It is important for the physical therapy profession to look for and identify what is the right amount of physical therapy that ensures a patient the optimal outcome. Research demonstrates that group rehabilitation may be as equally effective as individual therapy in specific situations or for certain patient populations. The mode of skilled physical therapy must be supported clinically and well documented. The decision to use skilled group physical therapy in any setting should be based on patients’ needs and clinical presentation.

**RESEARCH ON THE VALUE OF GROUP REHABILITATION**

**Group Format Rehabilitation Is Equally Effective as Individual Therapy in Patients With Surgically Repaired Rotator Cuff Tears** [Physiother Res Int. 2019; June 23:e1795]

**Conclusion:** Group physiotherapy may be as effective as individual formats in improving active range of motion and functional outcomes of participants with surgically repaired rotator cuff tears. Further research is needed to determine the optimal age range for group therapy interventions in this population.

**A Hospital-Based Fall Prevention Program in the Community: Opportunities for Frail Older Adults to Participate in Ongoing Physical Activity** [Healthc Q. 2018; 21(3):64-70]

**Conclusion:** Older adults who participated in a hospital-based falls prevention program were able to continue engaging in physical activity after completing the 6-week program. Participants sustained gains with the support of an interdisciplinary comprehensive falls risk assessment, individualized goal setting, group exercise and education, home visits by health professionals when needed, and partnership with community agencies for follow-up exercises.


**Conclusion:** Patient education followed by basic body awareness therapy (BBAT) in groups may benefit patients with hip osteoarthritis. Movement awareness and exploration of movement quality BBAT principles helped patients find resources for daily functional movement. Also, implementing group therapeutic factors in physiotherapy was found to strengthen patients’ motivation and belief in functional improvement.

**The Effectiveness of an Exercise Programme on Dynamic Balance in Patients With Medial Knee Osteoarthritis: A Pilot Study** [Knee. 2016; 23(5):849-56]

**Conclusion:** An exercise program using the star exclusion balance test was found to be effective in improving dynamic balance in patients with knee osteoarthritis. Dynamic balance is required in different activities of daily living in which patients might be at risk of falling. This improvement may be attributed to increased muscle strength and decreased pain following the program.


**Conclusion:** The results suggest that standard cardiac rehabilitation programs are a feasible and effective means of reducing the risk of future cardiovascular events for patients after minor stroke and transient ischaemic attack.


**Conclusion:** A functional program of non-weight-bearing group exercising was found to improve functional status, pain status, lumbar flexion, and extension ranges of motion in women suffering from nonspecific chronic low back pain.


**Conclusion:** This study highlights the positive experiences and value of group exercise classes for groups of people with diverse cancer and noncancer conditions. The physical, emotional and psychosocial benefits suggest that hospices and other palliative services should explore similar programs as part of their rehabilitation services.
Conclusion: Supervised group exercise training was found to be effective in improving balance, functional status, spasticity, fatigue, and quality of life in moderately affected people with multiple sclerosis, with no worsening of their clinical status.

Conclusion: The community-based group exercise program was found to be safe, feasible, and effective. While some measures showed no improvement, there was no evidence of decline. This is an important outcome for people with progressive neurological disorders and suggests that community-based group exercise is a promising option for people with Parkinson disease.

Conclusion: Group rehabilitation was found to reduce back pain and to improve functional status and quality of life in women with postmenopausal osteoporosis, who were able to maintain these outcomes for 6 months. The use of physical exercises might strengthen the habit to training.

Conclusion: Given that adherence to adaptive physical activity is the key predictor of improved back pain, the study suggests that future efforts should focus on strategies to improve adherence.

Conclusion: Group rehabilitation integrated with individual treatments was shown to be more effective than individual treatments alone in improving independence measured by the FIM™ scale. While both study groups obtained statistically significant clinical improvements, the improvement in the FIM™ scale was significantly better in the integrated treatment group.

Conclusion: Evidence shows that rehabilitation in a group format results in equivalent clinical outcomes to similar therapy in an individual format in the treatment of back pain and urinary incontinence.

Conclusion: Inpatient group therapy task training for patients with moderate to severe stroke was shown to be safe and as effective as a dose-matched individual therapy task training. Task training in a group format may be delivered as an alternative to individual therapy or in addition to it as a way to increase time spent in gait-related activities.

Conclusion: A group-based program was found to be safe and acceptable to older adults with impaired mobility and resulted in potentially clinically meaningful improvements in mobility.

Conclusion: Delivery method and the presence of common comorbidities impact the success of rehabilitation for people with Parkinson disease. Researchers found: 1) home exercise was least effective at improving mobility; 2) individually treated participants improved the most in balance and functional measures; 3) group class participants improved mainly in gait measures; and 4) the presence of certain comorbidities limited success of interventions primarily for home exercise participants.

Conclusion: The results of the study suggest the need for greater involvement from all health professionals in motivating older adults to attend exercise groups. The results also suggest that physical therapists should be more aware of the importance of comparative levels of physical function when including participants in exercise groups.