



From closed quality group to
open network

Edition: **June 2016**

Table of Contents



The Organisation

- About EQuIP
- The Establishment of EQuIP (1989-1990)
- The executive board
- The new president of EQuIP
- Working groups
- Social media and videos
- Vasco da Gama Movement

Projects

- Main Project Areas
- EUROPEP
- Organisational Development in Family Medicine
- inGPinQI
- PECC-WE
- Quality Circles
- Back to Basics of Quality Improvement
- The Interactive eGuidebook to Social Media

Members

- Membership
- Individual membership
- Organisational membership
- Application procedure
- Membership fees

Events

- Conferences and Assembly Meetings

- Events: The years 2015/2016

WE Conference 2016 (Copenhagen)

- Events: The years 2015/2016

49th EQuIP Meeting (Prague)

- Events: The years 2015/2016

WE Conference 2015 (Istanbul)

- Events: The years 2015/2016

47th EQuIP Meeting (Fischingen)

- Events: The years 2013/2014

46th EQuIP Meeting (Tallinn)

- Events: The years 2013/2014

46th EQuIP Meeting (Ljubljana)

- Events: The years 2013/2014

45th EQuIP Meeting (Bologna)

- Events: The years 2013/2014

WE Conference 2013 (Prague)

- Events: The years 2013/2014

43rd EQuIP Meeting (Paris)

- Events: The years 2011/2012

42nd EQuIP Meeting (Erzurum)

- Events: The years 2011/2012

41st EQuIP Meeting (Stockholm)

- Events: The years 2011/2012

40th EQuIP Meeting (Zagreb)

- Events: The years 2011/2012

6th Invitational Conference (Copenhagen)

EQuIP Summer Schools

- The English Summer School 2009, 2011, 2013
- The English Summer School 2014
- The French Summer School 2015

About EQuIP



The aim of EQuIP is to contribute to the achievement of high levels of quality and safety of care for patients in general practice in all European countries.

EQuIP will endeavor to achieve this by offering a structure for collaboration and exchange of expertise and methodology and by initiating projects on development and evaluation with regard to Quality Improvement (QI) and Quality Management and Development, which will be used here as the most comprehensive definition.

Quality and safety development for general practice is a continuous process of planned activities based on performance review and setting of explicit targets for good clinical practice with the aim of improving the actual quality of patient care.

This understanding of Quality Development focuses on a critical look at the actual performance of general practitioners and their practices rather than on competence alone. The members of EQuIP assume that this Quality Development should be the responsibility of the medical profession.

Members of EQuIP base their work on quality improvement and patient safety being:

- A professional responsibility
- A process
- Covering all aspects of patient care
- An integrated part of medical education
- A routine part of daily practice
- Patient centered
- Enhancing the appropriate use of medical services
- Acknowledging the specific strategies of Family Medicine/General Practice
- Making decisions explicit
- No punitive

In collaboration with...

European Institute for Health Records

World Health Organisation

World Organization of Family Doctors (WONCA)

Wonca Europe

European Journal of General Practice

European General Practice Research Workshop (EGPRN)

WONCA and WHO are collaborating to strengthen Primary Care around the World.



A short history of EQuIP: The Establishment (1989-1990)



Introduction and background

At the WONCA Council Meeting prior to the 12th World Congress held in Jerusalem in 1989, the Improvement of Quality Working Party was set up as a result of the acknowledgment of the growing significance and importance given to this issue by Family Doctors world-wide and to the work that many of WONCA's member institutions were carrying out to develop initiatives on the subject in their own countries. The work group was created as a sub-committee of the Permanent Medical Education Committee.

The incentive group emerged at subsequent meetings, counting among its members on Prof. Richard Grol, title professor of Quality Assurance at Nijmegen University (Holland), and Chairman of the European group. In 1990, the Chairman of EQuIP sent a letter to the different Family Medicine associations in the WONCA member countries, introducing EQuIP and inviting them to join by appointing two Delegates. Dr. Grol was replaced by Prof. Joachim Szecsenyi, professor of Quality Assurance at Heidelberg (Germany), in EQuIP meeting in Lisbon November 2002.

At the meeting in Kos (Greece) September 2005, Prof. Martin Marshall (United Kingdom) took over as chair of EQuIP from Prof. Joachim Szecsenyi. In March 2006 Prof. Martin Marshall accepted a post as "Deputy Chief Medical Officer" of the National Health Service (NHS) in Great Britain and presented his resignation. At the Istanbul (Turkey) meeting, in May 2006, EQuIP delegates decided that Prof. Joachim Szecsenyi would lead the organisation again for the next years.

In 2007, Prof. Tina Eriksson was elected president and she took over office at the closed meeting in Bucharest, November 2008.

The structure of EQuIP

EQuIP consists of an assembly and an executive council. The EQuIP executive is formed by the President, the Honorary Secretary, the Honorary Treasurer and the delegate in WONCA Europe Executive and 1-3 members at large. It is entrusted with the structure, relations with WONCA, budget, quotas and social aspects.

The assembly is formed by the delegates in representation of the different national organisations members of WONCA Europe. The maximum number of representatives per country is two.

At the assembly meeting in Turkey in the spring of 2006 a decision to work on an EQuIP constitution was taken. A group of delegates were appointed to draw up a draft constitution.

Drafts were discussed at and altered after four consecutive assembly meetings in Spain 2006, the Czech Republic 2007, France 2007 and Norway 2008 until it finally was adopted by the EQuIP assembly at a closed meeting in Bucharest, November 8, 2008.

Dr. José Miguel Bueno Ortiz
Spanish EQuIP delegate

The visual history of EQuIP



Dr. Joachim Szecsenyi (left) hands a book to Dr. Grol (right) to commemorate his hand over of EQuIP presidency in the EQuIP conference in Lisbon (Portugal) 1994.



Prof. Martin Marshall takes over the presidency in Kos, Greece 2005, but resigns shortly thereafter because of other duties.



At the meeting in Bucharest Romania November 2008, Prof. Joachim Szecsenyi (left) hands over the responsibility for EQuIP to Prof. Tina Eriksson, after the first elections of executive and chair of EQuIP.

The executive board



EQuIP president Dr. Piet Vanden Bussche, GP

Domus Medica
2600 Berchem

+32 51 72 42 81
+32 47 56 66 156

deburg.piet@skynet.be
www.domusmedica.be



Honorary secretary Dr. Andree Rochfort

Irish College of General Practitioners

4/5 Lincoln Place
IRL-2 Dublin
Ireland

Phone office: +353 (1) 676 37 05
Fax office: +353 (1) 676 58 50
Mobile: +353 87 7519307
E-mail: andree.rochfort@icgp.ie
Homepage: www.icgp.ie



Honorary treasurer Dr. Prof. Zekeriya Aktürk

Atatürk University
TR-25240 Erzurum

+90 442 231 72 28
+90 442 231 29 41
+90 442 236 09 68
zekeriya.akturk@gmail.com
www.aile.net or www.tahud.org.tr



Member at large Dr. Zlata Ozvacic, MD, GP, PhD

Assistant Professor
Department of Family Medicine
A. Stampar School of Public Health
School of Medicine
University of Zagreb
Rockefellerova 4

10 000 Zagreb
+385 1 4590 158
zlata.ozvacic@mef.hr



Member at large Zalika Klemenc Ketis

Assistant Professor, MD, PhD

Slovenian Family Medicine Society
Dunajska 162
1000 Ljubljana
Slovenia

+386 41 516 067
zalika.klemenc@um.si



Member at large Prof. Dr. Hector Falcoff

SFTG Société de Formation

12 Rue Lahire
F-75013 Paris

+33 1 45 86 43 03
+33 687 325 842
falcoff@club-internet.fr

The new president of EQuIP

- Autumn, 2014



1) Why did you run for president?

I was candidate for presidency of EQuIP because some members who I value highly repeatedly asked me to do so.

This gave me the self confidence to go for it. And apparently a majority of the assembly members thought I could do it.

It would not be possible to do it without the support of the faculty of the university where I work, the support of my colleagues in the practice and the support of Domus Medica, the organizational member for whom I am the representative.

I hope I can meet the expectations of the members of the assembly and continue the very important work Tina started. I want to emphasize the importance of her presidency. She led EQuIP through a very crucial transition period in a brilliant way. Now it is a stimulating, enthusiastic group of people from all over Europe and it is a great honor to become their president.

2) What tasks will you focus on right away?

The months to come are for me a very important 'learning' phase. Tina is still in the lead and I can watch how she does it and learn a lot from her. I think it will be very important to support ongoing projects as much as possible.

The board is planning a strategic weekend in the months to come. This is good to be able to know each other a little bit better and to stimulate the team spirit. There we will try to set priorities for the next years and present them to the assembly in Switzerland.

What challenges does EQuIP face now and in the future?

The challenges for EQuIP in the future may be: can we manage to keep overview and bring together all aspects of Quality in Primary care, emphasize how they are interconnected and show what the basic underlying vision and knowledge is.

Can we stay and become more influential by cooperating with other networks and take up a leading role when the theme of Quality is at stake? How can we spread the quality virus in primary care all over Europe by teaching, in CME and highlighting good practices?

4) What is your vision for EQuIP in the near and the distant future?

Personally I think it is important to open the network, gather as many people and organizations who are interested in Quality in primary care as possible, and convince them to become member.

I think it will be crucial to strengthen the networking by realizing a modern communication system and continue the effort of interesting, stimulating open meetings every spring.

The summerschools are also very important to learn young people about Quality and EQuIP. they are the future of our organization.

CV

- Born in 1961 as the first son of a quality controlling engineer
- General Practitioner since 1985, working in a multi-disciplinary group practice in Lichtervelde (semi-urban village in the western of Flanders)
- 1999- 2006: President of Flemish Parliament of General Practitioners
- 2006 -2008: President of the College of Flemish General Practitioners (Domus Medica)
- Since 2008 part-time lecturer on quality of care and chronic care in the Department of Family Medicine and Primary Care at Ghent University (Belgium)
- Member of the Council on Quality Promotion of the Belgium National Institute for Health and Disability insurance (NIHDI)
- In 1997 participant at the Equip Summer School Maastricht
- Since 2008 Equip member, as Belgian representative and coordinator of the Equip Teaching Quality Project
- Special interest in translating quality into day to day practice management, seamless care, teaching quality and equitable care
- Co-author of the book "Dokteren met kwaliteit" (Quality in medicine)





Working Groups

#1 E-health

(in collaboration with organisational EQuIP member Duodecim)

Work Group Leader: Ilkka Kunnamo (Finland).

How to Build an Ideal Healthcare Information System?

Read the World Book of Family Medicine [2015 article](#)

Read the WONCA Policy Statement on [eHealth 2016](#)

#2 Equity

Work Group Leader: Hector Falcoff (France).

The Health Needs of Hard to Reach Groups: Do We Know Enough?

Read the World Book of Family Medicine [2015 article](#)

- **Programme and slides** from April 2013, Paris.

#3 Patient Safety

Work Group Leader: Isabelle Dupie (France).

Talking about Medical Errors: The Bigger Picture

Read the World Book of Family Medicine [2015 article](#)

- See the **49th EQuIP Meeting** in Prague, 22-23 April 2016.

#4 PECC-WE (Patient Empowerment)

Work Group Leader: Jochen Gensichen (Germany).

Patient Empowerment for Patient Self-Management

Read the World Book of Family Medicine [2015 article](#)

(Wonca Europe 20th Anniversary Project 2015)

- Read more about **PECC-WE** under 'Projects'

- Read more on [the new EQuIP webpage](#).

#5 Professional Health

Work Group Leader: Andrée Rochfort (Ireland).

- Read more on [the new EQuIP webpage](#).

#6 Social Media

(in collaboration with Vasco da Gama Movement)

Work Group Leader: Ulrik Bak Kirk (Denmark).

- Read more about the joint **EQuIP-VdGM Social Media eGuidebook**.

#7 Teaching Quality

Work Group Leader: Zalika Klemenc Ketis (Slovenia).

- Read more on [the new EQuIP webpage](#).

- Read about the **Back to Basics of Quality**.

- Read about the EU funded **inGPinQI** project.

- See [the English](#) and [the French](#) EQuIP Summer Schools.

#8 Tools & Methods

Work Group Leader: Jan Kovar (Czech Republic).

European Practice Assessment (EPA)

Read the World Book of Family Medicine [2015 article](#)

Drafting A Practice Professional Development Plan

Read the World Book of Family Medicine [2015 article](#)

Please see '**Projects**' for Quality Improvement Tools and Methods developed by EQuIP.

#9 Quality Circles

Work Group Leader: Adrian Rohrbasser (Switzerland).

Quality Circles

Read the World Book of Family Medicine [2015 article](#)

- Read more about the **EQuIP Working Group on Quality Circles**.

- Read more on [the new EQuIP webpage](#).

WHO and Patient Safety

Universal coverage has become a priority goal for the World Health Organization (WHO) and its Member States, and providing accessible and safe primary care is essential towards meeting that goal.

The WHO Patient Safety Programme has initiated the "Safer Primary Care" project whose goal is to advance the understanding and knowledge about:

- The risks to patients in primary care
- The magnitude and nature of the preventable harm due to unsafe practices in these settings
- Safe mechanisms to protect primary care patients

[Read much more here](#)

Social media and videos



Dissemination of knowledge

EQuIP emphasizes the dissemination of knowledge, and it is important for EQuIP that the knowledge generated through events reaches the broadest audience possible.

Consequently, EQuIP has been audio and video recording (pod- and webcasts) main EQuIP events from the 40th EQuIP assembly meeting in Zagreb 3-5 November 2011, which will give you the opportunity to listen even though you were unable to attend or you would like to hear some of the points once again.

EQuIP on the social media

Discover and subscribe for EQuIP's [YouTube channel here](#)

Per 30th of May 2016 the EQuIP YouTube videos have had 15.642 views.

You can also participate in discussion [via LinkedIn here](#) and [Facebook here](#)



Vasco da Gama Movement



The Vasco da Gama Movement is the WONCA Europe Working Group for New and Future General Practitioners. EQuIP feels it is important to involve young doctors in EQuIP and involve them in future Quality Improvement (QI) projects or Practice Safety (PS) projects.

Christina Svanholm, a young GP trainee, was welcomed as representative for Vasco da Gama in EQuIP at the Assembly Meeting 5-6 April 2013 in Paris.

Vasco da Gama has an active Facebook group, which will be an interesting social media source of communication between the two groups and network. It is also relevant to involve and invite Vasco da Gama members to the EQuIP summer schools. In 2013 these are held in Berlin (July) and France (August).

The name of the great Portuguese explorer, who discovered the sea route towards India almost five hundred years ago, has been employed by the Vasco da Gama Movement (VdGM), the working network within WONCA Europe, dedicated to trainees and junior General Practitioners / Family Physicians (GPs/FPs).

