



**Exploring Medical
Interns' Experiences in
Conducting Quality
Improvement Projects
during Family Medicine
Rotation in Ekurhuleni.**

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Introduction

- Quality improvement in healthcare improves patient care and empowers clinicians.
- In 2021, HPCSA introduced a structured family medicine rotation in year 2 of internship.
- To strengthen training in the district health system, particularly at the primary healthcare level.
- Medical interns conduct Quality Improvement Projects during this rotation.
- Experiences of medical interns in conducting Quality Improvement Projects at primary healthcare remain unknown.



Aim

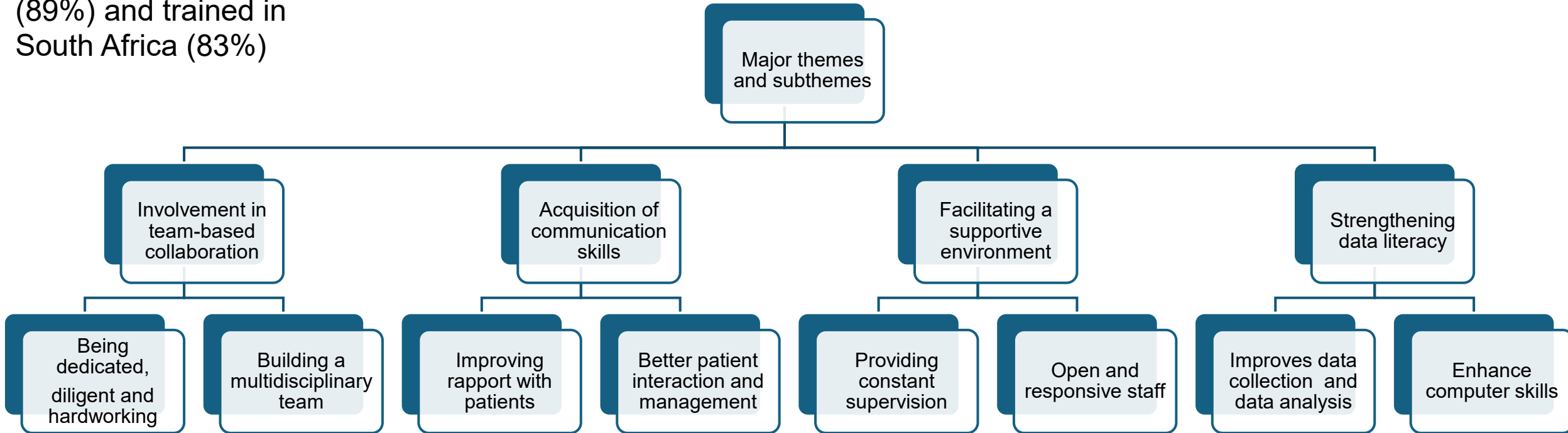
To explore experiences of medical interns conducting quality improvement projects during Family Medicine rotations in primary healthcare facilities in Ekurhuleni.

Methodology

- Qualitative study with purposive sampling of 18 second-year medical interns during Family Medicine rotations.
- Jabulani Dumane CHC & Mary Moodley Memorial CDC.
- In-depth interviews conducted Dec 2024 – Jun 2025, lasting 30–45 minutes.
- Thematic analysis performed.

Results

Mean age was 26.6 years (range 24–40), most were female (89%) and trained in South Africa (83%)



Results

Theme 1: Involvement in team-based collaboration

Interns highlighted that team dedication and collaboration were essential for successfully completing the QIP and improving patient care.

"And I think I was very lucky also in that I had quite a diligent and hardworking group, and we were a lot of types, a lot of personalities who also just wanted to get the work done." (Participant 4).

Theme 2: Acquisition of communication skills

Participants emphasised that building rapport through trust and open communication was key to achieving better QIP outcomes.

"I think it's a skill that I will take moving forward, communicating with patients effectively. And I think this QIP has taught me better communication skills to be able to pry the answers that are needed to help them, because the patient does not necessarily know what... Uhm, things to share with me as a doctor that might affect the outcome." (Participant 9)

Results

Theme 3: Facilitating a supportive environment

A supportive work environment, marked by openness and responsiveness, helped interns transition from theory to practice through approachable and helpful colleagues.

“They were very amenable to helping us find a problem. Our supervisor and nurses were also helpful.” (Participant 7)

Theme 4: Participants stressed that QIP enhanced their data skills, critical thinking, and evidence-based decision-making, fostering continuous improvement and accountability.

“So, I learned a lot about data collection, data interpretation and presentation.” (Participant 8)

Discussion

QIPs enhancing Skills & Service:

- Service improvement tools and experiential learning platforms.
- Skills crucial for resource-constrained clinical practice.
- Team-based collaboration was vital for QIP success.
- Improved communication skills are transferable outcomes.
- Supportive environments enable learning and intern engagement.



Strengths and limitations:

Strengths:

Flexible, detailed, cost-effective, and integrates human touch.

Limitations:

- Selection bias, subjectivity, and limited generalizability.
- Bias mitigated by verbatim transcription of interviews and member checking.
- Themes identified are relevant to similar primary healthcare contexts in South Africa and other LMICs.

Conclusion

- Improving health service quality
- Developing essential competencies among medical interns.

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ACKNOWLEDGEMENTS:



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