

Royal Dutch Medical Association (KNMG) Quality Framework "Commitment to Quality" (2012)

Background

In the early 1990s, an agreement was reached with the government that the medical profession itself would be responsible for medical quality policy; the government creates the necessary enabling conditions, and monitors quality via the Healthcare Inspectorate (*Inspectie voor de Gezondheidszorg*). Since that time, the profession has been quick to take quality policy in hand. The emphasis has been on instruments to promote quality. This has led to many positive developments, such as standards and guidelines, reviews, accredited continuing education programmes, and the recent introduction of CanMEDS competencies in medical further education. Over the coming years, a greater emphasis will be placed on safeguarding quality and on accountability for quality.

The term "Specialist" applies to all physicians who have completed recognised medical further education. In addition to medical specialists, this therefore includes general practitioners, geriatric care specialists, physicians for the mentally handicapped and social medicine specialists. There are 33 scientific associations of specialists that shape quality policy for their respective specialisms. There are also "*profielartsen*": physicians who have undergone limited training in a specific area but who are not specialists. One example is the emergency medicine physician. The KNMG's Medical Specialisms Board (*College Geneeskundig Specialismen*) determines the education and training requirements for all 33 specialisms. All specialists are registered on completing their training, and must re-register every five years. The Medical Specialisms Board has drawn up requirements that apply to this process. In order to re-register, specialists must take part in the periodic quality review by the scientific association, follow at least 200 hours of accredited continuing education programmes every five years, and work in their specialism at least two days per week. The Board is currently tightening up the re-registration requirements, taking into account the recommendations in the KNMG Quality Framework for Medical Care (2012).

Taking control

The profession has already taken a number of important steps to safeguard quality. The focus currently lies on the introduction of quality reviews for all specialisms, practical accreditation for general practitioners and the gradual introduction of peer-to-peer performance reviews (such as the IFMS: Individual Functioning of Medical Specialists).

A great deal has been achieved, but there have also been criticisms. The quality policies of the various scientific associations of specialists are at different stages of development. Not all 33 specialisms have sufficiently up-to-date standards, guidelines and/or accredited continuing education programmes. There is a lack of insight into the extent to which individual physicians are making proper use of the available quality instruments.

Quality and patient safety are sensitive and very important topics, both for the medical profession and for the public, politics and the media. Society at large and politicians want more insight into and closer monitoring of care quality. At the same time, support from medical professionals is recognised as essential. Medical professionals want to be in control of the quality-related regulation of medical activities. The medical profession presented a joint, broadly supported basis for this in 2012 with the *KNMG Quality Framework for medical care "Commitment to Quality"*.

The Quality Framework describes the views of the KNMG physicians' federation and the scientific associations on the quality and safety policy of the profession and its scientific associations. The Quality Framework provides:

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- a coherent, comprehensive and transparent document for medical quality and safety policy;
- clear quality frameworks for physicians, society, supervisory bodies and healthcare insurers;
- insight into physicians' responsibility for quality and how they take on this responsibility.

The Quality Framework serves as a guideline for all specialists and for physicians who have undergone recognised limited training in a specific area. It is also a guide for associations in developing specialism-specific quality policy.

Overall summary of quality requirements

The Quality Framework sets out recommendations for the promotion, assurance and reporting of medical care quality. It provides physicians and scientific associations with an overall summary of the prevailing quality requirements, thereby offering certainty. Physicians who follow the recommendations can rest in the knowledge that they are complying with all applicable quality guidelines. This also helps to reduce undesired variation and lack of clarity within the medical profession. In addition, the quality framework helps the care sector to meet the transparency, quality and safety requirements imposed on it by society.

The Quality Framework sets out specific recommendations based on eight quality aspects:

- 1. Physician competence and activities;
- 2. Accredited professional development (for example continuing education courses, conferences, reference meetings, e-learning, assessment groups, writing articles etc.);
- 3. Guidelines and standards;
- 4. The provision of information to, and consultation with, patients;
- 5. The reporting of complications, incidents and emergencies;
- 6. Quality and safety indicators;
- 7. Team quality review (performance review for a team of physicians, a department, a partnership at a hospital etc.);
- 8. Individual quality review (performance review for an individual physician).

Specific content of the quality framework

The Quality Framework provides scope for specialists' scientific associations to formulate a "quality superstructure" for their specialism; this could, for instance, involve specialism-specific guidelines and quality requirements.