Context
The QI Wheel for Primary Care

This simple visual representation of quality improvement for primary care gives a quick overview of QI. It illustrates the main elements to consider in design, delivery and evaluation of a QI project, acting as a guide to the stages involved. The QI wheel is made up of five rings:

- **Culture and context** – to help you create the right conditions for a successful project.
- **QI cycle** - to guide you through project implementation
- **Patient involvement** - providing ideas to harness vital patient input for successful improvements
- **Engagement** - to provide ideas on which stakeholders to engage and how to involve them
- **Improvement science** - to provides you with the big picture context that your QI work fits into

1. **Context and Culture**

‘Context and Culture’ is at the centre of the wheel as without this element being keen to experiment, and supportive of trying something new, it will be hard for change to occur, or be sustained, regardless of what tools or methods you use.

Culture and context are the soil in which the intervention will germinate. The soil needs to be as favourable as possible to ensure the intervention is successful. Context is the local and national environment in which you operate. Culture covers your practice values, attitudes and ways of working, including your practice team, patients and stakeholders.

2. **The QI Cycle**
These are the implementation steps for a cycle of quality improvement. It is broken down into four steps. Consider each of the 4 steps as a way of framing the implementation of your QI project:

- **Step 1:** Diagnose - Assess the area of your practice or organisation that requires improvement, and generate some baseline data
- **Step 2:** Plan and Test - Decide the aims, methods and monitoring of your change. You can also test your intervention in a graded fashion
- **Step 3:** Implement and Embed - Make any successes part of your systems or processes
- **Step 4:** Sustain and Spread - Consider how your aims or intervention can continue to be implemented on a larger scale, if appropriate, and how the conclusions can be made more widely available.

3. **Patient Involvement**

Patients are part of your culture and context. Involving them in our QI work means we see our work through the eyes of the people who need our care. This helps us to design, implement and evaluate each individual quality improvement project. The position of the patient involvement ring indicates it acts as scaffolding, to support any QI project.

4. **Engagement**

Engagement represents all stakeholders relevant to your project. You will have internal stakeholders in your own practice and external stakeholders such as pharmacists, social care services, and health infrastructure bodies at the local and national level. In a similar way to patients, your stakeholder involvement can support the different stages of your QI project.

5. **Improvement Science**

Improvement science is research to identify and demonstrate the best and most appropriate methods for improvement in the quality and safety of health services. Improvement science is the 'containing' ring because it is the big picture context for your QI work. Once you have made progress on your QI journey and have gained confidence using the approach explained in this guide, the Improvement science section signposts you to other improvement methodologies that you and your team may wish to explore.