

# Improving our Physician-led Quality Improvement Training

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## Context

- The Physician-led Quality Improvement (PLQI) initiative at Vancouver Coastal Health (VCH) and Providence Health Care (PHC) is heading into its third year.
- PLQI's Level 3 training, aimed at physicians, consists of sessional funding; training in QI; support with project coordination, data retrieval and analysis; and coaching from physician coaches.

## Opportunity

- The youthfulness of the program and its popularity encourage the PLQI team to seek to continuously improve.
- Opportunities for improvement were identified from
  - "Training evaluations" completed by physicians
  - Internal feedback from PLQI team (staff, physician coaches, Health Authority sponsor) during end of day debriefs.

## Intervention

- Changes were discussed and implemented when revising the training curriculum and during agenda preparation.
- For Cohort 2 (2018/19), the following changes were selected for implementation:



Front-loading the training



Devoting more time for cohort to share their projects

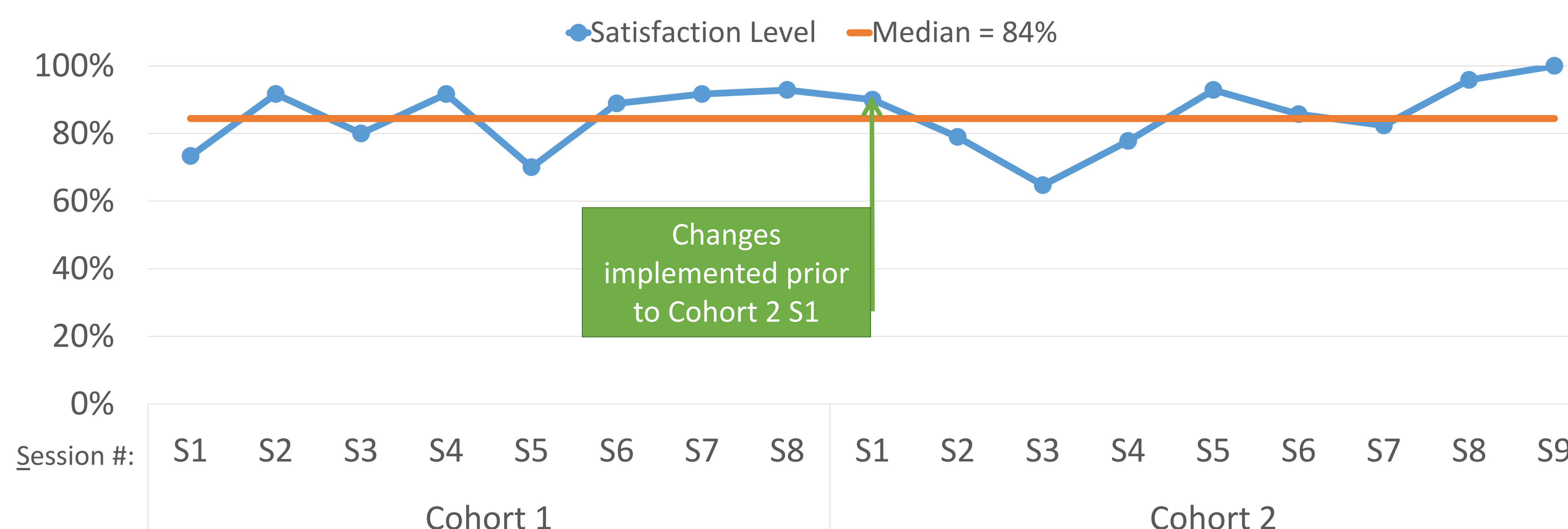


Adding new content based on common requests

## AIM

To improve the satisfaction with training to 90% or greater throughout our Cohort 2 (2018-2019) training sessions

