

What is the evidence for the effectiveness, appropriateness and feasibility of group clinics for patients with chronic conditions? A systematic review

Andrew Booth,* Anna Cantrell, Louise Preston,
Duncan Chambers and Elizabeth Goyder

School for Health and Related Research (ScHARR), University of Sheffield,
Sheffield, UK

*Corresponding author

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Plain English summary

Group clinics for patients with chronic conditions

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Group clinics deliver care to small groups of patients with the same condition at the same time rather than each patient meeting a doctor on a one-to-one basis. We wanted to find out whether or not group clinics worked better and were a better use of resources than one-to-one appointments. We also wanted to find out what patients and health professionals thought about group clinics.

We have assembled the largest number of relevant studies to date (82 papers reporting 69 research projects). We looked at research about people with long-term conditions only (e.g. diabetes or heart disease). We focused on how people manage their condition and not on using a group setting for teaching.

Most research focused on people with diabetes. We found that group clinics were better than individual appointments for improving some measures of how well diabetes is controlled. Group clinics also improved the quality of life of patients. However, we did not find any other improvements for patients. Patients and health professionals tend to view group clinics positively. However, the research did not tell us much about the views of people who disliked group clinics. Several studies looked at whether or not group clinics save money but the results were unclear. Although we were interested in group clinics as an alternative to one-to-one appointments, most studies combined group approaches with an individual consultation. Most studies took place in the USA. More research is needed to see whether or not group clinics are acceptable and good value for money in the NHS.

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Editorial contact: nihredit@southampton.ac.uk

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