As they set out for their own exploratory voyage in the discipline of General Practice / Family Medicine (GP/FM) in Europe, the Movement functions as a communication platform and encourages their first steps by providing support and information.

Since its inception in Lisbon in 2005, links have been established with most GP/FM associations to create a European Council of representatives. Each year VdGM hosts an international meeting, known as the 'pre-conference', which takes place a day prior to the WONCA Europe conference.

The Movement has five working theme groups that constitute the pillars of its initiatives:

- Education & Training,
- Exchange,
- Research,
- Beyond Europe and
- Image

These often work in collaboration with their equivalent WONCA Europe special interest networks. Some of the activities of the theme groups include the improvement of the quality of GP/FM training programmes, the establishment of a network for research projects and the promotion of Rural Medicine.

Moreover, the Junior Researcher Award has been launched following the movement's continuous effort to promote a new generation of FPs that combine clinical work and research. VdGM also offers the unique opportunity for trainees and juniors to spend two weeks with a GP/FP from another country through the Hippokrates Exchange Programme.

The most formative exchange experiences are awarded with the Hippokrates and Claudio Carosino Prizes each year.

Furthermore, our Movement has established the VdGM Fund, which was born from the observation of the unbearable inequalities and the on-going economic crisis, which afflicts our continent and prevent many colleagues from joining international activities.

Thanks to generous donations, VdGM has managed to offer bursaries in support of young and future colleagues.

Our mission is a global one and entails the foundation of a forum for collaboration to improve GP/FM.

Through our activities we aim at empowering the future generations of GPs/FPs to lead the development of primary health care at a regional, national and international level.

For more information on VdGM activities, please visit www.vdgm.eu and follow us on:

- [Twitter](#)
- [Facebook](#)
- [Linkedin](#)





Projects

- Main Project Areas

WONCA Europe is the European section of the World Organisation for National Colleges and Academies of General Practice/Family Medicine. EQuIP is the European Association for Quality Improvement and Patient Safety in General Practice/Family Medicine and is one of the network organisation of WONCA Europe.

Tools and methods

In EQuIP's understanding Tools and methods include instruments that measure quality, methods to monitor quality and methods to improve quality.

EQuIP has been involved in developing and disseminating a number of tools for quality improvement in general practice, such as EUROPEP, EPA (European Practice Assessment) and IGPM (The International General Practice Maturity Matrix).

Those instruments were developed in collaboration with European research groups, especially the TOPAS collaboration, and development of new tools for QI in such collaborations continues to be a priority for EQuIP.

However, EQuIP aims at make validated and valuable tools for quality improvement easily accessible to GPs and others involved in quality improvement, regardless of whether EQuIP has been directly involved in their development or not.

Finished projects

In the last two year EQuIP has been involved as partner in the Leonardo da Vinci (EU) project Innovative lifelong learning of GPs in QI supported by information technology (inGPinQI).

The general intention of the inGPinQI project is to improve the existing training programs for both GPs and teachers in family medicine (FM) in the field of QI by implementing new innovative didactic tools and methods in existing educational systems in Europe supported by Information/Internet Technology (IT).

One of the products of the project is 'The Guidebook on Implementation of Quality Improvement in General Practice' which aims at helping regular GP to develop the necessary knowledge and skills in order to understand and manage basic quality improvement methods.

[Link to English GuideBook here](#)

Main project areas

- Patient satisfaction
- Organisational development
- Tools and methods for quality improvement
- Accreditation
- Ethics of quality improvement
- Payment systems, pay for performance
- Aggregated quality data
- Patient safety
- Equity as a dimension of quality
- Teaching quality and safety
- Chronic care



Education and Culture DG

Lifelong Learning Programme



Projects

- EUROPEP



The EUROPEP instrument is a 23-item validated and internationally standardized measure of patient evaluations of general practice care. An international consortium of researchers and general practitioners, linked to EQUIP, developed the instrument in the years of 1995 - 1998.

The instrument has been used in about 20 countries and is available in Dutch, Danish, English, French, German, Hebrew, Italian, Norwegian, Portuguese, Swedish, Slovenish, and Turkish.

The instrument was developed from the beginning as an international instrument, using rigorous translation and validation procedures. We aimed at use for educational purposes in practices and regions as well as nationwide surveys and international comparisons.

A series of studies were performed for its development, including an international study on patient priorities and studies to examine proto-versions of the questionnaire.

A large number of scientific publications using EUROPEP has been published. Since its development, the Europep instrument has been used in many local, regional and national projects. Some countries use it on a very large scale. An email discussion in 2006 among a group of users of the instrument led to a minor revision. In several rounds of proposals and responses consensus was achieved on the revision of the current Europep questionnaire. The English source version of the Europep 2006 instrument is ready for use and can be found in the attached manual.

Contact person for enquiries is Dr. Michel Wensing.

[EUROPEP 2006 report](#)



Projects

- Organisational Development in Family Medicine



The International Family Practice Maturity Matrix (IFPMM)

The Maturity Matrix is an organisational assessment aimed at stimulating practice-led quality improvement in primary care. To allow this assessment tool to be implemented in different primary care contexts across Europe an international version has been developed and is now being tested in a collaboration between Cardiff University, the European Association for Quality in General Practice (EQuiP), and the Centre for Quality of Care Research (WOK) in Nijmegen.

It had been translated and tested in the following countries: Belgium, Croatia, Germany, Greece, Kosovo, Nigeria, Norway, Portugal, Slovenia, Spain, The Netherlands, United Kingdom in 2007-2008.

The IFPMM is a method to facilitate organisational development using group-based formative assessment and benchmarking. The IFPMM instrument is copy-right free and can be accessed by registering a username and password on the website. On receipt of an activation code and activating your account you can download the IFPMM instrument in the language of your choice.

Currently, the IFPMM is available in Albanian, Croatian, Dutch, French, German, Greek, Italian, Norwegian, Portuguese, Slovene, Spanish, Swedish and Turkish.

[All information regarding the design and use of the IFPMM can be found here](#)

The European Practice Assessment (EPA)

The EPA instrument is an internationally standardized and validated instrument for assessing practice management in primary care practices. It was developed by an international group of researchers, linked to EQuiP, and the Bertelsmann Foundation, Gütersloh Germany.

The EPA indicators have been developed in an international study (2001-2004). The national implementation of EPA lies within the responsibility of the individual countries. During the pilot study 50 practices were included for each country.

Since the pilot study, EPA was used in the following countries: Belgium, Germany, Netherlands, Slovenia, and Switzerland. Furthermore Romania as a new country has started a pilot study using EPA and several more new countries think of using EPA, or already made project plans (e.g. Saudi Arabia and Qatar). Read more [here](#)

Here you can see [slides from Sara Willms' presentation](#) on new EPA results from 2011.

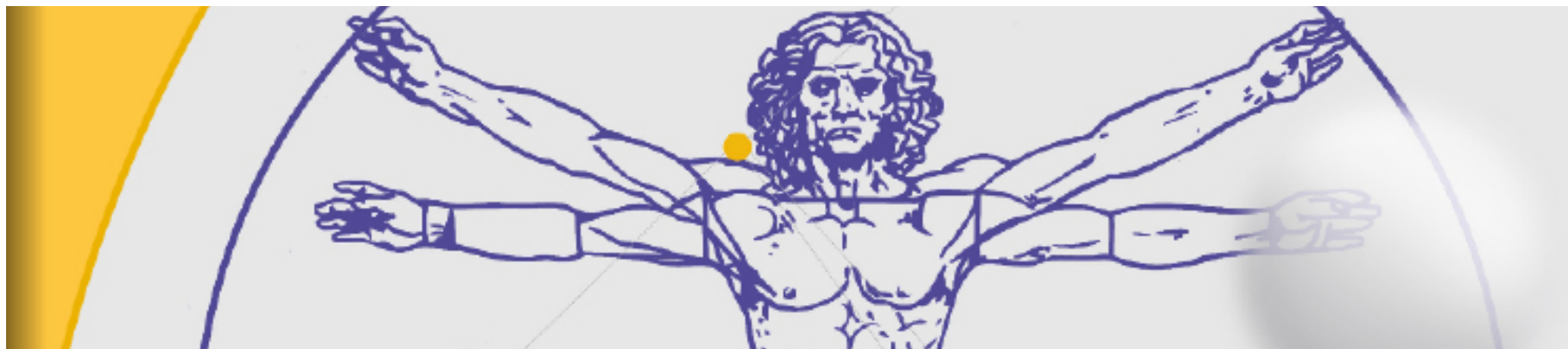
[EPA information paper english 2008](#)

maturitymatrix



Projects

- inGPinQI (Innovative lifelong learning of GPs in QI supported by information technology)



The aim of the Leonardo da Vinci (EU) project Innovative lifelong learning of GPs in QI supported by information technology (inGPinQI) is to improve the existing training programs for both GPs and teachers in family medicine (FM) in the field of QI by implementing new innovative didactic tools and methods in existing educational systems in Europe supported by Information/Internet Technology (IT).

The project is focused on: (1) hypertension and (2) diabetes mellitus which appear as the most important problems of public health in Europe.

Results

Two reports with the systematic overview of the existing training programs in QI and successfully implemented quality projects (which adopt a broad view of the magnitude and nature of quality), that will be developed in the project – helps us in creating an important European perspective that couldn't be achieved based on experience from one country only.

Data included in the reports may be used to stimulate interest of family medicine teachers on QI topics. A description of quality projects undertaken in general practice, presentation of the best examples with analysis of its success factors can help in informing them about valuable developments.

That mapping done in our project will give the basis for developing the following project results:

- Guide Book containing guidelines on effective development and implementation of QI programs on EU level.
- New guidelines for the management of: (1) arterial hypertension and (2) diabetes mellitus.
- A VET training course and learning materials on QI for family medicine teachers.
- A distance-learning course for GPs on QI.
- A web-based tool for measuring the GPs' educational needs on QI in family medicine.

[Link to English GuideBook here](#)

Partnership

Partnership of the project consist of 6 Partners from 5 countries: PL, CZ, DK, NL, SI. The partnership is built on the basis of searching of active partners in project area in the EU. All partners have a wide practical and theoretical experience in teaching and quality improvement themes, necessary to cover project activities and to achieve results envisaged. A various character of partners (universities, associations, SME, international organizations) ensures a complex approach to achieving project goals.

EQuIP comprises 2 delegates appointed by the European Colleges of Family Practice on the ground of their expertise in practical tutorial or research related expertise in Quality in General Practice. [Read more here](#)

Videos

Presentation of EQuIP's Leonardo da Vinci project (English) [here](#)

Presentation of the results of EQuIP's Leonardo da Vinci project (English) [here](#)

Tomasz Tomasik

Projects

– PECC-WE (Patient Empowerment in Chronic Conditions – WONCA Europe)



Work Package 1a: Systematic review

Aim:

To identify studies which report on the effectiveness of educational interventions for primary care health professionals where the interventions were designed to improve self-management of chronic conditions by patients.

Method:

Total records Identified (**n= 7973**)

Duplicates removed (**n= 440**)

Records screened (**n= 7533**)

Records excluded on the basis of title/abstract i.e first stage review (**n= 7490**)

Full text of potentially relevant studies re-trieved and read for inclusion criteria (**n= 43**)

Records excluded on the basis of not matching inclusion criteria i.e. (**n= 39**)

Records to be included in the review (**n= 4**)

Key Messages:

Specific training programmes and education for primary care health professionals can:

(a) improve and support patient competencies for self-management, and

(b) improve quality of life, for patients with chronic conditions.

Such training helps to improve self-efficacy and job satisfaction and reduce the perception of burnout for participating health professionals

Responsible partner

Irish College of General Practitioners

Andrée Rochfort, MD

Honorary Secretary of EQuIP

Work Package 1b: Online Repository

The ambition in work package 1b is to create an online repository of information for education and research in 'Patient Empowerment' in General Practice/Family Medicine. Fruitful peer-to-peer discussions about the concept of 'Patient Empowerment' took place at the EQuIP Assembly Meeting in Bologna in November 2013, at an EQuIP workshop at the Wonca Lisbon conference in July 2014, and at another EQuIP workshop at the 19th Nordic Congress of General Practice in Gothenburg in June 2015.

Tools from Scandinavia

Several 'Patient Empowerment' resources were gathered at the last-mentioned EQuIP workshop, conducted by Ulrik Bak Kirk (EQuIP Manager) and Eva Arvidsson (Swedish EQuIP delegate).

Responsible partner

Danish College of General Practitioners

Tina Eriksson, MD PhD

Imm. Past EQuIP President

In English

Change Talk: Childhood Obesity and Overweight (App)

BMJ Learning – Motivational Interviewing

Video: Mr. Smith's Smoking Evaluation

Denmark (in Danish)

Den motiverende samtale (Gregers Rosdahl)

Din nervøse patient (Torben Bendix)

Om Torben Bendix (Practicus)

Selskab for Samtale og Supervision i Almen Praksis

E-læring om samtalen om alkohol (DSAM)

Supervision: The Inner Consultation (Jan-Helge Larsen)

Sweden (in Swedish)

SOMRA: Samtalet om risikabla levnadsvanor

Video om motiverande samtal (Christina Näsholm)

Motiverande samtal i primärvården

SBU: Motiverande samtal (kommentar)

MIC LAB

France (in French)

Medecine Pour Le Peuple



Patient Empowerment in General Practice

Patient empowerment was adopted as the 12th Characteristic of European General Practice by Wonca Europe in September 2011. In effect, this means that patient self management is recognised as being a specific core characteristic of general practice.

Background

In February 2012, the Wonca Europe Network EQuIP was announced as the winner of the WONCA Anniversary Research Fund. The project, known as PECC-WE (Patient Empowerment in Chronic Conditions – WONCA Europe), was launched during the WONCA Europe 2015 conference in Istanbul.

Projects

– PECC-WE (Patient Empowerment in Chronic Conditions – WONCA Europe)



Work Package 2:

Developing the Educational Framework

On the basis of WP1 outputs, an online train-ing course has been produced as the main product of WP2.

The Motivational Interviewing eLearning Course consists of online access to slides including animated dialogue between patient and pri-mary care health professional and links to two videos of consultations specifically created for this project: One between a GP and a patient, and the other between a practice-based/com-munity-based nurse and the same patient (in the form of an actor).

Publishing of this eLearning Course was pos-sible using the authoring tools of Duodecim eLearning portal. A demonstration of a draft version of the tool took place during Wonca Europe Lisbon 2014 at the Wonca Open Forum Meeting and at an EQuIP Workshop on 'Patient Empowerment'.

