5 health system benefits realised from adopting



Research shows that compared to usual care, the following system benefits are derived when care is delivered as a group consultation or shared medical appointment



NESTA found that consultants applying group clinics in outpatient settings saw 15 patients in the time it had previously taken to see 9; a 40% productivity gain

Reduced bed days

Jones et al found a 50% reduction in psychiatric bed days at 6 months; an impact sustained at 2 years. Ickovics et al found babies whose mothers had group antenatal care needed fewer neonatal intensive care bed days

Reduced A&E use and emergency admissions

Compared to usual care, Croydon psychiatrists saw a 30% reduction in A&E admissions; Clancy et al found reduced A&E attendances in type 2 diabetics; Scott et al found people with LTCs had fewer emergency admissions

Lower care and societal costs

Seager et al estimated annual savings of 65.1% from group bariatric surgery clinics; Miller et al found reduced costs for patients with LTCs, sustained at 2 years

Reduced waiting times

Kaider-Person et al found compared to usual care, group clinics reduced waiting, times for new and follow up patients. Oehlke found that group clinics reduced waiting times from 3 months to 3 weeks



.....



Improved patient and staff satisfaction

Bartley, Cohen and Egger reported significant improvements in patient and clinician satisfaction with group clinics compared to usual care. This translated into patients choosing group clinics over one to one appointments for future care in a number of studies

References

Efficiency gains (clinician time)

https://www.nesta.org.uk/sites/default/files/redefining_consultations.pdf

Reduced A&E use and emergency admissions NESTA and nef (2012) 'People Powered Health Co-production Catalogue.' London: Nesta and new Clancy DE, Cope DW, Magruder KM, Huang P, Wolfman TE. Evaluating concordance to American Diabetes Association standards of care for type 2 diabetes through group visits in an uninsured or inadequately insured patient population. Diabetes Care 2003; 26(7):2032-2036.

Clancy DE, Dismuke CE, Magruder KM, Simpson KN, Bradford D. Do diabetes group

visits lead to lower medical care charges?.[Erratum appears in Am J Manag Care. 2008;14(2):76]. Am J Manage Care 2008; 14(1):39-44. Scott JC, Conner DA, Venohr I, Gade G, McKenzie M, Kramer AM, et al. Effectiveness of a group outpatient visit model for chronically ill older health maintenance organization members: a 2-year randomized trial of the cooperative health care clinic. Journal of the American Geriatrics Society 2004;52(9):1463-70.

Reduced bed days

Jones, B., Juett, G. and Hill, N. (2012) A Two-model Integrated Personality Disorder Service: Effect on Bed Use. 'The Psychiatrist.' 36, No.8 (8 January 2012), pp.293-298, doi:10.1192/ pb.bp.111.036384. Ickovics JR, Earnshaw V, Lewis JB, Kershaw TS, Magriples U, Stasko E, Rising SS, Cassells A, Cunningham S, Bernstein P, Tobin JN. Cluster Randomized Controlled Trial of Group Prenatal Care: Perinatal Outcomes Among Adolescents in New York City Health Centers.Am J Public Health. 2016 Feb;106(2):359-65.

Reduced care and societal costs

Seager MJ, Egan RJ, Meredith HE, Bates SE, Norton SA, Morgan JDT. Shared Medical Appointments for Bariatric Surgery Follow-up: a Patient Satisfaction Questionnaire. Obes Surg 2012;22:641–645. Miller D, Zantop V, Hammer H, Faust S, Grumbach K. Group medical visits for low- income women with chronic disease: a feasibility study. Journal of Women's Health 2004;13(2):217-225.

Reduced waiting times

Kaidar-Person O, Swartz EW, Lefkowitz M, et al. Shared medical appointments: new concept for high-volume follow-up for bariatric patients. Surg Obes Relat Dis 2006;2:509-12. Oehlke KJ, Whitehill DM, Shared Medical Appointments in a Pharmacy-based Erectile Dysfunction Clinic.Am J Health Syst Pharm. 2006;63(12):1165-1166.

Improved patient and staff satisfaction Bartley KB, Haney R: Shared medical appointments: improving access, outcomes, and satisfaction for patients with chronic cardiac diseases. Journal of Cardiovascular Nursing 2010;25:13–19. Cohen S. Patient satisfaction and perception of value with shared medical appointments. Communicating Nursing Research

2012;45:397. Egger G, Dixon J, Meldrum H, Binns A, Cole M, Ewald D et al. Patients' and providers' satisfaction with shared medical appointments. Australian Family Physician 2015;44(9):674-679.

Infographic created by Georgina Craig, The ELC Programme and Dr Abigail Morbi, Imperial College

For more information on group clinics and how to set them up in your area, contact: Email: georgina@elcworks.co.uk Tel: 07879 480005