**One Process, Many Names: Learning and Improvement as the Core of Physician Practice**

“Everyone in healthcare really has two jobs when they come to work every day: to do their work and to improve it.”

- Physicians must commit to continuous learning and improvement to fulfill their social contract with the public.
- Implicit in the ability to improve is the concept of learning—how can improvement occur without learning from successes and failures?
- Learning and improvement theories and processes describe the same three basic steps:
  - Attending to what happens before the performance, experience, or action
  - Attending to what happens in real time during the performance, experience, or action
  - Attending to what happens as a result of the performance, experience, or action
- The figure below illustrates the overlap for each of these steps across a range of common learning and improvement theories/models.

**Self-Regulated Learning Relationship to Other Learning and Improvement Theories**

- This common cycle for learning and improvement applies to individuals and systems alike.
- Many variables can serve as facilitators or barriers to this process.
- Interactions between these variables affect the degree to which they act as facilitators or barriers.

**Select Factors Influencing Learning and Improvement Cycle**

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- MANY variables can serve as facilitators or barriers to this process.
- Interactions between these variables affect the degree to which they act as facilitators or barriers.

**Continuous learning and improvement follow a common process for individuals and systems with multiple variables serving as facilitators or barriers.**

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**References:**

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