

Shared decision making implementation: a case study analysis to increase uptake in New South Wales

Tara Dimopoulos-Bick and Regina Osten

Recap ... what is shared decision making?





- Shared decision making is a process of involving patients in making informed and preference-based decisions about their care and treatment
- Patient decision aids present evidence-based information about treatment options, the benefits and harms of each and can be used to guide patients through the decision-making process

Shared decision making ...





- Positions patient involvement as an accepted right
- A strategy for reducing unwarranted variation and promoting personcentred care (Australian Atlas of Healthcare Variation, 2017)
- A focus in Standard 2: Partnering with Consumers
- Slow to be adopted in Australia despite the emerging evidence base
- Identified as a complex system challenge (ACI Strategic Plan, 2019-2022)

Case study analysis





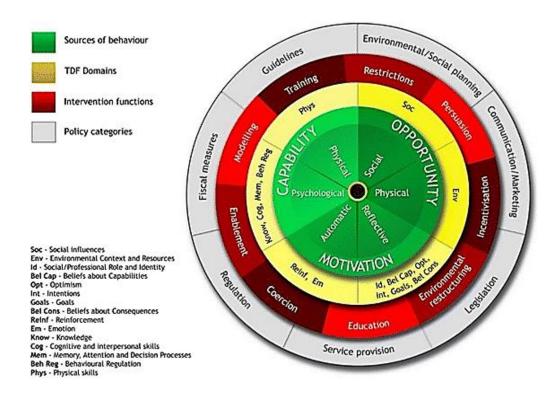
- Identify potential implementation interventions to increase the uptake of shared decision making in NSW Health
- Understand the barriers to implementing shared decision making locally
- Understand what theoretically informed and evidence-based interventions help increase the uptake of shared decision making

Case study analysis





- Surveyed participants who attended a one day masterclass held by
 ACI in May 2017 (n = 53 of 83 participants)
- Applied the theoretical domains framework, COM-B ('capability',
 'opportunity', motivation' and 'behaviour') model and behaviour
 change wheel
- Examined the barriers and identified ways to increase the uptake of shared decision making in NSW Health







Theoretical domains framework (TDF), COM-B ('capability', 'opportunity', motivation' and 'behaviour') model and the behaviour change wheel (BCW). Reprinted with permission from Susan Michie

Barriers





Identified across nine of the 14 theoretical domains: knowledge, skills, professional role and identify, beliefs about capabilities, beliefs about consequences, reinforcement, environmental context and resources, social influence and emotion

Environmental context and resources





- Time constraints
- Competing priorities
- Limited access to resources –
 about shared decision making,
 patient decision aids and high quality synthesised evidence

"We need simple resources,
for both clinicians and
patients, which are readily
available"

Professional role and identity





- Expert culture
- Influence among health professionals
- Paternalistic practices

"The medical model dominates the relationship between the patient and the health professional"

Knowledge AND Skills





- Lack of awareness and knowledge of what shared decision is and isn't
- Health professionals are not experienced in shared decision making

"Shared decision making is a skill that needs to be learnt by both patients and health professionals"

Recommendations





- 1. Attend to organisational culture and ensure resources are available to support the use shared decision making in clinical practice
- 2. Invest in education, training and modelling for health professionals
- Create opportunities for health professionals to apply new knowledge and skills in clinical practice with support

Recommendations





- 4. Embed shared decision making in clinical pathways, practice standards and clinical guidelines
- 5. Promote shared decision making through clinical and consumer hampions, advocacy organisations and speciality societies