The course takes about 60 minutes to complete

Responsible partner

The Finnish Medical Society Duodecim
Ilkka Kunnamo, MD PhD (Adjunct Professor)
EQuIP member

Work Package 3:

Evaluation

The **aim** with this working package is to design:

a) An explorative evaluation in the shape of focus groups or working groups at EQuIP Meetings. The data analysis will support EQuIP in designing the following evaluation phase.

b) A systematic evaluation of the MI eLearning Course in different European countries. The data analysis will support EQuIP in drafting papers and identify elements to improve.

Core findings:

597 respondents completed the survey (449 took the English eCourse and 148 used the German tool). 60% were GPs, 21% were GP trainees, 14% were medicine students and 5% had other professions.

99%

(570 out of 576 respondents) stated that the course helped to improve their skills and competence.

97%

(557 out of 575 respondents) found that the course motivated them to learn and reflect upon the topic.

88%

(505 out of 575 respondents) found the applicability of skills and knowledge obtained from the course in clinical practice to be either 'Excellent' or 'Good'.

Responsible partner

Institute of General Practice & Family Medicine Jena
Jochen Gensichen, MD MSc, MPH (professor and chair)
EQuIP delegate

Testimonial

What was the most important thing you learned during the e-learning course?

I was reminded of what the "art of helping" is all about:

- *You must find the patient where (s)he is.*
- *Understand his/her resource and strong sides.*
- *How the patient's own resources can help to accomplish the wanted change.*

Would you recommend it to your colleagues?

Yes! I think every GP can benefit from taking the course. And I will recommend it to younger colleagues, like the ones I am mentoring as part of the Norwegian specialization program.

(Dr. Anna Stavdal, Norway)

Resources from WONCA Copenhagen 2016

• Printed poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 1MB)

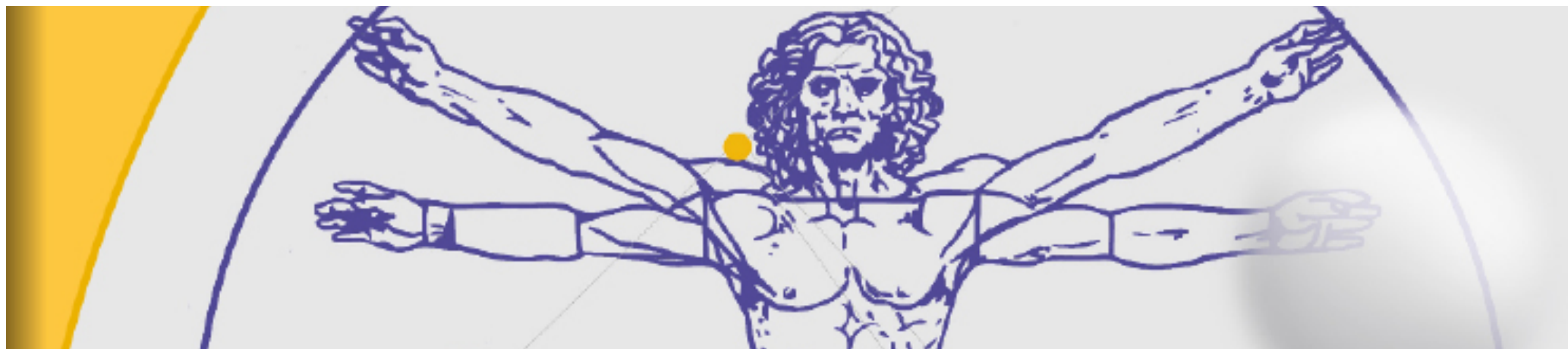
(Practice Support for Patients with Chronic Conditions)

• Printed poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 1MB)

(E-learning „Motivational Interviewing" – A useful tool to improve the skills and competence of communication?)

Projects

– Quality Circles



Dear EQuIP member,

We would like to update the following publication: The development of quality circles/peer review groups as a method of quality improvement in Europe. Results of a survey in 26 European countries (M Beyer, FM Gerlach, U Flies, R Grola, with contributions by Z Królb, A Munckc, F Olesend, M O'Riordane, L Seuntjensf and J Szecsenyi).

Several characteristics of general practice which might favor the development of QCs/PRGs were identified in the survey and they were validated through additional questions to national experts and written material.

7 possible characteristic factors included:

- Employment conditions of GPs (employed/self-employed)
- The type of remuneration (salary)
- Capitation fee/fee for service
- Predominant practice organization (sole practitioner/group practice, health centre)
- The gatekeeping role of GPs
- The existence of a practice list
- The proportion of vocationally trained GPs in primary care.

The authors allowed us to use their original questions which we updated so that the factors above can be rechecked and others may be recognized and evaluated.

If QCs are not used in your country, please, fill in the coming questionnaire anyway, we appreciate your answers.

The results of the survey on structured small group work ought to be ready for the meeting on that topic in April 2015 in Switzerland.

Best wishes,

Adrian Rohrbasser and Ulrik Bak Kirk

The EQuIP Working Group on Quality Circles' Strategy

- Work through the EQuIP survey on Quality Circles in Europe
- Decide on complementary interviews with already active countries to explore local projects and to ask what they expect from a working party
- Decide on complementary interviews to explore what they may expect from such a working party to eventually start QCs
- Plan and decide on some kind of a road map to reach the goals these experts would have

Resources from WONCA Copenhagen 2016

Printed poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 1MB)

(Exploring why Quality Circles work in Primary Health Care: A **Realist** Synthesis)

Electronic poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 1MB)

(The development of quality circles for quality improvement in Europe: A **qualitative** study involving 26 European countries)

Electronic poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 1MB)

(The development of quality circles for quality improvement in Europe: A **quantitative** study involving 26 European countries)

What are Quality Circles (QCs)/Peer Review Groups (PRG)?

Quality Circles (QCs) /Peer Review Groups (PRG) are small groups of 6 to 12 professionals working in general practice who meet at regular intervals to consider their standard practice.

QCs select the issues they want to deal with themselves and decide on their method of gathering data as well as deciding on a way of finding solutions to the problems. Participation and certain topics may be mandatory for accreditation or for reimbursement by health insurance companies.

The groups provide a social context for reflective practice and allow the dissemination of knowledge to the work practices of the participants. The method they choose usually comprises a combination of different types of intervention such as educational material which is discussed in a workshop-like atmosphere, contact with local knowledge experts, audit and feedback with or without outreach visits, facilitation and local consensus processes. Educational material and data support may be offered by different organisations.

The groups are led through the circle of quality by facilitators who try to keep the members focused on the issue without controlling them, respecting the contribution of each individual and taking into consideration the dynamics in QCs.



Projects

Quality Improvement in Primary Care: - Back to Basics

EQuIP believes there is a need for continuous and permanent information and training about Quality (Improvement) in Primary Care.

We noticed in the EQuIP Working Group on *Teaching Quality* that knowledge of basic principles was lacking in a lot of training institutes over Europe. However, many young GPs, who sometimes attend EQuIP conferences, are very interested in this topic: "What is Quality (Improvement) really about? How do you bring it into general practice in a feasible way?"

This was a call to action for EQuIP. How could we - as a network for quality improvement and patient safety - lower the threshold for GPs to use Quality Improvement techniques in daily work? How could we reach Primary Care workers, promote individual training materials and train the trainers to maintain the highest level of quality possible?

Contact the Experts - or Donate Your Own Expertise

If you or your organization is interested in supporting the Back to Basics Training Package by adding your knowledge and expertise, if you have interesting material to put on or link from our website, if you want to organise a training session in your country and you need experienced teachers, please do contact us.

Back to Basics Training Package

The EQuIP Executive Board presented in Fishingen in Switzerland to the entire EQuIP Network a plan to start a "Back to Basics Training Package" for interested GPs and Primary Care workers. We will bring together online information and training possibilities on the EQuIP website.

Read much more here.

In line with the Quality Framework, developed by EQuIP and partners in the EU Leonardo da Vinci project, we will offer workshops and training sessions in core competences at every open EQuIP and Wonca Europe conference.

In the EQuIP Conference in Fishingen in April 2015, we started off with a successful workshop on "PDCA for Dummies". In an interactive way every participant was asked to try to develop his/her own small project plan, and we learned a lot from each other on how to realize this successfully.

At the Wonca Europe Conference in Istanbul, we are having a workshop on "Quality in my practice. How do I start?". And at the EQuIP Spring Conference in Prague in April 2016 about patient safety, we will have a session on dealing with mistakes and critical incidents.

You are very welcome to come and participate in one of these workshops.

Online Resources

- **Development of a competency framework for quality improvement in family medicine: a qualitative study** (research article published in J Contin Educ Health Prof. 2012 Summer;32(3):174-80).
- **PDCA for Dummies** (PP slides from workshop held at the EQuIP Conference in Fishingen in April 2015).
- **Competencies and required educational needs on QI in FM** (Leonardo da Vinci project web-based self-assessment tool).
- **Vocational Education and Training in Quality Improvement Course** (Leonardo da Vinci project training course for FM teachers aimed at QI topics).
- **An interactive eLearning course on QI** (Leonardo da Vinci project e-learning course for GPs in Europe).
- **Quality in my practice: How do I start?** (PP slides from WONCA Istanbul 2015 workshop)
- **Patient Safety: What are we talking about?** (PP slides from WONCA Istanbul 2015 workshop)

Quality Improvement Webinars: Introduction to Quality Improvement

The IMPACT-ASCQI project - funded by the Health Foundation Spreading Improvement Programme - have produced four webinars on Quality Improvement for Healthcare Practitioners.

The webinars have been conceived by Niro Siriwardena and developed with support from Faye Wood at the University of Lincoln. The webinars are freely available and developed from a new book by Steve Gillam and Niro Siriwardena, *Quality Improvement in Primary Care: The essential guide* (Radcliffe Publishing, 2014).

This webinar discusses quality improvement tools and techniques, such as processes, how to improve them as well as measurement for improvement focusing on variation, its measurement and how to respond to it.

Webinars:

- **Introduction to Quality Improvement Learning (5:33)**
- **Leading and Managing Quality (15:47)**
- **Frameworks for Improvement (9:42)**
- **Quality Improvement Tools and Techniques (17:08)**
- **Improving Individual Practice (6:10)**

- **Lead the Next Health Movement: Become ChangeMakers Together**
- by Rick Botelho

- **The Institute for Healthcare Improvement (IHI) Open School**

The IHI Open School brings you essential training and tools in an online, educational community to help you and your team deliver excellent, safe care.



Projects

- The Interactive eGuidebook to Social Media in Family Medicine

The Interactive eGuidebook to Social Media in Family Medicine

Social media is here to stay. It will almost certainly become increasingly ubiquitous including amongst our patients, and like it or loathe it, we cannot afford to ignore it!

In delivering social media workshops over the last few years, it became patently obvious to VdGM and EQuIP that there are very few robust resources for family doctors that provide an overview of social media, how it should and can be used, the etiquette, the pros and cons, and the dos and don'ts.

Whilst various national associations including a number of European medical organisations have published social media guidelines for healthcare professionals, we are aware of few comprehensive family medicine resources that empower users with the necessary tools and understanding to become proficient and effective professional users of social media.

The aims of the joint VdGM-EQuIP venture is to create an ePDF, through using actual case studies in peer-to-peer social media usage, which can empower family doctors, GP trainees and medical students, enabling them to make good use of social media, and to develop professional social media strategies that support the maintenance of a healthy work / life balance.

Areas which are covered in the guide include social media myths, professional use of social media, social media trends and codes of conduct.

During the process of putting together what we believe to be a comprehensive resource, we had wonderful contributions from many individuals, both from inside and outside of VdGM. These strategic and experienced users of social media told us their stories; stories which we hope will inspire and motivate readers to experience social media for themselves, whilst in a very practical and tangible sense, highlight the nature and functionality of social media.

Around these stories we have built information and knowledge that will empower the reader with the necessary tools to enable skilful, proficient and effective usage of social media.

Finally, huge thanks are due to all authors of the chapters and all those who contributed their stories, to the multi-media designer Peter Lübben (visual & layout artist), who generously provided his expertise and time to craft the graphic content and layout, to Harris Lygidakis, Raluca Zoitanu, and Raquel Gomez-Bravo, and particularly to the main protagonists in this endeavour, Ulrik Bak Kirk (editor & vision/concept) and Luís Pinho-Costa.

Peter A. Sloane
President VdGM

*We invite you to download the ePDF "**The Vasco da Gama Movement Compass: Navigating the Sea of Social Media**" (PDF, 5MB) launched during the 20th WONCA Europe Conference in Istanbul at the end of the "Social Media: An Exercise in Time Wasting for Young People?" VdGM-EQuIP panel.*

*If you didn't get a chance to witness the panel in person in Istanbul, you can go to Dr. Mike Sevilla's **website** to read the #ewonca storify and watch the Periscope recording of the session.*

Thank you to all around the world who joined in and showed the power of Social Media!

Members

- Membership



At the 43rd EQuIP Assembly Meeting 5-6 April 2013 Ulrik Bak Kirk was welcomed as manager/administrator for EQuIP. The development of his role in EQuIP has evolved over recent meetings to manage the administration of EQuIP in between the twice yearly meetings, and also to develop the EQuIP website and update it for members and for public access.

Ulrik Kirk has also been involved as administrator, coordinating the work of the Working Group for Revision of the Constitution to accommodate individual and organisational membership. He has been working closely with president of EQuIP, Tina Eriksson, on proposals for fee structures, meeting structures for the twice yearly meetings, and on the EQuIP newsletter.

EQuIP organises a members' meeting each spring open to all EQuIP members. EQuIP organises a meeting for the EQuIP council members and the advisory board only each autumn. The EQuIP council meeting is organised by the national EQuIP council members of the host country in collaboration with the EQuIP secretariat.

Membership: *What's in it for me?*

EQuIP offers a platform of the knowledge base and for the discussion between GPs, researchers and organisations involved in quality and safety of family medicine. EQuIP is currently engaged in a number of projects in the field of quality and safety in Europe.

Members of EQuIP enjoy a number of benefits:

- You will become a member of the largest and best functioning GP based network on quality and safety in the world.
- You will get to know colleagues from European countries working in the field of quality and safety.
- You will have the possibility of taking part in conferences and meetings of EQuIP at a reduced price.
- You receive four yearly newsletters.



Application procedure and membership fees

You may apply for membership by using the application form on the EQuIP webpage. The EQuIP executive must accept each application for membership.

You are expected to pay for membership in advance. All EQuIP council members must also pay membership fees. Membership fees are defined by the EQuIP executive board.

Please be aware that you are not an EQuIP member unless this process has been completed and cannot participate in any formal proceedings. You will also forfeit your membership if you do not pay your subscription in the appropriate calendar year.

We wish you great success with your application, and that you will enjoy your membership.



Members

- Individual membership

Who can apply?

