

# Newsletter

Edition: August 2017

### Next EQuiP Conferences and Assembly Meeting

Dear colleagues and friends of EQuiP,

Many EQuiP delegates participated in the Wonca Europe 2017 Conference in Prague. Bohumil Seifert from the Czech Republic did a fantastic job organizing and leading the conference.

Also, we had a nice opportunity to meet and work together with other Wonca networks and to meet with GPs from all over Europe to discuss, reflect and plan the future. We met with a lot of young (and not so young) colleagues - and I belive it is crucial still to motivate them to focus on Quality and Safety in their daily work in practice.

With this newsletter we want to carry on in the same spirit and direction as the Wonca Europe Conferences:

- Supporting the interchange of ideas
- Showing to each other what is happening around Europe
- Trying to make people enthusiastic and to reflect on their daily work and - not at least - the quality and safety of such
- In the next newsletters we will launch a new thematic approach, building on the EQuiP expertise and sharing it with all of you.

We hope that you will enjoy it!

Piet Vanden Bussche

If you have anything to add, ideas or comments, feel free to do so. They will only help us to do what we do even better in the future.

Kind regards,

EQuiP President

### 52nd EQuiP Assembly Meeting

The next Autumn Meeting will be held from 16-18 November 2017 in Zagreb (Croatia) at Andrija Štampar School of Public Health, Rockefeller St 4. More information will be provided soon.





The traditional restaurant in Croatia where Piet Vanden Bussche, president of EQuiP gives a formal warming speech and thanks our hosts.

Warm places, good food, fireplace and wine can bring people together and is allowing some space to rest during this hardworking days. Essential time for EQuIP delegates (2)



#### 53rd EQuiP Assembly Meeting

The next Spring Meeting will be held from 23-24 March 2018 in Bratislava (Slovakia) 2018. More information will be released soon.





Meeting Secretories

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### **Short Report:**

### 5th French EQuiP Summer School (July 5 - July 8 2017)

The "Société Française de la Thérapeutique du Généraliste" (SFTG) and the "Fédération Française des Maisons et Pôles de santé" (FFMPS) in partnership with EQuiP held for the 5th time the French EQuiP Summer School from July 5th to July 9th with success!

It took place for the first time in a charming town called Saint-Paul Trois Chateaux in the south region of France for 3 days under the great management of Dr Isabelle Dupie and Dr Hector Falcoff, the two french EQuiP delegates.

The number of participants has never been that high: 18 participants, including 11 GPs, 2 pharmacists, 1 nurse ASALEE\*, 1 engineer ASALEE, 2 GP trainees and 1 administrative director.

\*ASALEE: French interprofessional cooperation experiment dedicated to public health and teamwork.

They brought 11 quality improvement projects, such as 'experience feedback committee implementation', 'assessing patient adherence to treatment from GPs to pharmacies', 'using/assessing a new patient education tool brought by the ASALEE nurse' or 'dealing with aging population in an isolated area by recruiting diverse skilled professionals'.

Like the four prior schools, participants come by teams of two, usually from the same practice or area, with a common project on quality improvement. The project can be at its early stage or in a more advanced stage. With the help and skills of local and international experts, they worked on it during dedicated sessions (2 or 3 per day). On the last day, people presented their project and got positive feedback from the experts.

This year, our experts were **Nicolas Senn**, GP and epidemiologist in Lausanne Policlinic University (Switzerland), **Philippe Michel**, public health specialist in Lyon University (France), **Hervé Picard**, biostatistician in Paris Diderot University (France) and **Céline Casta**, academic GP in Nice University (France).

Nicolas Senn gave an inspiring plenary session on efficacy, effectiveness and efficiency. Hervé Picard brought our minds into the depth of biostatistics in a very easy and understandable way. Céline Casta ran into health inequities and showed us how family medicine could be a solution, while Philippe Michel offered his expertise on the projects giving rapid, but relevant feedback.

In the end, projects improved and people got even more inspired and motivated than in the beginning. Participants' reports emphasised the enriching interprofessionnel talks and the quality of the experts they met. The summer school atmosphere has been well spread and people got home full of thoughts and reflection.

#### By Dr André NGUYEN VAN NHIEU

Médecin généraliste, Centres Municipaux de Santé de Montreuil Chef de clinique des Universités Département de Médecine Générale Université Paris Diderot (DMG Paris Diderot)

Saint-Exupéry Network Secretary





### 5th Vasco da Gama Movement Forum

### 26-27 January 2018 in Porto, Portugal



#### Bem-vindos ao Porto!

"Stronger together: charting the course to navigate the future" is the core theme of the 5th Forum of the Vasco da Gama Movement, the European Network for New and Future Family Doctors.

This event is going to take place in Porto (Portugal) on January 26th and 27th 2018, and it calls out for the need for teambuilding and teamwork on the different topics, namely QUALITY AND SAFETY IN FAMILY MEDICINE.

