Effectiveness of Small Group Learning in Postgraduate General Practice Education: A Systematic Review

Introduction

- Small group learning is commonly used in general practice (GP) postgraduate training and continuing medical education.
- Several previous systematic reviews have looked at the effectiveness of small group learning in continuing medical education and found mixed results.
- A review of the literature did not reveal any previous systematic reviews looking specifically at the effectiveness of small group learning in general practice postgraduate education.

Objectives

To systematically identify the evidence relating to the effectiveness of small group learning in general practice postgraduate education and to appraise and synthesise it to answer the research question and highlight areas for future research.

Methods

Search Strategy

Ovid Medline, EMBASE and ERIC were searched from inception until July 2015. Reference lists of included studies were examined to identify any further potential studies for inclusion.

Selection Criteria

experimental and observational evaluation Experimental, quasi studies that reported an objective measure of participants' knowledge, professional practice or patients' health.

Data collection and analysis

Predefined relevant data was extracted from the included studies. Quality assessment was performed on the included studies using a quality assessment tool. A narrative synthesis was performed.

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Murrihy et al.2009

Conclusions Results Seventeen studies were identified for inclusion. Ten studies measured participants' knowledge as an significance of the results. Table 1: Results of studies reporting change in patients' health as an outcome Study Statistically significant findings in favour of size, settings and topics covered. small group learning? • Demonstrating the effectiveness of small group learning in a Small group learning versus no intervention Casebeer et al., 1999 Yes a wide variety of contexts. Improved patient health • Gaps in the reporting of information regarding the intervention in Change in professional practice giving the method its value. Change in participants' knowledge • There was insufficient information in the reports of the included Satisfaction of respondents comparison of studies based on quality impossible. Participation • Thus, while this review may suggest that small group learning can Figure1: Kirkpatrick's Hierarchy Table 3: Results of studies reporting change in participants' knowledge as an outcome **Statistically significant** findings in favour of small group learning? References Small group learning versus no intervention Gongora-Ortega et al.2012 No Journal of Cardiology, vol. 14, no. 7, pp. 911-916. Information not available* Association of American Medical Colleges, vol. 74, no. 12, pp. 1334-1339. Yes randomized controlled trial.", M.D.computing : computers in medical practice, vol. 16, no. 3, pp. 54-58. Small group learning versus another teaching method Asthma and Immunology, vol. 93, no. 3, pp. 237-242. education on headache diagnosis and management.", Medical education, vol. 32, no. 6, pp. 590-596. No Prescription in Primary Care: A Pragmatic Randomized Controlled Trial, J. B. Lippincott Williams and Wilkins Inc. Yes BMC Medical Education, vol. 12, pp. 53. Gongora-Ortega et al.2012 No hypertension in primary care.", *Family practice,* vol. 21, no. 5, pp. 575-581. of clinical epidemiology, vol. 52, pp. 801-812. Yes de famille canadien, vol. 47, pp. 557-563. No distributed practice and patient discussion", Medical education, vol. 43, no. 2, pp. 140-145. Journal of the Association of American Medical Colleges, vol. 69, no. 10, pp. 800-802 Small group learning – pre and post design vol. 20, no. 2, pp. 199-206. Family medicine, vol. 43, no. 5, pp. 334-337. Information not available

Information not available Yes

Fourteen of the 17 studies included in this review reported at least one outcome in favour of small group learning, and in 12 of these the author provided information demonstrating the statistical

Borduas F, Carrier R, Drouin D, Deslauriers D & Tremblay G 1998, "An interactive workshop: An effective means of integrating the Canadian Cardiovascular Society clinical practice guidelines on congestive heart failure into Canadian family physicians' practice.", Canadian Casebeer, L.L., Klapow, J.C., Centor, R.M., Stafford, M.A., Renkl, L.A., Mallinger, A.P. & Kristofco, R.E. 1999, "An intervention to increase physicians' use of adherence-enhancing strategies in managing hypercholesterolemic patients", Academic Medicine: Journal of the Chan, D.H., Leclair, K. & Kaczorowski, J. 1999, "Problem-based small-group learning via the Internet among community family physicians: a Davis, R.S., Bukstein, D.A., Luskin, A.T., Kailin, J.A. & Goodenow, G. 2004, "Changing physician prescribing patterns through problem-based I earning: An interactive, teleconference case-based education program and review of problem-based learning.", Annals of Allergy, Doucet, M.D., Purdy, R.A., Kaufman, D.M. & Langille, D.B. 1998, "Comparison of problem-based learning and lecture format in continuing Figueiras, A., Sastre, I., Tato, F., Rodríguez, C., Lado, E., Caamaño, F. & Gestal-Otero, J. 2001, One-to-One versus Group Sessions to Improve Gongora-Ortega J, Segovia-Bernal Y, Valdivia-Martinez Jde J, Galaviz-DeAnda JM & Prado-Aguilar CA 2012, "Educational interventions to improve the effectiveness in clinical competence of general practitioners: problem-based versus critical reading-based learning." Herbert, C.P., Wright, J.M., Maclure, M., Wakefield, J., Dormuth, C., Brett-MacLean, P., Legare, J. & Premi, J. 2004, "Better Prescribing Project: A randomized controlled trial of the impact of case-based educational modules and personal prescribing feedback on prescribing for Lundborg, C.S., Wahlström, R., Oke, T., Tomson, G. & Diwan, V.K. 1999, "Short communication: Influencing Prescribing for Urinary Tract Infection and Asthma in Primary Care in Sweden. A Randomized Controlled Trial of an Interactive Educational Intervention", Journal Marshall, J.N., Stewart, M. & Ostbye, T. 2001, "Small-group CME using e-mail discussions. Can it work?.", Canadian family physician Medecin Murrihy, R.C., Byrne, M.K. & Gonsalvez, C.J. 2009, "Testing an empirically derived mental health training model featuring small groups, Premi, J., Shannon, S., Hartwick, K., Lamb, S., Wakefield, J. & Williams, J. 1994, "Practice-based small-group CME", Academic Medicine: Richards, D., Toop, L. & Graham, P. 2003, "Do clinical practice education groups result in sustained change in GP prescribing?", Family practice, Stephens MB, McKenna M & Carrington K 2011, "Adult learning models for large-group continuing medical education activities.", Verstappen, W.H.J.M., Weijden, T.v.d., Sijbrandij, J., Smeele, I., Hermsen, J., Grimshaw, J. & Grol, R.P.T.M. 2003, "Effect of a practice-based strategy on test ordering performance of primary care physicians: a randomized trial", JAMA, The Journal of the American Medical Association, no. 18, pp. 2407. White, M., Michaud, G., Pachev, G., Lirenman, D., Kolenc, A. & FitzGerald, J.M. 2004, "Randomized trial of problem-based versus didactic seminars for disseminating evidence-based guidelines on asthma management to primary care physicians.", The Journal of continuing education in the health professions, vol. 24, no. 4, pp. 237-243.

Studies varied greatly in terms of the types, duration and frequency of intervention, the nature of the control group, sample

heterogeneous group of studies like these may make the findings more generalisable, suggesting small group learning is effective in

some studies makes it difficult to dissect out important factors

studies regarding study quality which made a meaningful

be effective in postgraduate general practice education, the results should be interpreted with caution and further research is needed.