General practitioners (practicing or academic) may become individual EQuIP members. Medical doctors and other health professionals (academics, staff members and patients)) involved in quality development in general practice may be extraordinary members.

Individual and extraordinary EQuIP members must reside in one of the European WONCA membership countries. However, the EQuIP executive may decide to grant membership to applicants residing in countries outside Europe and also to applicants residing in countries that are not WONCA Europe members.

The EQuIP executive board must accept each individual and extraordinary membership.

What's in it for me?

EQuIP offers a platform of the knowledge base and for the discussion between GPs, researchers and organisations involved in quality and safety of family medicine. EQuIP is currently engaged in a number of projects in the field of quality and safety in Europe.

Members of EQuIP enjoy a number of benefits:

- You will become a member of the largest and best functioning GP based network on quality and safety in the world.
- You will get to know colleagues from European countries working in the field of quality and safety.
- You will have the possibility of taking part in conferences and meetings of EQuIP at a reduced price.
- You receive four yearly newsletters.

The very first individual members of EQuIP

Dr. Ayşe Çaylan from Turkey was welcomed as the first individual member of EQuIP as she joined EQuIP during the 42nd Assembly Meeting of EQuIP in November 2012 in Erzurum, when EQuIP was opened to individual membership and to organisational membership.

See why Ayşe Çaylan from Turkey became the very first individual member of EQuIP [here](#)



Application Procedure and Membership fees

You may apply for membership by using the application form on the EQuIP webpage. The EQuIP executive must accept each application for membership.

You are expected to pay for membership in advance. All EQuIP council members must also pay membership fees. Membership fees are defined by the EQuIP executive board.

Please be aware that you are not an EQuIP member unless this process has been completed and cannot participate in any formal proceedings. You will also forfeit your membership if you do not pay your subscription in the appropriate calendar year.

EQuIP organises a members' meeting each spring open to all EQuIP members.

We wish you great success with your application, and that you will enjoy your membership.

Tina Eriksson
Andrée Rochfort
José Miguel Bueno Ortiz



Members

- Organisational membership

Who can become and organisational member?

Institutional members can be scientific societies of GPs and other organisations and institutions involved in quality development and patient safety in GP/FM or primary care.

What's in it for me?

EQuIP offers a platform of the knowledge base and for the discussion between GPs, researchers and organisations involved in quality and safety of family medicine. EQuIP is currently engaged in a number of projects in the field of quality and safety in Europe.

Organisational members of EQuIP enjoy a number of benefits:

- You will become a member of the largest and best functioning GP based network on quality and safety in the world.
- You will get to know colleagues from European countries working in the field of quality and safety; institutional representatives have a seat in the EQuIP advisory board.
- You will have the possibility of taking part in conferences and meetings of EQuIP at a reduced price.
- You receive four yearly newsletters.



The very first organisational member of EQuIP

The Finnish Medical Society Duodecim is a scientific society with almost 90% of the Finnish doctors and medical students, altogether over 20.000, as members.

Duodecim Medical Publications Ltd. carries out the Society's mission to publish medical information.

The company is the leading Finnish publisher in the field of medicine providing the latest knowledge for health care professionals as well as for the general public interested in health care issues.

EQuIP is very proud and happy to pronounce **Duodecim Medical Publications Ltd.** as its very first organisational member.

Application Procedure and Membership fees

You may apply for membership by using the application form on the EQuIP webpage. The EQuIP executive must accept each application for institutional membership.

You are expected to pay for membership in advance. Institutional membership fees are defined by the EQuIP executive board and are tri-annual.

EQuIP organises a meeting for the EQuIP council members and the advisory board only each autumn.

The EQuIP council meeting is organised by the national EQuIP council members of the host country in collaboration with the EQuIP secretariat.

Tina Eriksson

Andrée Rochfort

José Miguel Bueno Ortiz





Members

- application procedure 1-2-3

Step 1:

Apply for EQuIP membership

EQuIP has opened for memberships, and you may apply for membership by using the application form

The EQuIP executive must accept each application for membership.

Step 2:

Pay in advance for the EQuIP membership

If the EQuIP executive accepts an applicant, a letter of confirmation with bank account informations etc. will be sent to whom it may concern.

You are expected to pay for membership in advance. All EQuIP council members must also pay membership fees. Membership fees are defined by the EQuIP executive board.

Step 3:

Receive official statement on the EQuIP membership

Once the accepted applicant has paid the membership fee, (s)he is officially an EQuIP member, and s(he) will receive an official document stating so.

Please be aware that you are not an EQuIP member unless this process has been completed and cannot participate in any formal proceedings. You will also forfeit your membership if you do not pay your subscription in the appropriate calendar year.

We wish you great success with your application, and that you will enjoy your membership.

Members

- Membership fees



EQuIP Membership Fees

| Fees | Membership Type | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------|
| | INDIVIDUAL MEMBERSHIP | INSTITUTIONAL MEMBERSHIP <i>1 delegate/meeting</i> |
| <u>Institutional membership fees – 3 years</u> | | |
| Group 1: Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Iceland, Ireland, Israel, Italy, Luxembourg, Netherlands, Norway, Slovenia, Spain, Sweden, Switzerland, United Kingdom | -- | € 500 (Group 1) |
| Group 2: Belarus, Bulgaria, Croatia, Cyprus, Estonia, Greece, Hungary, Latvia, Lithuania, Malta, Poland, Portugal, Slovak Republic, Turkey, | -- | € 400 (Group 2) |
| Group 3: Albania, Bosnia-Herzegovina, Georgia, Macedonia, Moldova, Montenegro, Romania, Russia, Serbia, Ukraine | -- | € 300 (Group 3) |
| Group 4: Students, Vocational Trainees and Members of the Vasco da Gama Movement | -- | -- (Group 4) |
| | € 60 (Group 1) | -- |
| | € 50 (Group 2) | -- |
| <u>Individual and/or extraordinary membership fees - 1 year</u> | € 40 (Group 3) | -- |
| | € 30 (Group 4) | -- |

Events



EQuIP Conferences

EQuIP has so far organised Open Invitational Conferences in order to offer a platform of exchange of expertise for researchers and policy makers in all European countries, which are involved in quality improvement in Family Medicine.

1st EQuIP Invitational Conference: Quality Improvement in Family Practice: New Developments. Zürich, Switzerland, 1997.

1st European Network Organisations Open Conference WON-CA'99. Palma de Mallorca, Spain, 1999

2nd EQuIP Invitational Conference: Quality in Family Practice. From ideas to implementation. Lisbon, Portugal 2002

3rd EQuIP Invitational Conference: Quality improvement in General Practice/Family Medicine. Is it still a hobby? Heidelberg, Germany, 2003

4th EQuIP Invitational Conference: From Theory to Practice. Brussels, Belgium, 2004

5th EQuIP Invitational Conference: The impact of Health System Reform on Quality in GP/FM. Barcelona, Spain, 2006.

6th EQuIP Invitational Conference: Copenhagen, Denmark, April 2011 Value for money in general practice - management and public trust. Copenhagen, Denmark, 2011.

EQuIP Assembly Meetings

The 40th EQuIP assembly meeting in Zagreb 3-5 November 2011 was truly special in various ways. All the way through the main focus and theme of the meeting was practice accreditation – from the national updates, the interaction with the Croatian primary care organizations, the open part of the meeting and the group work afterwards.

The open part of the meeting was a new initiative, and it proved very valuable with interesting presentations on the accreditation systems in the UK, the Netherlands, Germany, Estonia and Croatia.

This meeting was also the first one with audio and video recordings (pod- and webcasting).

Read much more about these thematic assembly meetings in this interactive PDF.

Now, EQuIP's new and open conferences aim at presenting cutting edge knowledge on quality of primary care/family medicine to a selected audience of the administrators and politicians involved in the European primary sectors.

Tina Eriksson

Events: The years 2015/2016

- WONCA Europe Conference, 15-18 June 2016, Copenhagen, Denmark.



WONCA Europe Conference

15 -18 June 2016, Copenhagen, Denmark

Preliminary programme overview

We are delighted to present the preliminary programme overview. It includes high-quality sessions, including '1-slide-5-minutes' presentation, and posters, which will be displayed in the public areas of Bella Center on Thursday 16 June and Friday 17 June.

[Navigate through the program here](#)

The Safe EQuIP Track of Quality

Thursday 16 June

10:00-11:15 EQuIP Workshop

Measuring diabetic care: What are good indicators?

Piet Vanden Bussche (BE) & Johan Wens (BE)

Venue: Bella Sky, Meeting Room 173

Working Group: Wonca Europe Network Collaboration.

11:45-13:00 IGRIMUP Symposium No. 2: Interventions

The PRIMA-eDS electronic decision support system – a multinational European project

Graziano Onder (IT) & Ilkka Kunnamo (FI)

Venue: Bella Sky, Meeting Room 181

Working Group: eHealth.

11:45-13:00 EQuIP Workshop

Health inequalities related to socio-economic status: How primary care may reduce them?

Hector Falcoff (FR), Piet Vanden Bussche (BE) & Sara Willems (BE)

Venue: Bella Sky, Meeting Room 173

Working Group: Equity.

11:45-13:00 Oral presentation (Presentation time: 12:35-12:45)

How can we help GPs cope better with the impact of adverse events in general practice (The Second Victim Syndrome)?

Andrée Rochfort (IE)

Venue: Meeting Room 17, OP09.6

Working Group: Professional Health.

11:45-13:00 EQuIP Workshop

Quality improvement 2.0: Online Journal Club meets Family Medicine Change Makers' Tweetchat

Andre Nguyen Van Nhieu (FR), Ulrik Kirk (DK), Patrick Reichel (AT) & Claire Marie Thomas (UK)

Venue: Hall A, Meeting Room 6+7

Working Groups: Social Media & Teaching Quality.

11:45-13:00 E-Poster Session (Presentation time: 12:10-12:15)

The development of quality circles for quality improvement in Europe from 2003 to 2015

Adrian Rohrbasser (CH) & Ulrik Bak Kirk (DK)

Venue: E-Poster Station 2, EP05.06

Working Group: Quality Circles.

15:00-16:00 E-Poster Session (Presentation time: 15:40-15:45)

The development of quality circles for quality improvement in Europe: a qualitative study

Adrian Rohrbasser (CH) & Ulrik Bak Kirk (DK)

Venue: E-Poster Station 2, EP08.09

Working Group: Quality Circles.

16:15-17:15 EQuIP Workshop

Overdiagnosis and patient harm or how unsafe is striving for certainty?

Adrian Rohrbasser (CH) & Ulrik Bak Kirk (DK)

Venue: Bella Sky, Meeting Room 1818

Working Group: Quality Circles.

16:15-17:15 Workshop

Barriers and facilitators to implementation of clinical practice guidelines

Esra Meltem Koc (TR) & Zekeriya Aktürk (TR)

Venue: Hall B, Meeting Room 3

Working Group: Tools and Methods.

Friday 17 June

10:00-17:00 Poster Session II

A. **EQuIP Summer Schools**

Zalika Klemenc-Ketis (SL), Andre Nguyen Van Nhieu (FR)

& Ulrik Kirk (DK)

Venue: Poster Hall no. PB-183.

Working Group: Teaching Quality.

B. **French EQuIP Summer Schools 2012-2015**

Andre Nguyen Van Nhieu (FR), Isabelle Dupie (FR), Hector Falcoff (FR),

Madeleine Favre (FR) & Ulrik Kirk (DK)

Venue: Poster Hall no. PB-183.

Working Group: Teaching Quality.

C. **The Interactive ePDF to Social Media in Family Medicine**

Ulrik Kirk (DK) & VdGM

Venue: Poster Hall no. PB-184.

Working Group: Social Media.

D. **Exploring why quality circles work in primary health care: a realist review**

Adrian Rohrbasser (CH)

Venue: Poster Hall no. PB-327.

Working Group: Quality Circles.

10:00-11:15 EQuIP Workshop

What do patients expect from eHealth? – let the patients tell us!

Ilkka Kunnamo (FI), Ynse de Boer (DK) & Piet Vanden Bussche (BE)

Venue: Hall A, Meeting Room 20

Working Groups: eHealth & Patient Empowerment.

10:00-11:15 Workshop

Doctor Avatar life lessons for health professionals: a workshop exploring failure to appraise social media outcomes

Peter Sloane (IE), Zelal Akbayin (TR) & Ulrik Bak Kirk (DK)

Venue: Bella Sky, Meeting Room 173

Working Group: Social Media.

11:45-13:00 EQuIP Workshop

The development of quality circles for quality improvement in Europe: a mixed methods study involving 26 European countries

Adrian Rohrbasser (CH), & Ulrik Bak Kirk (DK)

Venue: Hall B, Meeting Room 6

Working Group: Quality Circles.

11:45-13:00 EQuIP-VdGM Workshop

The (online) patient will see you now, Doc: primary health care for all through telehealth

Luis Pinho-Costa (PT), Peter A Sloane (IE), Charilaos Lygidakis (IT), Raluca Zoitanu (RO), Raquel Gomez Bravo (ES), Zelal Akbayin (TR) & Ulrik Bak Kirk (DK)

Venue: Bella Sky, Meeting Room 173

Working Group: Social Media.

11:45-13:00 E-Poster Session (Presentation time: 12:25-12:30)

Practice support for patients with chronic conditions

Ulrik Bak Kirk (DK), Jochen Gensichen (D) & Andree Rochfort (IE)

Venue: E-poster Station 3.

Working Group: Patient Empowerment.

16:15-17:15 VdGM, EGPRN, EQuIP, EURIPA, EUROPREV, EURACT Workshop

A future vision for development of and enhanced collaboration between the Networks of WONCA Europe

Peter Sloane (IE), Mehmet Ungan (TR), Piet Vanden Bussche (BE), Tanja Pekez-Pavlisko (HR), Mateja Bulc (SI) & Jo Buchanan (UK)

Venue: Hall A, Auditorium 15

Working Group: Wonca Europe Network Collaboration.

Saturday 18 June

10:45-12:00 EQuIP Workshop

Being a good-enough GP for non-heterosexual people (LGBT- Lesbian, Gay, Bisexual and Trans people)

Janecke Thesen (NO), Gunnar F Olsen (NO) & Mari Bjørkman (NO)

Venue: Hall A, Auditorium 15

Working Group: Equity.



Events: The years 2015/2016

- 49th EQuIP Meeting in Prague, 22-23 April 2016

Friday 22 April

9:00-09:30 Welcome and Opening Session

- [PP slides \(Welcome, 5MB\)](#)

09:30-10:30 Keynote: David Marx:
Patient Safety Sustainability - Ever Climbing, Never Rest!