Satisfaction Level (Highly Satisfied + Satisfied) with Training Session



## Measures of improvement

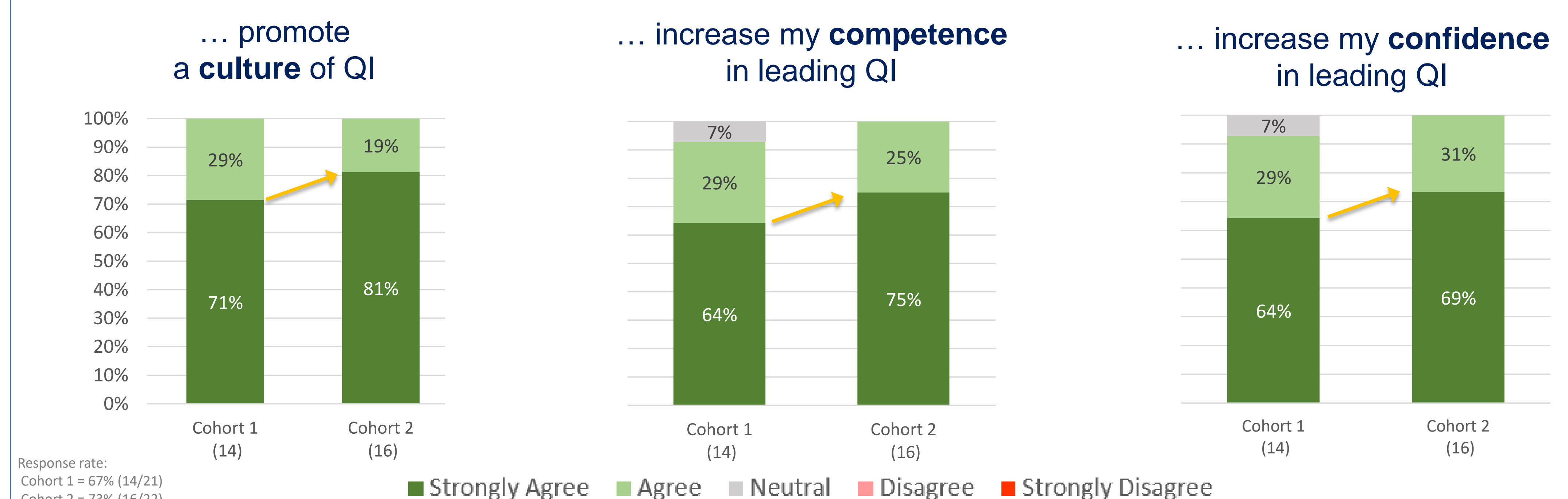
- ✓ No signals of change in the level of satisfaction (as per 4 rules by Provost and Murray)
- ✓ The average level of satisfaction (Cohort 1, Cohort 2) has remained constant at 85%; while average class size increased by 50%.
- ✓ A steady average over an increasing class size is seen as positive.
- ✓ Cohort 2's Session 8 and Session 9 values (96%, 100%) suggest progress in the right direction.

## Measures of improvement

Proportion of respondents who answered "Strongly Agree" to the statement: "This initiative enabled me to..."

- ✓ "... promote a culture of QI", improved to **81%** from 71%
- ✓ "... increase my competence in leading QI", improved to **75%** from 64%
- ✓ "... increase my confidence in leading QI", improved to **69%** from 64%

## This initiative enabled me to....



## Lessons learned

- **Unexpected impacts:**  
Comments from staff and faculty indicated that front loading the first three sessions (one week apart) was "too much". For Cohort 3, sessions two and three have been scheduled two weeks apart.
- **Benefits:**
  - Some participants from the past cohort have joined the ranks as facilitators or presenters for the upcoming training period (Cohort 3)
  - We have found value in soliciting and acting on feedback from participants, faculty, coaches, and staff when improving our training.

## Sustainability

- The improved curriculum becomes the reference point for agenda preparation at each training day.
- Trialing 'dedicated time for connecting with coaches' during training sessions as an additional way for physicians to discuss their projects.
- Feedback on new sessions is reviewed closely to identify wins or need for changes.

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