Has your practice's quality and safety program helped you to develop a safer work environment and attain better health outcomes?

#### Share your initiative as an oral or poster presentation!

Are you working on a project that could help support family doctors in their efforts to provide the best possible care in a safe environment?

#### Pitch your ideas during an Ignite session!

Would you like to increase the capacity to systematically review and continuously improve the quality and safety of health care?

#### Organize a Workshop!

Do you have any burning questions on quality and safety in healthcare that you'd like to see raised during the Forum? Submit them for discussion in Special sessions!

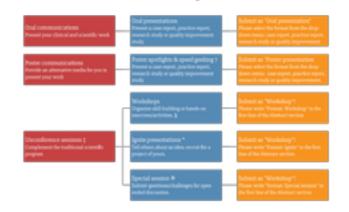
#### Abstract Submission

The Scientific Committee invites you to submit abstracts through this platform until 15 September 2017. You will be asked to create an account in order to access the platform.

#### Link for abstract submission

See all submission options below and the guidelines here.

#### Submission options



#### Registration

There are limited places for this forum, so we advise you to register quickly!

The maximum number of participants per country is 75, being that any further registrations will be put on a waiting list. In case there are placements available after the 31st October, you will be contacted by our secretariat in order to confirm your registration.

#### Link for registration

This Forum has been organized with a low cost format and without the involvement of the pharmaceutical industry.

The Host Organizing Committee is working with passion so that you may enjoy a memorable event!

So let's work together and draw a safe, high-quality future for Family Medicine.
#5vdgmf

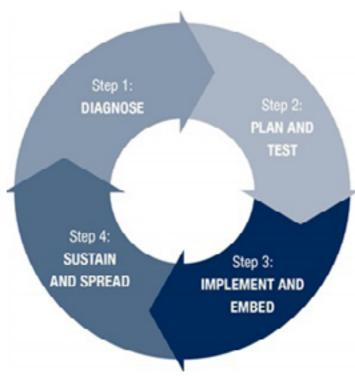
#vdgmvirusinfection

See you in Porto!

Ana Nunes Barata President of the Host Organizing Committee

### Quality Improvement in General Practice

EQuiP recognises its role in taking the initiative around the quality agenda, and that there is a need to reflect experiences rather than focusing solely on the gold standard level of quality. 'What good looks like' changes over time and EQuiP wants to encourage all members to engage in QI activities on a broader level of continuous improvement on the quality spectrum.



**Source:** http://www.rcgp.org.uk/clinical-and-research/our-programmes/quality-improvement.aspx

#### Q: "What is Quality Improvement?"

**A:** "Quality Improvement (QI) helps us identify what works well and where we can make changes. In primary care, we don't have time or resources to spend on things that don't work, don't serve our patients, and that could be done more efficiently or effectively.

QI is a commitment to continuously improving the quality of healthcare, focusing on the preferences and needs of the people who use services."

Read the RCGP's **position statement on quality in general practice**.

### **#1 Sharing practical experiences of Quality Improvement** (December 2016)

This webinar explored issues surrounding improving the care you give to your patients in an effective and efficient way.

#### View the webinar on YouTube

View the **Power Point Slides** 

### **#2 Motivating others to take part in Quality Improvement** (February 2017)

This webinar followed 'Sharing practical experiences of Quality Improvement' and provided more information on the new self accreditation and online learning network, QI Ready, alongside sharing tips on motivating members of your practice in quality improvement.

The session was chaired by Dr Becks Fisher (The Health Foundation) and on the panel were Dr Joanna Bircher, Dr Bill Taylor, Dr Mike Holmes (College QI Ready Lead) and Dr Simon Stockhill (College QI Ready Lead).

#### View the webinar on YouTube

View the **Power Point Slides** 

### **#3 The experience of improving diabetes care** (December 2016)

This webinar explored issues surrounding improving the diabetes care using Quality Improvement methods and tools. The webinar gives an introduction to QI tools and methods. looks at their use in practice setting, and points to available resources.

The session was chaired by Dr Bill Taylor (College QI Clinical Lead), on the panel were Dr Joanna Bircher (College QI Clinical Lead) and Dr Andrew Askey (CCG clinical lead for diabetes and LTCs, Walsall CCG).

#### View the webinar on YouTube

View the **Power Point Slides** 

## #4 How Quality Improvement can positively impact on patients with diabetes

(January 2017)

This webinar followed 'The experience of improving diabetes care' and further explored issues surrounding improving care for patients with diabetes. The webinar focused on patient experience and how Quality Improvement methods and tools can help practices put patients at the centre of care.