- [PP slides \(Marx, 3MB\)](#)

10:30-11:00 Coffee and Tea

11:00-12:30 Workshops & Oral Presentations

Workshops

What is Patients safety in Primary Care?
(Ynse de Boer, Denmark)

- [PP Slides \(de Boer, 2MB\)](#)

EQuIP's Patient Safety Culture Survey
(Isabelle Dupie, France)

- [PP slides \(Dupie and Van Nhieu, 2MB\)](#)

Oral Presentations (Chair: Jan Kovar)

Don't assume that your patient is straight
(Janecke Thesen and Gunnar F Olsen, Norway)

- [PP slides \(Thesen and Olsen, 1MB\)](#)

Inappropriate medication in nursing home residents – How to improve medication safety?
(Guido Schmiemann, Germany)

- [PP slides \(Schmiemann, 2MB\)](#)

How do healthcare professionals assess patient safety culture in family medicine in Croatia?
(Orlic Neretljak, Croatia)

- [PP slides \(Neretljak, 1MB\)](#)

Quality improvement in antibiotic prescription in uncomplicated Lower Urinary Tract Infections
(Cátia Barão, Portugal)

- [PP slides \(Barão, 1MB\)](#)

Patient safety for patients with chronic diseases
(Eva Arvidsson, Sweden)

- [PP slides \(Arvidsson, 1MB\)](#)

12:30-14:00 Lunch

14:00-15:00 Keynote: Maria Pilar Astier-Pena:
Are Spanish Healthcare professionals aware of patient safety? Building a safer primary care.

- [PP slides \(Atier-Pena, 33MB, big and slow download\)](#)

15:00-16:30 Workshops & Oral Presentations

Workshops

The aftermath of adverse events (AE) in primary care: Interventions to reduce its impact on healthcare teams
(Maria Pilar Astier-Pena, Spain)

- [PP slides \(Atier-Pena, 21MB, big and slow download\)](#)

Assessment by GPs of a GPs capacity to deliver healthcare which is safe for them and their patients
(Andree Rochfort, Ireland and Zlata Ožvačić Adžić, Croatia)

- [PP slides \(Rochfort and Adžić, 1MB\)](#)

Oral Presentations (Chair: Dijana Ramić Severinac)

To report or not to report: That is the question! Using the theory of planned behavior to explain healthcare professionals' use of CIRS in primary care
(Anna Bauer, Germany)

- [PP slides \(Bauer, 1MB\)](#)

Feeling safe in primary care: preliminary findings from a longitudinal, ethnographic study (MAXIMUM) of older people with multimorbidity (Rebecca Hays, United Kingdom)

- [PP slides \(Hays, 1MB\)](#)

The German Critical Incident Reporting System for Primary Care: 12 years of content and perspectives
(Martin Beyer, Germany)

- [PP slides \(Beyer, 2MB\)](#)

PRisM study: Assessment of a multifaceted program on teamwork and risk management in primary care
(Marc Chaneliere, France)

- [PP slides \(Chaneliere, 1MB\)](#)

Strengthening capacities to improve quality and patient safety in primary care. Experience from the Czech Republic
(Bohumil Seifert, Czech Republic)

- [PP slides \(Seifert, 1MB\)](#)

Patient safety in primary care in Hungary
(László Róbert Kolozsvári, Hungary)

- [PP slides \(Kolozsvári, 3MB\)](#)

16:30-17:00 Coffee and Tea

17:00-18:00 Panel Discussion: *How to engage our colleagues (doctors and staff)?*

- **Conference Dinner** -

Saturday 23 April

09:00-10:30 Keynote: Aneez Ismail:
Patient Safety in Primary Care in the past, now, and in the future

- [PP slides \(Esmail, 1MB\)](#)

10:00-11:30 Workshops & Oral Presentations

Workshops

How to deal with unintended events?
(Piet vanden Bussche, Belgium)

- [PP slides \(Vanden Bussche, 6MB\)](#)

How to measure patient safety?
(Aneez Ismail, United Kingdom & Ynse de Boer, Denmark)

- [Please consult Ismail's PP slides above](#)

11:30-12:00 Coffee and Tea

12:00-13:00 Concluding remarks: *Where to go next with patient safety for primary care?*
(Piet vanden Bussche, Belgium & Job Metsemakers, the Netherlands, Isabelle Dupie, France & Ynse de Boer, Denmark)

Conference Abstract Book and Programme Overview

Link to [Conference Abstract Book](#)





Events: The years 2015/2016

- WONCA Europe Istanbul Conference, EQuIP Involvement and presentations



October 23, 09:00-16:45

09:00-10:15 WORKSHOP - MARMARA ROOM

Quality Circles at a Glance –

Use of Antibiotics in General Practice

Peter A Sloane, Christina Svanholm, Ulrik Bak Kirk,
Adrian Rohrbasser

[PDF](#)

09:00-10:15 SYMPOSIUM - SADABAT HALL

*Role of European general practitioners in
communicating colorectal cancer screening*

Bohumil Seifert, Charles Helsper, Martin Rasmussen, Greg Rubin

14:00-15:15 PANEL - HALIC AUDITORIUM

*Social Media: An Exercise in Time Wasting
for Young People?*

Peter A Sloane, Raluca Zoitanu, Harris Lygidakis, Luis De Pinho
Costa, Ulrik Bak Kirk, Raquel Gomez Bravo

[Link](#)

15:30-16:45 GRAND SESSION - FENER/TOPHANE HALL

Wonca Networks: Contribution to Family Medicine

Moderator: Carl Steylaerts

Speakers: Euract Ruth Kalda, Equip Piet Vanden Bussche,
Euripa Tanja Pekez Pavlisko, Europrev Mateja Bulc

15:30-16:45 GRAND SESSION - LALE HALL

Patient centeredness and community centeredness:

How to deal with diversity

Moderator: Andree Rochfort

Speakers: Thomas Freeman, Tina Eriksson

October 24, 09:00-12:30

09:00-10:15 WORKSHOP - SADABAT HALL

Smarter Planet Smarter Health Care, e-Health

Zelal Akbayin, Charilaos Lygidakis, Ulrik Bak Kirk,
Raquel Gomez Bravo, Peter A. Sloane

[PDF](#)

09:00-10:15 WORKSHOP - CIBALI ROOM 2

Can we improve our low back pain tackling?

José Miguel Bueno Ortiz et al.

09:00-10:15 WORKSHOP - HASKOY ROOM

Quality Indicators for Family Practice

Zekeriya Aktürk, Ebru Yılmaz

11:15-12:30 WORKSHOP - MARMARA ROOM

Health inequalities related to socio-economic status:

How primary care may reduce them

Hector Falcoff, Sara Willems,
Piet Vande Bussche, Isabelle Dupie

[PDF](#)

October 24, 14:00-18:15

14:00-15:15 WORKSHOP - BALAT ROOM

*How does coding support the key tasks of the GP and improve
patient care?*

Ilkka Kunnamo, Karen Kinder, Ferdinando Petrazzuoli,
Fernando Alonso Lopez, Angel Ruiz Téllez

15:30-16:45 GRAND SESSION - HALIC AUDITORIUM

WONCA Europe Anniversary project

EQuIP

[Link](#)

17:00-18:15 WORKSHOP - 676 KASIMPASA ROOM 5

*Health inequalities related to socio-economic status:
how primary care may reduce them*

Hector Falcoff, Sara Willems, Piet Vande Bussche,
Isabelle Dupie

[PDF](#)

17:00-18:15 WORKSHOP - 1580 BALAT ROOM

Patient safety in primary care: get started

Isabelle Dupie, Andree Rochfort

[PDF](#)

17:00-18:15 WORKSHOP - 306 SUTLUCE ROOM 1

Quality in my practice. How do I start?

Piet Vanden Bussche, Andrée Rochefort

[PDF](#)

Events: The years 2015/2016

- 47th EQuiP Meeting in Fischingen (Switzerland) 23-25 April 2015



The 47th EQuiP Assembly Meeting will be held in Fischingen in Switzerland from 23-25 April 2015. The theme will be Knowledge Translation in Primary Health Care: Focus on Quality Circles.

Ongoing quality improvement is fundamental to modern family medicine; it is about providing personcentred, safe and effective care, and efficient use of current resources in a fast-changing environment. There are diverse methods, tools and approaches to quality improvement.

Quality Improvement (QI) is an organised and data-guided activity which brings about positive change in the delivery of care; sharing with Knowledge Translation (KT) the desire to increase the prospect of favourable patient outcomes. Whereas QI affects local problems like perceived inefficient, harmful or badly-timed health care, KT deals with generalizable concepts to increase and disseminate knowledge.

In other words, KT is the synthesis, dissemination and exchange of knowledge to provide effective health care, and QI is the process at the local or organisational level where quality issues arise..

education are insufficient for maintaining an adequate level throughout a professional career. Therefore, continuous development requires continuous medical education (CME).

CME is a form of education where physicians acquire new knowledge from research and publications. Incorporation of new medical knowledge into the professional role that allows delivery of good-quality patient care is called continuous professional development (CPD). CME and CPD are necessary prerequisites for both QI and KT.

The emphasis of this conference is on Quality Circles (QCs), small groups of 6 to 12 professionals from the same background who meet at regular intervals to consider their standard practice. The focus of discussion is usually a critical evaluation of a key aspect within the multifaceted nature of quality in health care.

QCs are commonly used in primary health care in Europe to consider and improve standard practice over time. They represent a complex social intervention that occurs within a fast-changing system. Numerous controlled trials, reviews and studies have shown small but unpredictable positive effects on behaviour change. Although QCs seem to be effective, stakeholders have difficulties understanding how the results are achieved and in generalising them with confidence.

The objective of the conference is to document the range of components that characterise QCs, their underlying mechanisms and the local context in which they are conducted.

The patterns in which components act both independently and inter-dependently within QCs have to be investigated and mapped in relation to variations in these underlying mechanisms and the local context. A survey on QCs in European countries will be repeated.

The aim is to identify optimal conditions for success which may then inform participants as they manage and maintain current QCs and plan future ones to improve clinical practice. Basically, it is about unpacking the black box to see what variations of the programme work for whom and under what contextual features by looking at numerous projects that have been undertaken.

Successful projects may show what works, whereas unsuccessful projects will show what does not work. Oral presentation of the projects will be followed by discussions in small groups. Workshops on various aspects will give insight into different issues QCs work with.

Adrian Rohrbasser



Events: The years 2015/2016

- 47th EQuiP Meeting in Fischingen (Switzerland) 23-25 April 2015

Friday 24 April 2015

08.15-08.30 Welcome!
(François Héritier, president of the Swiss Association of Family Medicine)

08.30-09.15 Knowledge Translation and Implementation Science
Venue: Library
(Sharon Mickan, Centre for Evidence Based Medicine, University of Oxford)

[Profile](#) , [PDF](#)

09.15-10.00 Evaluation in Primary Health Care

Venue: Library
(Janet Harris, School of Health and Related Research (ScHARR), University of Sheffield)

[Profile](#) , [PDF](#)

10.15-10.30 Discussion

Venue: Library
(EQuiP)

10.30-11.00 Coffee and tea

11.00-12.30

a) What works when and under what circumstances for how long in a QC?

Venue: Seminar Room
(Adrian Rohrbasser, Sharon Mickan, Janet Harris)

b) Practice-based Small Group Learning in Scotland

Venue: Group Room 1
(Peter McCallister)

[PDF](#)

c) Experiences with data-based QCs in Baden-Wuerttemberg, Germany: What works and what perspectives for the future?

Venue: Group Room 2
(Petra Kaufmann-Kolle, AQUA Institute, Göttingen)

d) Quality Circle Technique (Moderated)

Venue: Group Room 3
Guido Schmiemann, B. Seifert & J. Kovar
Andre Nguyen

12.30-14.00 Lunch

14.00-15.30

a) Evaluation of Quality Circles:
The documentary method

Venue: Seminar Room
(Marianne Jossen)

[PDF](#)

b) Illustration of Irish QC

Venue: Group Room 1
(Henry Finnegan)

c) Implementation of Guidelines:
Dutch and Swiss Quality Circles

Venue: Group Room 2
(Bas Spelberg, Felix Huber)

d) APO: The Next Audit Project?

Venue: Group Room 3
(Anders Munck & Jesper Lykkegaard)

15.30-16.00 Coffee and tea

16.00-16.30 Systematic Review on Quality Circles:
Do they actually work and how?

Venue: Seminar Room
(Adrian Rohrbasser)

[PDF](#)

16.30-18.00 Accreditation and Quality Circles:

European Panel Session
Moderator: Sharon Mickan

Venue: Seminar Room
(EQuiP)

Improving Quality in Primary Care – The role of the CQC in England's health service
(Alastair Blake).

[PDF](#) (UK)

[PDF](#) (Moderator)

18.30-20.00 Dinner

Friday 25 April 2015

08.30-09.00 Quality Circles: Quality Improvement in ambulatory Care in Germany

Venue: Library
Ingrid Quasdorf

[PDF](#)

09.00-09.30 Dutch Quality Circles

Venue: Library
(Bas Spelberg)

[PDF](#)

09.30-10.00 CME Small Group Learning in Ireland and influence on medical practice

Venue: Library
Henry Finnegan

10.00-10.30 Coffee and tea

10.30-12.00

a) What works when and under what circumstances for how long in a QC?

Venue: Seminar Room
Adrian Rohrbasser, Sharon Mickan, Janet Harris

b) Quality Circles in Denmark

Venue: Group Room 1
(Christina Svanholm, Ulrik Bak Kirk)

c) QiSA-Indicators for Coronary Heart Disease (CHD): How to work with in Quality Circles?

Venue: Group Room 2
(Edith Andres)

[PDF](#)

d) PDCA Cycle

Venue: Group Room 3
(Piet Vanden Bussche, Zalika Klemenc Ketis)

[PDF](#)

12.15-12.30 Results of EQuiP Survey:
Quality Circles Across Europe
(Adrian Rohrbasser, Ulrik Bak Kirk)

12.30-14.00 Concluding Remarks and Farewells
Check out and Lunch
EQuiP



Events: The years 2013/2014

- 46th EQuIP Meeting in Tallinn (Estonia) 16-18 October 2014

Autumn 2014, Tallinn, Estonia

Ladies and gentlemen,

It is our honour to invite you to the 46th EQuIP Assembly Meeting being held in Tallinn in Estonia from 16-18 October 2014, and to the conference with the title **Digital prescribing in primary care: A tool for prompt service or a challenge to quality evaluation?** taking place as part thereof.

Digital prescriptions are one of the tools we as Estonian doctors use in our everyday work to prescribe medicines to our patients. They came into our lives in 2010, accompanied by debates, complaints and problems in the first few months of their use.

Today we are accustomed to prescribing digitally – it represents a fast and accurate way of issuing medications to patients and allows doctors to monitor medicines that have been prescribed and purchased. But what else has it changed? What is the European experience of digital prescribing?

