

# Guide to Quality Improvement Education in Family Medicine Residency

Developed by Residents for Residents

## What is quality improvement (QI) in health care?

Intentionally and systematically implementing change to do better for our patients, health care providers, and health care systems.

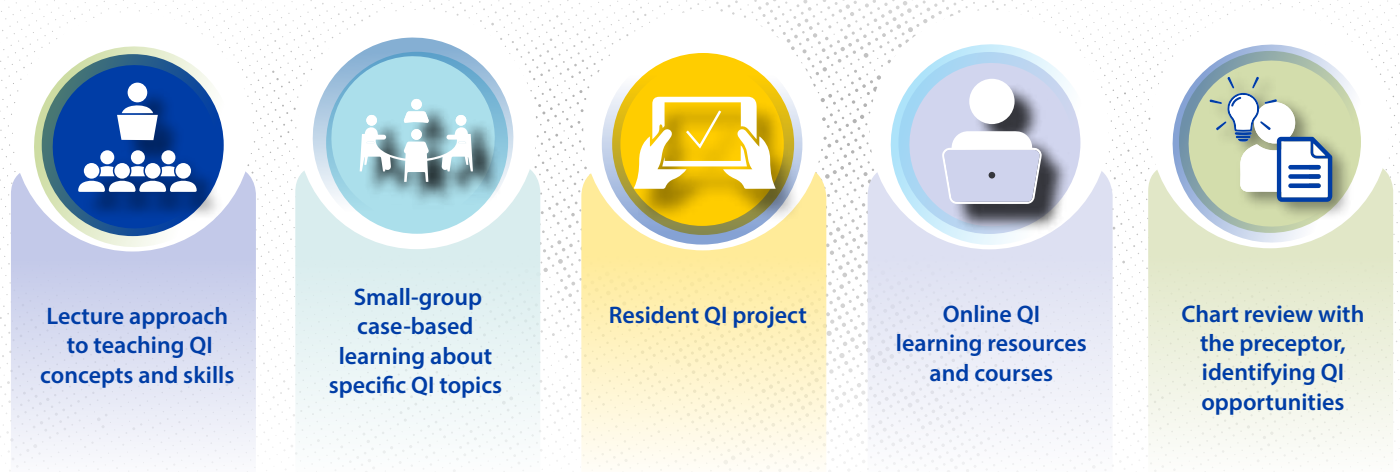
## Why do it?

- It has the potential to support better delivery of health care, improve outcomes, and enhance our own work experience—and it is the right thing to do
- There is an increasing expectation by licensing bodies to demonstrate QI activity
- It is a key area of competence expected by the College of Family Physicians of Canada (CFPC) for all family medicine residents and physicians

## How does QI fit into family medicine residency education?

The ability to practise QI is included in the CanMEDS and the CanMEDS-FM competency frameworks.<sup>1,2</sup> The CFPC expects all Canadian family medicine residency programs to provide learning experiences that enable residents to attain QI competencies, and to offer ways to assess learners' QI competence. Family medicine graduates should know how to plan and participate in QI initiatives as they enter independent practice.<sup>3</sup>

## HOW CAN QI BE LEARNED IN RESIDENCY TRAINING?



## What do family medicine residents think about QI learning across Canada's residency programs?

The CFPC Section of Residents (SoR) conducted a national survey of family medicine residents in May 2018 that highlighted overall support for QI to be included in residency education, but noted that enhanced mentorship and resources are required for active participation in and successful implementation of QI.<sup>4</sup> Based on the survey findings, the SoR established the following 10 recommendations to help residents become QI-ready to enter independent practice.

# Becoming QI-Ready: Top 10 Recommendations

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1. Appreciate that teaching QI to residents is an expectation of all residency programs.
2. Learn QI: It's more than just conducting a QI project—it is a thought process and a mindset, and it can take many forms.
3. Seek QI learning opportunities and identify how QI is being taught.
4. Recognize that QI in health care is intended for residents to continually do better for patients.
5. Keep it simple: Actively participate in QI projects and select a manageable, small-scale topic to address.
6. Apply QI to daily clinical practice: Review charts and quality reports (available through a provincial health quality adviser) with the preceptor to apply knowledge to real patients.
7. Be curious and ask questions: Identify areas where QI skills can be implemented.
8. Seek mentorship to enhance QI skills: Ask the preceptor to work through QI examples. If a preceptor requires further knowledge about QI, consider involving the preceptor in a QI project or encourage them to seek out faculty development.
9. Use existing tools and resources: Take a course or visit online resources. There are in-person and online courses available (some provincial health quality advisers have courses, such as IDEAS in Ontario) in addition to existing online resources such as the Institute of Healthcare Improvement (which also has online courses).<sup>5,6</sup>
10. Provide site-specific feedback: Review the curriculum and provide feedback to the program to enhance the way QI education is delivered.



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