



PEER GROUPS

An innovative approach to continuing education in Primary Health Care

The Health for All Project (HAP) implemented the Peer Group model for the first time in 2015 and has since supported their strengthening as an innovative and effective approach to continuing education in Primary Health Care (PHC) in Albania. Over nearly a decade, PGs have evolved from a HAP-supported pilot initiative into an institutionalised mechanism for professional development and continuous quality improvement in PHC. They have contributed to translating national clinical protocols into daily practice, strengthening teamwork, and standardising care across the primary healthcare system.



Rationale and Need for Peer Groups

1. Limited continuing education (CE) opportunities and programs tailored to the needs of PHC providers (family physicians and family nurses), which forces them to attend educational activities designed for other specialities.
2. The lack of robust and active representation of family physicians and nurses in professional organisations hinders their ability to shape and provide relevant continuing education programs adapted to their profession.
3. Ongoing need to equip health care providers with the knowledge and skills required to address evolving community health issues driven by demographic changes and advances in medicine.

What are Peer Groups

Peer Groups (PGs) are a structured form of continuing education through which physicians, nurses, psychologists, social workers and other health professionals meet to share experiences, analyse cases and reflect on their practice. Through the discussion of evidence-based guidelines alongside real-world clinical and organisational challenges, PGs support participants in identifying gaps in practice, reducing errors and aligning care with recognised best practices.

Unlike traditional training, Peer Groups are:

- » Practice-based and problem-oriented
- » Interactive and participatory
- » Supportive of the emotional, psychological and well-being of peers
- » Implemented in the workplace
- » Responsive to the real training needs of PHC providers

Why Peer Groups Matter

Peer Groups help to:

- » Translate national guidelines and protocols into everyday practice
- » Improve clinical skills and professional confidence
- » Strengthen teamwork and interdisciplinary collaboration
- » Support behavioural change in clinical practice
- » Create a culture of lifelong learning, reflective practice and professional accountability
- » PGs help physicians and nurses collect the credits required for relicensing.



How Peer Groups are Organised

Group composition

8–10 primary health care professionals (physicians, nurses, psychologists, social workers, etc.).

Facilitation

A trained facilitator leads each group, steering the learning process by supporting topic selection, planning and moderating meetings, and managing accreditation and reporting requirements.

Meetings

Typically, monthly for 1-2 hours over cycles of 4-6 sessions, using interactive methods such as case discussions, guideline review, problem-solving, role play, and reflection on everyday clinical practice.

Topics

Any PHC-relevant topic selected by the group based on local needs and health system priorities.

Accreditation

Formally accredited as continuing medical education in Albania, with credits awarded based on total hours completed per cycle in line with national regulations approved by the Council of Ministers.

Why accreditation matters

Accreditation provides formal professional recognition, supports relicensing requirements, strengthens motivation for participation, and enhances the long-term sustainability of the peer learning system within primary health care.



HAP'S CONTRIBUTION

- » Official recognition of Peer Groups as an accredited continuing education activity, Decision of Council of Ministers No. 788, dated 22 September, 2015;
- » Elaboration and Approval of the Peer Group Guide in collaboration with the Agency for Quality Assurance of Health and Social Care (AQHC) — published in 2019 and revised in 2021, 2022, and 2023.
- » Training of facilitators on facilitation techniques, meeting moderation, and communication.
- » Support Peer Group set-up initiatives;
- » Development of training materials with a strong didactic component (CGPs, manuals etc);
- » Provision of training materials for all participants;
- » Producing evidence on Peer Groups as an effective tool for continuing education and for strengthening PHC.

Scale of Implementation

National Reach

- » 5237 participants have attended Peer Groups (2023-2026), including physicians, nurses, psychologists and social workers;
- » 166 out of 216 HCs in 21 Local Units of Health Care have successfully implemented Peer Groups in the period April 2019 – March 2026.

Effects of Peer Groups on Clinical Practice

Peer Groups have been instrumental for the implementation in PHC of:

- » Clinical Guidelines and Protocols (CGPs) for diabetes, dyslipidaemia, hypertension, asthma, COPD,
- » CGPs for management of mental health disorders
- » CGPs for elderly people's care
- » Standardised basic and advanced nursing procedures for home care services.

RESULTS AND IMPACT

An evaluation conducted in Albania in 2025¹ found that Peer Groups have generated significant benefits in three key areas.

Improved Clinical Practice and Service Quality

- » Increased use of new clinical protocols and guidelines;
- » Better standardisation of care;
- » Enhanced clinical skills and confidence leading to more effective care for patients;
- » Expanded professional roles, particularly for nurses, psychologists and social workers.

Stronger Interdisciplinary Collaboration and Teamwork

- » Clearer division of roles and responsibilities
- » Better teamwork among health centre staff
- » Increased mutual support and trust
- » More active participation of all team members in patient care

Contribution to the Implementation of National Health Policies and Strategies

- » Strategy for Development of PHC, 2020–2025
- » National Program on NCDs, 2021–2030
- » Integration of mental health, elderly care, and home care into PHC services, etc.



¹ Policy Brief: "The Evaluation Of Peer Groups As An Effective Approach To Continuing Education For Primary Health Care Providers In Albania", prepared by: Assoc. Prof. Jolanda Hyska, July 2025.