This is an issue we want to talk about and share our views on.

We hope this autumn event in Tallinn will be a memorable and inspiring one. See you at the conference!

Yours,

Katrin Martinson & Le Vallikivi

On behalf of the board of the Estonian Society of Family Doctors





Events: the years of 2013/2014

- 45th Assembly Meeting in Ljubljana: Interprofessional Management of Patients in Family Medicine



The 45th EQuIP Assembly Meeting was held in May 8-10th 2014 in Ljubljana, Slovenia. The theme was Interprofessional Management of Patients in Family Medicine.

This correlates well with the three competences of family physician:

- To use a comprehensive approach
- To be oriented towards community and to utilise a holistic model of care.
- This approach encompasses managing both acute and chronic health problems, applying health promotion and disease prevention, managing and coordinating health promotion, prevention, cure and care, and reconcile the health needs of individual patients and the health needs of the community.

To accomplish the above mentioned tasks, there is a need for team work in family practices, and between family practices and the community, which includes the transfer of some tasks and performance to other member of family physicians' team and involving the multidisciplinary team in the community, for example, nurse practitioners managing chronic patients and performing preventive activities, clinical pharmacists managing the problem of polypharmacy, patient groups, voluntary agencies and team members promoting and managing patient self-management of their illnesses, social workers managing the social problems of patients etc.

Interprofessional management of patients in family medicine therefore offers quality management of patients and even more potential for quality improvement.

[See photos from the EQuIP Meeting here:](#)

Zalika Klemenc Ketis



Events: the years of 2013/2014

- 45th Assembly Meeting in Ljubljana: Interprofessional Management of Patients in Family Medicine

Friday 09 May 2014

09.00-10.30 Report on projects and introduction to groupwork:

- Teaching quality (Zalika), 10 minutes.

- PECC-WE (Andree & Jochen), 45 minutes. A tool on self-management support "motivational interviewing" will be presented. The colleagues will be invited to support an evaluation of the tool in their countries.

- Newsletters (Ulrik), 10 min.

- Summer Schools.

- WONCA 2014 Lissbon preparations.

- Other projects?
(EQuIP)

10.30-11.00 Coffee and tea

11.00-12.30 Group work
EQuIP

12.30-14.00 Lunch

14.00-18.00 International conference on interprofessional management of patients in family practice
(Moderator Zalika Klemenc-Ketiš)

14.00-14.20 Team work – the future of primary care: evidences of success and expected challenges
(Diederik Aarendonk, Coordinator European Forum for Primary Care)(EFPC)

[PP \(PDF\)](#)

14.20-14.40 Recent developments in pharmaceutical care: Europe and Hungary
(Prof. Balázs Hankó, Vice-president of EuroPharm Forum)

[PP \(PDF\)](#)

14.40-15.00 Project regarding the cooperation between physicians and pharmacist relating to communication in serious adverse drug events that are detected in pharmacies
(Guido Schmiemann, German EQuIP member)

[PP \(PDF\)](#)

15.00-15.20 Management of chronic patients in Sweden
(Eva Arvidsson, Swedish EQuIP member)

[PP \(PDF\)](#)

15.45-16.15 Coffee and tea

16.15-16.35 Interprofessional collaboration in family practice in Slovenia
(Prof. Janko Kersnik)

[PP \(PDF\)](#)

16.35-16.55 Patients' attitudes towards nurse practitioners in family practice in Slovenia
(Metka Žitnik-Šircelj, graduated nurse)

[PP \(PDF\)](#)

16.55-17.15 Patients' evaluations of multidisciplinary care
(Assist. prof. Zalika Klemenc-Ketiš)

[PP \(PDF\)](#)

Sunday 10 May 2014

09.00-10.30 3 parallel workshops:

- Diederik Aarendonck

- Balázs Hankó and Guido Schmiemann on collaboration with pharmacies

- Eva Arvidsson

(EQuIP)

10.30-11.00 Workshops present results and plans
(EQuIP)

11.00-12.00 Sum up & to dos
(EQuIP, Tina Eriksson)

12.00-13.00 Lunch

Videos

- Diederik Aarendonck:

[Team work -- the future of primary care](#)

- Balázs Hankó:

[Recent developments in pharmaceutical care](#)

- Guido Schmiemann:

[Communication in serious adverse drug events](#)

- Eva Arvidsson:

[Management of chronic patients in Sweden](#)

- [Panel Discussion](#)

- Janko Kersnik:

[Interprofessional collaboration in family practice in Slovenia](#)

- Metka Žitnik Šircelj:

[Patients' attitudes towards nurse practitioners in family practice in Slovenia](#)

- Zalika Klemenc Ketiš:

[Patients' evaluations of multidisciplinary care](#)

Events: the years of 2013/2014

- 44th Assembly Meeting in Bologna: Patient Empowerment



The intention behind this EQuIP meeting was to link it to an International Congress organized by Emilia Romagna and Tuscany Regions: Primary Care Experiences: Innovation 2.0 in Territorial Care.

The relevant themes were:

- Political and institutional approach.
- Taking care of multi-morbidity.
- Tools to develop individual and community empowerments.
- Professional integration and review of new competences.

However, it turned out to be an EQuIP event only about: Chronic Disease management in general practice/ family practice?

Angelo Campanini & Gianluigi Passerini





Events: the years of 2013/2014

- 44th Assembly Meeting in Bologna: Patient Empowerment

Friday 15 November 2013

08.30-09.45 *Dealing with chronic diseases and multimorbidity - Quality and spending review in Primary Care in Emilia Romagna, Italy.*

Discussion on resources limitation and quality of care in Europe.

(Gigi, Angelo)

[PP slides \(PDF\)](#) [\(PP slides \(PDF\)\)](#)

09.45-11.00 Projects:
Equity: Status?

LdV: Outputs and the future of teaching quality?

EQuIP newsletter: Visions and interaction - Online journal clubs

(Hector, Tomasz, Ulrik)

11.00-11.30 *Coffee and tea*

11.30-12.30 *What can we offer our members?
How can we make sure organisational members are heard and how to involve them?*

(Ilkka presents visions for joint EQuIP- Duodecim projects.
Tina, Ilkka)

[PP slides \(PDF\)](#)

12.30-13.30 *Workshop on Quality Circles*
(Adrian)

[PP slides \(PDF\)](#)

13.30-14.30 *Lunch in the Roncati Hospital refectory*

14.30-15.15 *Patient empowerment: Concepts*
(Ernesto Mola)

15.15-17.00 *PECC-WE workshop*
(Andree, Jochen, Ernesto, Ilkka)

17.30-18.00 *A comprehensive approach to reduce hospitalization in chronic heart failure (CHF) patients: A pilot project in Parma, Emilia-Romagna Region, Italy.*

(Stefano Del Canale)

[PP slides \(PDF\)](#)

Saturday 16 November 2013

09.30-10.30 *Next EQuIP meetings and Lisbon 2014*
(Tina, José, Alex)

10.30-12.00 *WONCA World Working Party project workshop:
Tools, methods and international expert panels*
(Ulrik)

13.00-14.00 *Light lunch*

14.00-14.30 *Lecture on the birth of medicine in Bologna*
(Alessandro Ricciardi)

14.30-17.00 *Guided visit to S. Maria della Vita and S. Maria dellamorte hospitals; the Basilica of San Petronio; Archiginnasio and Anatomic Theater*
(Alessandro Ruggeri)

Videos:

[Gianluigi Passerini](#) - Chronic diseases management, multimorbidity, resources limitation and quality in Italian General practice / Family Medicine

[Angelo Campanini](#) - Primary Care in Emilia Romagna

[Ilkka Kunnamo](#) - Visions for EQuIP Duodecim projects

[Adrian Rohrbasser part 1 and part 2](#) - Quality Circles (Continuing Medical Education, CME) and Quality Improvement

[Ernesto Mola](#) - Patient Empowerment Concepts

[Andrée Rochfort](#) - The Patient Empowerment in Chronic Conditions project, EQuIP / Wonca Europe (PECC-WE)

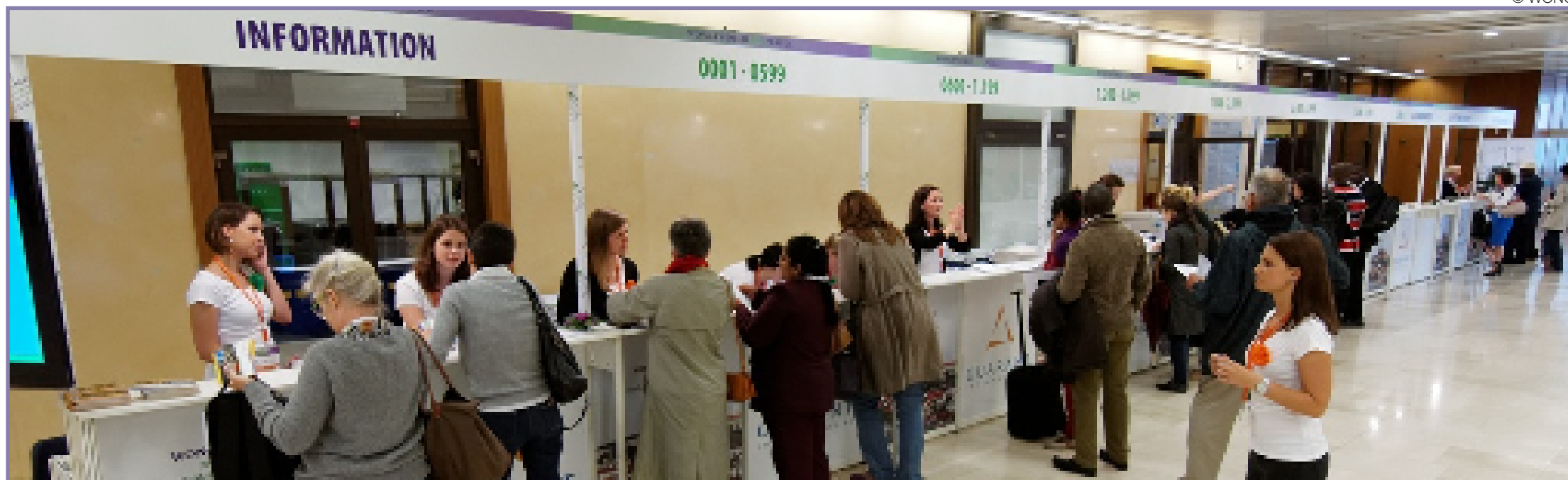
[Stefano Del Canale](#) - A Comprehensive Approach to Reducing Hospitalizations in Chronic Health Failure patients: a pilot project in Parma, Emilia Romagna Region, Italy

Events: the years of 2013/2014

- WONCA World 2013 in Prague 25-29 June 2013



© WONCA



This year's WONCA World conference in Prague was a very fruitful event, I think to everyone who participated but to me in particular. Many thanks to Bohumil Seifert for a very well organized event.

In my memory of the conference four events stood out:

- As the first, I will mention the opening event an outstanding performance was of the local band of handicapped youth – the TAP TAP, composed from handicapped people of Jedlickuv ustav. The presences of the group set a great and inviting and including atmosphere and the performance was uplifting.

- The second event of personal importance to me was the key note lecture by professor Igor Švab. He stated: "By putting too much focus on measurable standards and by forgetting the personal approach, we are denying our patients our feelings, our wisdom, our caring, our love, the very values that are needed in a world dominated by productivity and profit. Using rationalistic measures only is not enough in explaining quality and contribution of family medicine". For those of you who did not attend the Prague conference, Igor's speech was recorded and can be found at:

<http://wonca2013.tone.cz/>

- The third was the workshop by Andree Rochfort on the afternoon of Tuesday, June 25 "Sharing the skills to survive in a rapidly changing medical workplace". The message from the audience of international GPs was that the main stress factor in their present work life derives from quality measurement and accreditation programs.

Especially top-down approaches with little influence of the GPs and staff were conceived as problematic for job satisfaction, doctor-patient relations and recruitment of young GPs to GP/FM.

- The fourth was meeting the members of the WONCA World Working Party of Quality and Safety (WWWOQS). Members from Africa and Asia strive to improve care, to develop indicators of care, to measure care, to get access to evidence based guidelines, to teach quality and safety, because in many of their setting this is totally absent.

So on one hand, the measurement, the evidence based approach is of course needed. On the other hand, when applied, GPs become stressed, frustrated and overwhelmed by the bureaucracy of it all.

Bridging that dilemma is perhaps the most important task for EQuiP in the years to come. At the WWWPQS meeting, President Michael Kidd participated and urged the group to write up a policy statement before the end of the conference.

Through the great work of Alexandre Gouveia the draft statement attached here was written up. We feel that we succeeded in balancing the need for QI and Safety to patient centeredness, respect of patients' privacy and confidentiality, prioritizing quality and safety work and emphasizing the need of local leadership in the clinics of that work. You may find the draft policy statement here. Comments are very welcome.

In order to meet the needs of GPs who are at the beginning of the travel to quality and safety, we have the support from WWWPQS, also financially to create a repository of quality and safety tools on the EQuiP and WWWPQS websites.

The results of the Leonardo da Vinci project, the Linnaeus project and Canadian Cheryl Levitt's extensive work on quality indicators may be examples of work, that may be very good starting points.

Tina Eriksson

Events: the years of 2013/2014

- 43rd EQuIP Assembly Meeting in Paris 5-6 April 2013: Equity



The main focus and theme of the 43rd EQuIP assembly meeting in Paris 5-6 April 2013 was **Equity as a Dimension of Quality in Primary Care**.

Huge variation exists in the care that patients with the same health problem receive. These variations may reflect good medical care, adapted to patient needs, which may be different.

However, sometimes variations in care between patient groups find their origin in social processes or are the result of underlying social mechanisms: Unequal access to care for patients from different ethnic or socio-economic groups or differences in treatment between groups without any medical evidence.

for Equity in Health (ISEqH) equity in health care implies that there are no differences in health care where health needs are equal (horizontal equity) or that enhanced health care is provided where greater health needs are present (vertical equity).

Inequity in health care refers to variations in health care which are not the result of variations in the patient's need for care but from the patient's social status, income, ethnic background, gender, intelligence level, or ability or willingness to participate in the management of their own conditions.

Hector Falcoff
Isabelle Depui



Events: the years of 2013/2014

- 43rd EQuIP Assembly Meeting in Paris 5-6 April 2013: Equity

Friday 05 April 2013

14.00-14.30 Welcome, presentation of EQuIP, SFTG, and the program of the meeting

Tina Eriksson (Collège danois de médecine générale, présidente d'EQuIP) & Isabelle Dupie (SFTG)

[PP slides \(PDF\)](#)

14.30-15.00 - Introduction: Frame, definitions, issues

Sara Willems
(Université de Gand, Belgique)

[PP slides \(PDF\)](#)

15.00-15.30 How primary care may reduce disparities?

