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

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Background/Aims: Quality Circles (QCs) are commonly used as a tool in primary health care in Europe to consider and improve standard practice over time. They represent a complex social intervention that occurs within the fast-changing system of primary health care. QCs were first established in Canada and the Netherlands from where they spread to other European countries. This study aims to describe the spread and variety of this tool in primary health care in Europe and to update Beyer et al 2003.

Method: Experts from 26 European countries, belonging to the European Society of Quality and Safety in Family Medicine (EQuiP), completed an online survey documenting the number and objectives of QCs in their country, sources of support, incentives and didactic methods used. The answers were cross-checked and verified. Selected experts then took part in semi-structured online interviews to describe their local QC development. Thematic analyses are used to analyse the qualitative data and compare them with 2003.

Results: Findings from the qualitative analyses are synthesized to illustrate how common QCs are, their aims, organization, type of facilitation, incentives, level of autonomy, support, use of data and didactic methods.

Conclusion: Substantial development of QCs has taken place in numerous European countries. Their impact on the quality of care has been seen in many projects. Qualitative data from semi-structured online interviews provide us with an overview of QC activity in Europe.