Independent physician-owned practices adopt more quality improvement strategies
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Little is known about what determines strategy implementation around quality improvement (QI) in small and medium-sized primary care practices. New research led by George Mason University's College of Health and Human Services found that independent, physician-owned practices, adopted more QI strategies than hospital-owned practices and community clinics.

Dr. Tulay Soylu, currently assistant professor of instruction at Temple University, led the study published in the Journal of General Internal Medicine in collaboration with George Mason faculty for her dissertation in Mason's Health Services Research Ph.D. Program. The study was a component of a larger practice-level intervention, Heart of Virginia Healthcare, which provided technical assistance to primary care practices in Virginia to improve cardiovascular care. An observational study design surveyed 175 small and medium-sized primary care practices in Virginia to examine how practice characteristics (such as location, size, ownership, and whether they were part of accountable care organizations) and practice readiness to change affected quality improvement (QI) efforts.

The study found that independent, physician-owned practices adopted more changes than hospital-owned practices and community clinics. "The independent practices focused more on patient care coordination (such as developing a care plan and managing medication) rather than organizational improvement strategies (such as optimizing teams or workflow)," explains Soylu. Community clinics appear to need additional time to implement QI activities, as they face greater financial challenges and often serve sicker patients.

"Adopting evidence-based QI strategies should be part of transforming primary care so practice can track population health, enhance patient experiences and outcomes, reduce costs, and improve provider experience," explains Soylu. "A strong foundation of primary care is essential for the US healthcare system and the COVID-19 pandemic has underscore this need," explains Soylu.

This study provides empirical evidence to primary care practices and policymakers, which highlights the importance of the strategy implementation variation by practice characteristics. QI authorities should consider these characteristics before designing a QI intervention.


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