one of quality improvement, designed to assist physicians in improving their medical practices. It operates with the understanding that learning occurs best in an atmosphere of trust and collegiality. As such, the program expects that the majority of cases of non-compliance will be dealt with in a collegial fashion between program representatives at the College and the physician in question, as follows:

- a. An eligible physician is obligated to cooperate with the program and complete the review process, subject to a limited set of exemption and deferral criteria. The protocol for this process will be managed by peer review staff with status reports presented to the Peer Review Committee (PRC).

Infrequently, the PRC will be called upon to ensure compliance in the following circumstances:

- b. Continued non-compliance which peer review staff cannot resolve with a physician;
- c. In rare cases, ensuring compliance with necessary practice improvements and/or participating in re-assessment(s) that have been directed by the Committee; and,
- d. In the case of repeat re-assessments and/or remedial activities directed by the PRC, a physician’s refusal to pay for these activities, as required by the program.

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The PRC has the authority to consider a verbal or written submission from any physician who has failed to complete peer review. The Committee has the option of accepting this submission and granting a deferral or exemption or terminating the review and referring the matter to the Registrar.

2. Patient Safety Concerns

Concerns about a physician's health, knowledge, skills, attitudes or professional business practice may arise from the peer review process. Acknowledged deficiencies for which a physician undertakes appropriate corrections will not ordinarily warrant referral to the Registrar. These matters will be dealt with through dialogue and advice to the physician and/or reassessment. Occasionally evidence of practice changes may be required in order to resolve more serious concerns.

Given the emphasis on dialogue and quality improvement within the peer review process, it is expected that referrals to the Registrar in these situations will be rare.

A physician will be referred to the Registrar when there is a patient safety concern that cannot be reasonably mitigated given the resources and authority of the Peer Review Committee.

3. Incompetence, Incapacity and Conduct Unbecoming

Notwithstanding the above, if at any time during the course of a peer review, the Committee has a reasonable and substantial concern that the physician is incompetent, guilty of professional misconduct or conduct unbecoming, the file will be immediately referred to the Registrar and the matter will be dealt with as a complaint, as per s.64(6) of the *Medical Act*.

Referrals to Registrar Protocol

In the case of any referral to the Registrar from the peer review program, the review will be terminated, and the physician will be advised by the Chair of the PRC.

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Referrals to the Registrar are made in writing by the Chair of the Peer Review Committee.

Information from a peer review, including the feedback provided to a physician as a result of a review, can only be used for the purpose of the peer review program. It cannot be used in any investigation or disciplinary matter.

In a case where the assessment (peer review) is terminated under Section 64 (6), only limited information as is necessary to allow the commencement of an investigation will be provided. The physician must be notified, and the information provided to the Registrar must be sufficient to identify the nature of the complaint and provide enough detail for the physician to be able to answer the complaint.