Yann Bourgueil
(IRDES, France)

[PP slides \(PDF\)](#)

15.30-16.00 Equity in primary care in Europe: First results of the Qualicop study

Sara Willems
(Université de Gand, Belgique)

[PP slides \(PDF\)](#)

16.00-16.30 Coffee and tea

16.30-17.00 May P4P improve equity in primary care?

Tim Doran
(Université de Manchester, Royaume Uni)

[PP slides \(PPT\)](#)

17.00-17.30 Why and how do we need to register the social status in the medical record?

Gladys Ibanez
(Université Paris P&M Curie et SFTG, France)

[PP slides \(PDF\)](#)

17.30-18.00 The EQuIP delegates perception of equity in primary care

Dorotheï e Rambaud
(Université Paris Descartes et SFTG, France)

[PP slides \(PDF\)](#)

18.00-18.45 General discussion and conclusions of the afternoon

Virginie Ringa
(INSERM, France)

Saturday 06 April 2013

09.00-09.30 Assessment of the equity of preventive care among GPs in training practices

Laurent Rigal
(Université Paris Descartes, France)

[PP slides \(PDF\)](#)

09.30-10.00 impact on the equity of health care? The greek experience

Christos Lionis
(Université de Crète, Grèce)

[PP slides \(PDF\)](#)

10.00-10.30 What training for health professionals about the equity of health care?

Piet Vanden Bussche
(Université de Gand, Belgique)

[PP slides \(PDF\)](#)

10.30-11.00 Coffee and tea

11.00-12.00 Three workshops: Professional education/social status in the medical record/EQuIP position paper about equity in primary care

(EQuIP)

12.00-13.00 Conclusions. Messages to take home.

How to continue?

(Intervenants à préciser)

Videos:

[Sara Willems - Frame, definitions, issues](#)

[Yann Bourgueil - How primary care may reduce disparities?](#)

[Tim Doran - May P4P improve equity in primary care?](#)

[Gladys Ibanez - Why and how do we need to register the social status in the medical record?](#)

[Dorotheïe Rambaud - The EQuIP delegates perception of equity in primary care](#)

[Laurent Rigal - Assessment of the equity of preventive care among GPs in training practices](#)

[Piet van den Busche - Teaching Equity in Health Care](#)

[Christos Lionis - The crisis and the equity of health care \(Greece\)](#)

Events: the years of 2011/2012

- 42nd EQuIP Assembly Meeting in Erzurum 23-25 November 2012: Patient Safety



The main focus and theme of the 42nd EQuIP assembly meeting in Erzurum 23-25 November 2012 was Patient Safety in Family Practice.

We continued the new initiative from Zagreb and Stockholm - the open part of the meeting - and once again it proved very valuable with interesting presentations on recent developments in the health system of Turkey.

Nezih Dagdeviren
Zekeriya Aktürk



Events: the years of 2011/2012

- 42nd EQuIP Assembly Meeting in Erzurum 23-25 November 2012: Patient Safety

Friday 23 November 2012

17.00-18.00 Arrivals

18.15 -18.30 Opening of the meeting, Welcome to new members
(Tina Eriksson)

18.30 -19.30 National updates

19.30 Dinner

Saturday 24 November

08.30 - 10.00 Executive report – Stockholm minutes for approval, Updates on organizational and financial issues, coming meetings and conferences
(Executive)

10.00-10.30 Coffee and tea

10.30-14.30 Open part of the meeting

10.30-11.15 Patient Safety in Rural Practices – the collaboration between EQuIP and EURIPA
(Tina Eriksson)

11.15-12.00 Patient Safety in Turkey
(Rabia Kahveci)

[PP slides \(PDF\)](#)

12.00-12.30 Opening EQuIP for individual memberships: Registrations from Turkey
(Zekeriya Aktürk)

12.30-13.30 Lunch

13.30-14.15 Recent condition of family physicians in Turkey and future projections
(Zekeriya Aktürk)

[PP slides \(PDF\)](#)

14.15-15.00 Recent developments in the health system of Turkey
(Serhat Vancelik)

[PP slides \(PDF\)](#)

15.00-15.30 Tea & Coffee

15.30-17.00 Sightseeing tour

17.00-18.00 Rest

17.00-18.00 Gala dinner

Sunday 25 November

09.00 - 10.00 Conclusion and evaluations
(Tina Eriksson)

10.00 -12.30 Group work on Patient Safety

12.30 -13.30 Lunch

13.30 Goodbyes

Videos:

[Rabia Kahveci - Patient Safety in Turkey](#)

[Zekeriya Aktürk - Recent condition of family physicians in Turkey and future projections](#)

[Serhat Vancelik - Recent developments in the health system of Turkey](#)



Events: the years of 2011/2012

- 41st EQuIP Assembly Meeting in Stockholm 12-14 April 2012:
Nationally Aggregated Data in Family Medicine



The main focus and theme of the 41st EQuIP assembly meeting in Stockholm 12-14 April 2012 was Nationally Aggregated Data in Family Medicine.

We continued the new initiative from Zagreb - the open part of the meeting - and once again it proved very valuable with interesting presentations on nationally aggregated data experiences and systems from the UK, Belgium, the Netherlands, Sweden, Denmark, Finland, Spain, Catalonia and Portugal.

Eva Arvidsson

Sven Engström



Events: the years of 2011/2012

- 41st EQuIP Assembly Meeting in Stockholm 12-14 April 2012:
Nationally Aggregated Data in Family Medicine

Thursday 12 April 2012

18.00-18.15 *Opening of the meeting. Welcome to new members.*
(Tina Eriksson)

18.15-18.30 *WONCA Anniversary fund; Chronic Condition Patient Self-Management in General Practice.*
(Andree Rochfort)

18.30-19.00 *Nationally aggregated data - the United Kingdom*
(Nigel Sparrow)
[PP slides \(PDF\)](#)

19.00-19.30 *Nationally aggregated data - Belgium*
(Piet Vanden Bussche)
[PP slides \(PDF\)](#)

Friday 13 April 2012

10.30-10.35 *Official introduction to the open part of the meeting.*
(Tina Eriksson)

10.35-11.00 *Leonardo da Vinci project Innovative lifelong learning of GPs in QI supported by information technology - progress report*
(Tomasz Tomasik)
[PP slides \(PDF\)](#)

11.00-11.20 *Nationally aggregated data - Sweden*
(Sven Engström)
[PP slides \(PDF\)](#)

11.20-11.40 *Nationally aggregated data - Denmark*
(Henrik Schroll & Janus Laust Thomsen)
[PP slides \(PDF\)](#)

11.40-12.00 *Nationally aggregated data - Finland*
(Klas Winell)
[PP slides \(PDF\)](#)

12.00-12.45 *Sandwich lunch*

12.45-13.10 *Nationally aggregated data - the Netherlands*
(Rob Dijkstra)
[PP slides \(PDF\)](#)

13.10-13.40 *Nationally aggregated data - Spain*
(José Miguel Bueno Ortiz)
[PP slides 1 \(PDF\)](#)
[PP slides 2 \(PDF\)](#)

13.40-14.10 *Nationally aggregated data - Spain*
(Toni Dideu)
[PP slides \(PDF\)](#)

14.10-14.30 *Nationally aggregated data - Portugal*
(Alexandre Gouveia)
[PP slides \(PDF\)](#)

14.30-15.00 *Tea & Coffee*

15.00-15.45 *Results of EQuIP Survey on aggregated data*
(Eva Arvidsson)
[PP slides \(PDF\)](#)

15.45-16.00 *Conclusions - farewells to open meeting participants*
(Tina Eriksson)

Videos:

[Nigel Sparrow - the UK](#)

[Piet Vanden Bussche - Belgium](#)

[Rob Dijkstra - the Netherlands](#)

[Sven Engström - Sweden](#)

[Henrik Schroll & Janus Laust Thomsen - Denmark](#)

[Klas Winell - Finland](#)

[José Miguel B. Ortiz - Spain](#)

[Toni Dideu - Catalonia](#)

[Alexandre Gouveia - Portugal](#)



Events: the years of 2011/2012

- 40th EQuIP Assembly Meeting in Zagreb 3-5 November 2011:
Practice Accreditation



The 40th EQuIP assembly meeting in Zagreb 3-5 November 2011 was truly special in various ways. All the way through the main focus and theme of the meeting was practice accreditation – from the national updates, the interaction with the Croatian primary care organizations, the open part of the meeting and the group work afterwards.

The open part of the meeting was a new initiative, and it proved very valuable with interesting presentations on the accreditation systems in the UK, the Netherlands, Germany, Estonia and Croatia.

Zlata Ozvacic
Venija Cerovecki Nekic



Events: the years of 2011/2012

- 40th EQuiP Assembly Meeting in Zagreb 3-5 November 2011: Practice Accreditation

Friday 4 November 2011

10.30-11.00 *Official introduction to the open part of the meeting*
(Zlata Ozvacic Adzic & Venija Cerovecki Nekic)

11.00-11.15 *European accreditation schemes – the UK*
(Helen Lester)

[PP slides \(PDF\)](#)

11.15-11.30 *European accreditation schemes – the Netherlands*
(Rob Dijkstra)

[PP slides \(PDF\)](#)

11.30-11.50 *EPA. New results*
(Sara Willms)

[PP slides \(PDF\)](#)

11.50-12.10 *Building the QS in FM, Estonian experience*
(Katrin Martinson)

[PP slides \(PDF\)](#)

12.10-12.30 *Plan and structure of accreditation process in FM in Croatia*
(Venija Cerovecki Nekic on behalf of Renato Mittermayer)

[PP slides \(PDF\)](#)

12.30-12.50 *Accreditation in Croatian family medicine – ideas and lessons from past experience*
(Hrvoje Tiljak)

[PP slides \(PDF\)](#)

12.30-13.30 *Lunch*

13.30-14.30 *Panel discussion*
(Helen Lester, Rob Dijkstra, Sara Willms)

14.30-15.00 *Conclusions – farewells to open meeting participants*

Videos:

[Practice Accreditation in Croatia, Spain and Estonia](#)

[Dr. Piet Vanden Bussche - The patient perspective on practice accreditation](#)

[Dr. Zlata Ozvacic Adzic and Dr. Le Vallikivi - Why practice accreditation is important and useful](#)

[Venija Cerovecki Nekic - Plan and structure of accreditation process in FM in Croatia](#)

[Hrvoje Tiljak - Accreditation in Croatian family medicine - ideas and lessons from past experience](#)

[Katrin Martinson - Building the QS in FM, Estonian experience](#)

[Helen Lester - European accreditation schemes – the UK](#)

[Rob Dijkstra - European accreditation schemes – the Netherlands](#)

Events: the years of 2011/2012

- EQuIP Invitational Conference April 2011



The EQuIP Invitational Conference in Copenhagen from 7-9 April 2011 focused on: "Value for money in GP - management and public trust".

EQuIP's invitational conferences aimed at presenting cutting edge knowledge on quality of primary care/family medicine to a selected audience of the administrators and politicians involved in the European primary sectors.

There was no conference fee - participants and presenters of projects were invited. The conference was supported by the Danish Regions, The Danish College (DSAM), The Danish Union of GPs (PLO) and EQuIP.

EQuIP delegates were responsible for inviting a restricted number of participants from each of the member countries of WONCA-Europe.

Key note speakers were Frede Olesen, Andreas Christian Sönnichsen, Iona Heath, José Braspenning, Martin Roland and Richard Roberts.

Tina Eriksson
Yuse de Boer



Events: the years of 2011/2012

- EQuiP Invitational Conference April 2011

7th of April 2011

12.30-13.30 Registration

13.30-13.45 Welcome
(Tina Eriksson)

13.45-14.45 Opening lecture: Shared Care in Denmark
(Professor Frede Olesen)
[PP slides](#)

14.45-15.00 Coffee and Tea

15.00-16.00 Key note lecture: Improving Quality in Primary Care: Is Money the Answer?
(Professor Martin Roland)
[PP slides](#)

16.00-19.00 Walk to and visit in the City Hall

8th of April 2011

09.00-10.00 Key note lecture: Patient Safety in Family Medicine
(Professor Andreas Sönnichsen)

10.00-10.30 Break/poster walk; Poster walk at 10.00
(Søren Friberg)

10.30 - 12.00 Oral presentations, Practice accreditation
Chair: Joachim Szecsenyi
Venue: Skt. Hans Torv – Ground floor

Quality and safety in primary care: Recent achievements in the Czech Republic
(Bohumil Seifert)
[Abstract](#)

Implementation to optimise antibiotic prescription – embedment within the Dutch practice accreditation
(Alike Van der Velden)
[Abstract](#) [PP slides](#)

Accreditation in Danish general practice. How to work with standards and criteria in practice
(Uwe Jansen)
[Abstract](#) [PP slides](#)

Developing a multi-centered quality management strategy according to ISO 9001 standards in Aragon
(Jose María Turón)
[Abstract](#) [PP slides](#)

Quality Issues in General Practice at the Crossroads in Turkey
(Mustafa Tasdemir)
[Abstract](#)

10.30 - 12.00 Oral presentations, Implementation - Meeting standards of care.
Chair: Venija Cerovecki Nekić
Venue: Nørrebro Runddel – Ground floor

Results from an APO audit about hypertension
(Maja Skov Paulsen)
[Abstract](#) [PP slides](#)

Introduction of P4P in France: the CAPI programme
(Olivier Saint-Lary)
[Abstract](#) [PP slides](#)

Reasons for discrepancies in medication reports between patient and GP – an observational study
(Guido Schmiemann)
[Abstract](#) [PP slides](#)

Scandinavian evaluation of laboratory equipment for primary health care – SKUP
(Esther Jensen)
[Abstract](#) [PP slides](#)

pvkvalitet.se – a website for easy benchmarking and improvement of quality in primary health care
(Eva Arvidsson & Sven Engström)
[Abstract](#)

Structured data from patient files collected electronically from general practice in Denmark
(Janus Laust Thomsen)

10.30 - 12.00 Workshops

Venue: Kastrup – 1st floor
Teaching the Quality cycle: FOCUS on planning a project
(Piet Vanden Bussche & Luc Seuntjens)
[Abstract](#) [PP slides](#)

Venue: Hovedbanen – 2nd floor
The QoF of my dreams: How would I build up the system if it was to be started anew?
(Helen Lester & Pieter van den Hombergh)
[Abstract](#) [PP slides](#)

Venue: Enghave Plads – 2nd floor
Dealing with Uncertainty in General Practice – Development of a Questionnaire
(Antonius Schneider & Magdalena Wübken)
[Abstract](#)

Venue: Tivoli – 2nd floor
How to get clinical decision support work – problems and solutions
(Andreas Sönnichsen & Ilkka Kunnamo)
[Abstract](#)

Venue: Christianshavn – 1st floor
Disease management policies for GPs in Dutch Primary Care
(Karen van Ruiten, assisted by Kees In't Welt)
[Abstract](#) [PP slides](#)

12.00-13.30 Lunch / Poster walk at 13.00 -
(Gordon Littman)



Events: the years of 2011/2012

- EQuiP Invitational Conference April 2011

8th of April 2011

13.30 - 15.00 Oral presentations, Quality organisation and coordination

Chair: Bohumil Seifert

Venue: Skt. Hans Torv – Ground floor

Is the multi-professional group practice in 'Maisons de santé' the future of primary care in France?

