Improving the quality of care and of services has to be a core objective of individual clinicians, their professional bodies and the NHS itself.

The Academy of Medical Royal Colleges believes that quality improvement and other qualitative methods such as well-executed clinical audit should be valued equally alongside the more traditionally understood research methods in the pursuit of better quality care for patients.

High quality scientific based research methodology using randomised controlled trials will continue to be at the core of scientific advances. Quality improvement methodology enables the translation of research into practice and needs to be seen as an equal partner in implementing best practice for patients. In many cases, (for example the Improving the Flow of Older People work done in Sheffield, and the Sentinel Stroke National Audit Programme), such work can have more direct impact on patient care than poorly carried out research studies.

Quality improvement should be seen as an integral part of everyone’s responsibility to identify elements of their work that could be done better, rather than an optional add-on for others to pursue. It is about using real-time measurement of change to improve the processes involved in treating our patients and ensuring the best outcomes for them. This in turn provides better job satisfaction, and efficiency and safety of care, with knock-on effects on our healthcare budgets.

Our report Quality improvement – training for better outcomes has produced clear recommendations for all stakeholders involved in medical training to ensure that quality improvement education is embedded from undergraduate to postgraduate levels and beyond. This aligns with the recent statement that “the NHS in England cannot meet the health care needs of the population without a sustained and comprehensive commitment to quality improvement as its principal strategy”.

The new Generic Professional Capabilities framework from the GMC also includes a requirement for quality improvement within curricula and assessment, thus making this an obligation on all colleges.

We recognise that quality improvement work must be an integral part of primary, secondary and social care, and that it must be core to the training and activity of all health and social care staff across all disciplines.