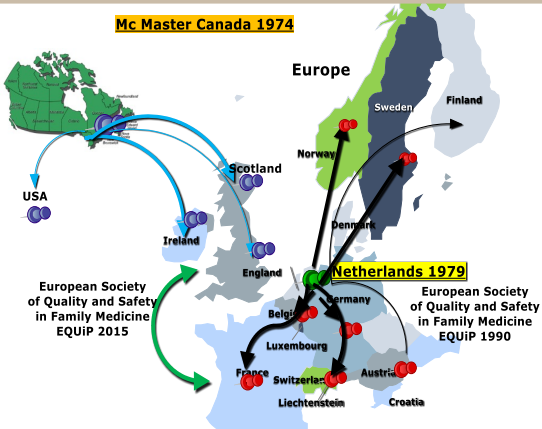


INTRODUCTION

Quality Circles (QCs) or Peer Review Groups are small groups of 6 to 12 professionals from the same background who meet at regular intervals to consider their standard practice. 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 article offers a comparison with data from 2003 and an update of peer review activities in European countries from 2003 to 2015.

BACKGROUND



AIMS AND OBJECTIVES

- Aim:**
 - > to offer an update of European QC development and provide a comparison of the situation between 2000 and 2015.
- Objectives:**
 - > to describe the spread and variety of this tool in primary health care in Europe
 - > to provide the basis for explaining the different developments across Europe
 - > to describe the basic properties of QCs across Europe

METHODS

- 1st questionnaire submitted to the 32 EQUIP delegates from 21 countries (March 2015)
 - Answers from 21 EQUIP delegates, representing 16 countries – 11 non responders
 - Questionnaire submitted to 32 EQUIP delegates from 21 countries to gather missing information and to validate given information (November 2015)
 - 6 new delegates answered (Finland, Greece, Hungary, Portugal, Slovakia, Slovenia)
 - 9 delegates never answered
- ✓ 29 out of 38 delegates (76%) responded
✓ 21 unchanged responses
✓ 8 new responses

Representing 25 countries

RESULTS

QCs in use and their development: Countries with increased activity

Country	2015		
	QCs in use in general practice:	QCs in use in general practice:	% GP Participation:
Austria	Yes	Yes	> 30
Belgium	Yes	Yes	60
Denmark	Yes	Yes	85
Finland	(Yes)	Yes	10
France	No	Yes	10
Germany	Yes	Yes	60
Ireland	Yes	Yes	85
The Netherlands	Yes	Yes	75
Norway	Yes	Yes	45
Scotland	X	yes	25
Sweden	Yes	Yes	15
Switzerland	Yes	Yes	80

QCs in use and their development: countries with low/unidentifiable activity

Country	2015		
	QCs in use in general practice:	QCs in use in general practice:	% GP Participation:
Croatia	(Yes)	Yes	x
Poland	(Yes)	Yes?	2

Yes: in use; (yes): hardly in use; No: not in use; x: no data;

RESULTS

Country	Currently active countries					
	Main objectives of QCs		Main methods of QCs		Evaluation	Supporting material
	2000	2015	2000	2015	2015	2015
Austria	C Q G O	P Q	A	DA	N	M F G
Belgium	C G O	CP	A	D W L	I	M F G L E
Denmark	C Q G	CP Q G O	A	D W E A L O	I E N	M G O N
Finland	C G O	P Q G	X	D W E A L	I E	O
France	-	CP Q	-	D E A O	I	M F G L E
Germany	C Q O	CP Q O	X	D W E	I	M F G O
Ireland	C Q	P	A	D W E A L	I E	M F G L E
The Netherlands	C Q G O	CP Q G	X	D W A	E	M F G E
Norway	C G	CP Q G O	A	D W E A L O	E N	M F L E O
Scotland	X	CP G O	X	D W	I	M E
Sweden	C	CP Q O	A	W E A L O	I N	M O
Switzerland	C Q G	CP Q G	A	D W E A L	N	N
Croatia	C Q G	P	X	D W L	N	M G
Poland	C Q	C Q	X	D W L O	N	N

Main objectives: C : CME; P: CPD; Q: QI; G: guidelines; O: other.
Main methods: D: discussion; W: workshop; E: educational materials; V: outreach visits; A: audit and feedback; L: local opinion leaders; O: other.
Supporting material: M = educational materials; F = feedback on individual and/or group performance; G = guidelines; L = library resources; E = evidence based summaries; O = other; N = none.

The following countries do not presently use QCs as a means of quality improvement (QI) in primary health care: Czech Republic, Estonia, Greece, Hungary, Italy, Portugal, Slovakia, Slovenia, Spain. Czech Republic, Greece, Slovenia had activities in 2000. England, Turkey and Israel have not provided the authors with current information

CONCLUSIONS

- > QCs become increasingly important as means of QI in primary health care
- > Countries that were dynamic in 2000 have increased number of QCs and extended the range of activities
- > In France and Scotland, Quality Circles play an important role in CME/CPD/QI
- > It is not clear why QC activities ended in Czech Republic, Greece, Slovenia
- > Qualitative inquiry is necessary to examine why QCs thrive or fail in different countries and systems