(Yann Bourgueil)

Abstract **PP slides**

Clinical and health governance: A navigation tool for primary care

(Alexandre Gouveia)

Abstract

Quality Improvement in Primary Care in Slovenia

(Mateja Bulc)

Abstract **PP slides**

Predictors of health care utilisation in German primary care practices

(Antonius Schneider)

Abstract

Happy practice staff and unhappy general practitioners: What's going on in German primary care?

(Katja Goetz)

Abstract **PP slides**

Burnout in general practitioners in Croatia – does it affect inter-personal quality of care?

(Zlata Ozvacic Adzic)

Abstract

13.30 - 15.00 Oral presentations, Changing practice - feedback, coaching and teaching

Chair: Jesper Lundh

Venue: Nørrebros Runddel – Ground floor

Setting goals in diabetes treatment through electronic data collection and feedback to patients and GPs

(Berit Lassen)

Abstract

Coaching the general practice team in quality improvement: coaches working hours

(Annelies Van Linden)

Abstract **PP slides**

Assessment of Organization in Family Medicine in Slovenia – MM and IFPMM

(Tatjana Cvetko)

Abstract **PP slides**

Decreasing antibiotics use in primary care: review of effectiveness of behavioural interventions

(Alike Van der Velden)

Abstract **PP slides**

A remedy for over-prescribing of antibiotics in general practice: The HAPPY AUDIT project

(Anders Munck)

Abstract **PP slides**

Teaching quality in family medicine: Preliminary results of a European cross-sectional study

(Zalika Klemenc-Ketis)

Abstract **PP slides**

13.30 - 15.00 Workshops

Venue: Kastrup – 1st floor

The Danish Quality Model for GP. Evaluation and discussion of a model under development

(Tina Eriksson, Henrik Kousholm, Stephen Campbell & Joachim Szecsenyi)

Abstract **PP slides**

Venue: Hovedbanen – 2nd floor

Metrics and mystery: Measuring quality in the therapeutic relationship

(Trisha Greenhalgh & Iona Heath)

Abstract **PP slides**

Venue: Enghave Plads – 2nd floor

Centre-based incident reporting in Dutch general practice

(Dorien Zwart, assisted by Andrée Rochfort)

Abstract

Venue: Tivoli – 2nd floor

Do we treat all patients equal? Equity as a criterion to evaluate quality of primary care

(Sara Willems, Piet Vanden Bussche & Dirk Avonts)

Abstract



Events: the years of 2011/2012

- EQuiP Invitational Conference April 2011

8th of April 2011

15.00-15.30 Break/poster walk; Poster walk at 15.00
Zlata Ozvacic Adzic

15.30-17.00 Panel discussion: Pros and Cons of Pay for Performance
Chair: Kees In't Welt
(Dr. Iona Heath & Dr. José Braspenning)

17.00-19.00 Rest

19.00-24.00 Conference Gala Dinner and Dance

9th of April 2011

10.00 - 11.30 Oral presentations, Patient safety and transition of care

Chair: Andreas Sönnichsen
Venue: Skt. Hans Torv – Ground floor

Patient safety culture in general practices – Is safety climate associated with safer processes?
(Barbara Hoffmann)

Abstract

Improving patient safety – recommendations for the content and structure of a patient safety incident classification system in primary care
(Kerstin Klemp)

Abstract PP slides

Developing healthcare professionals' reflective reasoning, an essential feature for patient safety
(Marianne Samuelsson)

Abstract

Problem based learning for two main biases: Professionalism and patient safety education
(Nazan Karaoglu)

Biography Abstract PP slides

Can we use referral letters to assess the coordination skills of general practitioners and gatekeeping processes?
(Thomas Cartier)

Abstract PP slides

Returning to general practice? Improving transition of care from secondary to primary care for cancer patients
(Ann Dorrit Guassora)

Abstract PP slides

10.00 - 11.30 Oral presentations, Risk, prevention and equity

Chair: Klas Winell
Venue: Nørrebro Runddel – Ground floor

Modalities of medical uncertainty in primary prevention: how do general practitioners deliberate about risk?
(Pia Kirkegaard)

Abstract

Internal Validation of an Identification Tool of Frail Older People in General Practice
(Irene Drubbel)

Abstract PP slides

The equity dimension in the evaluation of the Quality and Outcomes Framework : A systematic review
(Sara Willems)

Abstract PP slides

The RISAP-study: a complex intervention in risk communication and shared decision-making in general practice
(Mette Damberg)

Abstract

Patient views on breast and cervical cancer screening – EURO-PREVIEW Patient Study
(Carlos Martins)

Abstract

Barriers to equal access to health care for patients with chronic disease in deprived areas – seen from the perspective of health professionals
(Lise Dyhr)

10.00 - 11.30 Workshops

Venue: Kastrup – 1st floor
Changing the Dutch Practice Accred.® into certification: opportunities and threats...
(Margriet Bouma & Kees in't Velt)

Abstract PP slides

Venue: Hovedbanen – 2nd floor
Competence-based education, Quality Improvement for GPs/ Family Doctors in Europe
(Zalika Klemenc-Ketis, Katarzyna Czabanowska, Judit Csiszar, Andrée Rochfort & Piet Vanden Bussche)

Abstract

Venue: Enghave Plads – 2nd floor
Total medication recording, reconciliation, and patient safety
(Johanna Tulonen-Tapi, Raija Sipilä & Taina Mäntyranta)

Abstract

Venue: Tivoli – 2nd floor
Quality in family practice Book of Tools: how to use a comprehensive set of indicators
(Cheryl Levitt, assisted by Janecke Thesen)

Abstract PP slides

Venue: Christianshavn – 1st floor
Cross-sector benchmarks on DM care between general practices and hospitals out-patient-clinics
(Jesper Lund & Søren Friborg)

Abstract PP slides

11.30-12.00 Coffee break

12.00-13.00 Closing lecture: Seeking Better Quality Science
Knowing What We Measure Matters
(Professor Richard Roberts)

PP slides

13.00-13.30 Sandwich & Goodbyes

EQuIP Summer Schools

- The English Summer School 2009, 2011, 2013



Quality improvement (QI) has a high priority in health care. Many countries have also started programs to develop patient safety. Process and indicator development, benchmarking and implementation of changes are the essence in quality development work, where many are involved. EQuIP wants to support training of researchers in this specific field by organizing international courses.

In the early nineties, for several years, EQuIP organized a Summer School on Quality Improvement in Primary Care for young professionals. These Summer Schools were organized for EQuIP by the Universities of Maastricht and Nijmegen in the Netherlands and were very successful.

The First EQuIP Summer School 2009

In 2008 EQuIP decided to restart this initiative with the emphasis on Research in Quality Improvement. There is a need in several countries within the EQuIP family. The new tradition of summer courses, organised in different countries and on different locations, as to ensure people to have an easy access, started off successfully in Tuusula, Finland in 2009.

The first EQuIP Summer School on Quality Improvement in Primary Health Care took place in Tuusula (Finland) from 5-8 August 2009. The aims were to bring together twenty young PC professionals and teach them about research in Quality Improvement in PC, and to support and sustain networking between the participants.

The Second EQuIP Summer School 2011

The second EQuIP Summer School on Research and Developments in Quality Improvement in Primary Care took place in Ghent (Belgium) from 28-31 August 2013 in cooperation between EQuIP, Domus Medica and the Ghent University (Department of Family Medicine and Primary Health Care).



In this video Piet Vanden Bussche explains the background for the EQuIP Summer Schools and Dr. Jan Kovar shares his experiences from the Equip Summer School 2011 in Ghent in Belgium.

*Piet vanden Bussche
Jan Kovar*

The Third EQuIP Summer School 2013

The third EQuIP Summer School on Quality Improvement in Primary Care: Instruments, Evaluation, Research took place in Berlin (Germany) from 19-22 July 2013 in cooperation between EQuIP, Institute of General Practice and Family Medicine and the DEGAM.



In this video professor Frede Olesen (Denmark) explains, why he considers the EQuIP Summer Schools as one of the important initiatives in EQuIP for Quality Improvement.

*Hector Falcoff
Andrée Rochfort
Jochen Gensichen*



EQuIP Summer Schools

- The English Summer School 2014

Quality and Safety in health care are key factors of the reorganization of all the European Health Systems.

At the moment these dimensions have been addressed mostly in hospitals.

Their development in primary care raises many issues for professionals as well as researchers.

The EQuIP Summer Schools aim to enable health professionals to initiate or improve a QI project of their own. It is a 4 days residential training course, taking place in a friendly venue.

The program alternates lectures and workshops. High-level European experts in Quality, the diversity of experiences and perspectives contribute to rich and effective exchange of knowledge.

EQuIP Summer School in Denmark

This year the VdGM and EQuIP were collaborating on establishing an EQuIP Summer School in Denmark.

From July 31 to August 3, the area of Middelfart in Denmark welcomed 18 participants from all over Europe.

Participation in this Summer School was totally free, and it included tuition, meals and accommodation.

- [Letter of Thanks from Dr. Susann Schaffer](#)
- [Letter of Thanks from Dr. Sandra Adalgiza Alexiu](#)



Testimonials from participants

"Location and facilities were very nice. The food, our professors, the quality and content of the classes, and the morning exercises were excellent."

"What would be your maximum price for attending a Summer School? It depends of the country, where the summer school was going on."

"As Denmark is very expensive country, I could never attend a summer school here if it would not be free or for a symbolic attending fee."

"The teachers were extremely qualified and also very keen on teaching and pedagogical methods."

"I had never heard about PICÒ's method before, and I found it very useful to structure the aim and method of a quality improvement project or a research."

"Presenting our questions and PICOs and getting feed back and discussing them with the group and professors was especially good."

"People, who participated, were very interesting and each and every one with a different experience and point of view, so we all learned a lot from each other."

Resources from WONCA Copenhagen 2016

Printed poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 2MB)

(English EQuIP Summer Schools 2009-2014)

Printed poster, Wonca Europe Conference, Copenhagen, June 2016 (PDF, 2MB)

(French EQuIP Summer Schools, 2012-2015)



EQuIP Summer Schools

- The French Summer School 2015

English Summer School Summary

The French Summer school, organized by the Société Française de la Thérapeutique du Généraliste (SFTG) since 2012 is inspired by EQuIP Summer School, which started in 2009. Indeed, SFTG involved in EQuIP a long time ago, is building a network between healthcare professionals and researchers in the field of quality of health and patient safety. Thus, this Summer School is an opportunity to learn about quality improvement and the implementation of tools and methods related to it.

This Summer School was the opportunity for each participant to bring a project/research idea related to quality improvement and work on it with the help of others through general advices and small workgroup sessions. It led to self reflection and made the project clearer ensuring a significant progress during the Summer School.

Plenary sessions were led by experts on patient safety, equity or tools (PDSA) and methods to implement safety culture. They provided basic knowledge for beginners and reminders for the others to fully work on each project in small groups of 4-5 people.

Small workgroup periods were set up to allow each participant to work alone or with co-workers, then to report it to the group facilitating brainstorming, corrections and project improvement.

Well-set time is essential for optimal progression and context (great place in the nature, summer time) is also in favour of better learning.

I attended the summer school to develop my project about patient safety and develop my knowledge and abilities on quality. I thought of it as the opportunity for networking and get to know the French upcoming actors in quality of health and patient safety. It finally was.

I was fascinated by the strong connection I could build with others when talking about my project and how helpful it is to work with others. The Summer School also strengthened my relationship with my current colleagues and added even more motivation!

Thus, you are working at multiple levels: Knowing your co-workers better, knowing your project and improving your project.



French Summer School Summary

L'école d'été francophone, organisée par la SFTG depuis 2012, s'inspire de l'école d'été d'Equip existant depuis 2009. La SFTG, très impliquée dans Equip depuis longtemps, développe un réseau de professionnels et de chercheurs dans le champ de la qualité des soins et la sécurité du patient. Ainsi, l'école d'été est une opportunité pour apprendre l'amélioration de la qualité et l'implémentation des outils et méthodes qui lui sont reliés.

Cette école d'été a été l'opportunité pour chaque participant d'apporter son projet de recherche sur l'amélioration de la qualité et d'y travailler avec les autres grâce à leurs conseils et aux séances de travail en petits groupes. Cela permet une auto-reflexivité and rendre le projet plus clair assurant une progression réelle pendant l'école d'été.

Les sessions plénières étaient réalisées par des experts sur la sécurité du patient, l'équité ou les outils et méthodes (PDSA) permettant d'implémenter la culture de la sécurité. Elles ont apporté des connaissances de base aux débutants et des rappels aux autres pour travailler pleinement sur chaque projet en petits groupes de 4 ou 5.

Des temps de travail en petits groupes étaient prévus pour permettre à chaque participant de travailler seul ou avec ses collègues, puis de restituer son travail au groupe. Ceci facilite le brainstorming, l'apport de corrections et l'amélioration du projet.

Un temps bien aménagé est essentiel pour une progression optimale et le contexte joue également en faveur d'un meilleur apprentissage.

J'ai participé à l'école d'été pour mener à bien mon projet sur la sécurité du patient et améliorer mes connaissances et compétences sur la qualité.

J'ai pensé que l'école d'été serait une opportunité pour commencer un réseau de professionnels et apprendre à connaître les futurs acteurs de la qualité de la santé et la sécurité du patient. En effet, ça l'était.

J'ai d'ailleurs été fasciné par la forte relation que je pouvais développer avec les autres quand je parlais de mon projet: et de voir l'utilité de travailler à plusieurs.

L'école d'été m'a aussi permis de renforcer mes liens avec mes collègues and ajouter encore plus de motivation! Ainsi on travaille à différents niveaux: mieux connaître ses collègues, son projet, améliorer son projet.

Une des plus meilleures choses de l'école d'été est que l'on prend réellement le temps pour notre projet ce que nous ne faisons pas dans la vie de tous les jours.

Dr André Nguyen Van Nieu
Academic GP, Paris, France