The session was chaired by Dr Bill Taylor, on the panel were Dr Joanna Bircher, Paul Gimson (National Primary Care Programme Manager, 1000 Lives Improvement Service, Public Health Wales), Dr Lesley Surman (Patient Participation Expert) and David Roberts (Patient Representative, Diabetes UK).

#### View the **webinar on YouTube**

View the **Power Point Slides** 

### **Quality Improvement in Healthcare Illustrated in Nine Minutes**

Dr. Mike Evans (Associate Professor of Family Medicine and Public Health at the University of Toronto): "An Illustrated Look at Quality Improvement in Health Care".

In the video, Evans starts with a simple question: Why should you care about quality improvement? He presents a brief history of QI (including a "Mount Rushmore" of improvers), then touches on system design, the Model for Improvement, and the familiar challenge, "What can you do by next Tuesday?" — all in less than nine minutes!

IHI collaborated with Dr. Mike Evans to create a dynamic, animated whiteboard video that introduces the concepts of quality improvement in health care. Dr. Evans has become well-known in health care circles for his fast-paced videos that have attracted millions of views on YouTube.



### The Challenges of Measuring, Improving, and Reporting Quality in Primary Care

"We propose a new set of priorities for quality management in primary care, acknowledging that payers and regulators likely will continue to insist on reporting numerical quality metrics.

Primary care practices have been described as complex adaptive systems. Traditional quality improvement processes applied to linear mechanical systems, such as isolated single-disease care, are inappropriate for nonlinear, complex adaptive systems, such as primary care, because of differences in care processes, outcome goals, and the validity of summative quality scorecards.

Our priorities for primary care quality management include patient-centered reporting; quality goals not based on rigid targets; metrics that capture avoidance of excessive testing or treatment; attributes of primary care associated with better outcomes and lower costs; less emphasis on patient satisfaction scores; patientcentered outcomes, such as days of avoidable disability; and peer-led qualitative reviews of patterns of care, practice infrastructure, and intrapractice relationships."

 Primary care is too complex to be described and measured as a series of single-disease metrics; much more complex than building a Toyota or replacing a knee.

Source: Ann Fam Med 2017;15:175-182. doi: https://doi.org/10.1370/afm.2014

Richard Young, MD Director of Research & Recruiting JPS Hospital Family Medicine Residency Program

## **Quality Improvement in Serbia**By Dr Darinka Punosevac

Last couple of decades have been very politically turbulent in Serbia and it had strong impact on all spheres of the society and health structures as well. A lot of changes have been made in order to attune our law with the Europian, on the Serbian path to the EU. A lot of huge and important changes had to be made in the previously devastated and depleted country, during the bombarding in 1999.

It doesn't imply that safety and quality haven't been on our minds but as pretty much elsewhere we haven't had a systematic approach to the matter.

Recently, at some medical universities in the country (Belgrade), in the last term, as a part of clinical internship, lectures and workshops have been organized concerning topics like: Practice management, management of health records, psychosocial dimensions of patients' complaints, team work, communication skills etc. At the Medical university of Kragujevac, during the first year of medical school, there are lectures to introduce students to the concept of general practice.

There is no coordination between medical universities in the country concerning lectures about general practice.

The same goes for specialist studies in general practice. At the Medical university of Novi Sad, during the specialist studies in general practice, there are lectures on these topics: communication in the GP practice, practice coordination, the specifics of decision making, teamwork, general practice in electronic health system, practice management, management of health records, contemporary health laws in the field of general practice, ethical problems, medical errors, evidence based medicine.

At the Medical university of Belgrade, during the specialist studies in General practice there are lectures on these topics: Teamwork, general practice in electronic health system, management of health records, burnout syndrom, ethical problems, medical errors, communication skills of GP.

Serbian Ministry of Health, with the help of World Bank, started accreditation of health establishments in 2006, and 16 health clinics got accreditation until the end of 2008. During 2010, Accreditation agency included three more health clinics in the accreditation process, this time with the help of EU. Accreditation agency data, from April 2016 show that 125 health clinics got accreditation licences out of approximately 150.

The aim of accreditation is the standardization of services and introduction of the procedures that health clinics go by. Many of these procedures relate to patients' safety and quality of services – practice functioning, communication, team work, EHR, problem management (mishaps, emergency situations, incidents...) and problem solving, application of good practice clinical guides....

Unfortunately, as far as this author knows, there are no procedures taking into consideration doctors and nurses as 'second' and 'third' victims in occurring incidents. It is the subject that should be dwelled upon because medical staff that is overloaded with professional obligations and ever increasing amount of administrative work, won't be able to give services of the appropriate quality. If their well being is not taken into consideration as well, efforts in improving quality and safety in general practice would be pretty much futile.

It is of the utmost importance to make systematic approach in making recommendations considering quality and safety in GP practice that will be generally accepted by all GPs. Help in this area with problem solving is always welcome including EquiP as a valid partner and organisation with primary interest in this field.

