Engaging health consumers through Shared Decision Making (SDM)

Consumer engagement empowers people to share in decision-making when it comes to their own health and the health of their families. Healthier Washington focuses on improving health care quality by providing opportunities for health care providers to learn skills and access high-quality tools to more actively engage patients and their families in the decision-making process.

Shared Decision Making is a collaborative process that allows patients and their providers to make health care decisions together, taking into account the best scientific evidence available, as well as the patient’s values and preferences.

Shared Decision Making honors both the provider’s expert knowledge and the patient’s right to be fully informed of all care options and the potential harms and benefits. This process provides patients with the support they need to make the best individualized care decisions, while allowing providers to feel confident in the care they prescribe.

Patient decision aids are tools that can help people engage in shared health decisions with their health care provider. Research shows that use of patient decision aids leads to increased knowledge, more accurate risk perception, and fewer patients remaining passive or undecided about their care.¹

With support from the Gordon and Betty Moore Foundation and input from state and national stakeholders, HCA has developed a process to certify high-quality patient decision aids (PDAs) for use by health providers and their patients in Washington State. Implementing the use of certified decision aids, as well as providing training to support the spread of shared decision making, is supported through a State Innovation Models (SIM) grant from the Center for Medicare and Medicaid Innovation (CMMI).

Washington is a first mover in Shared Decision Making

Shared Decision Making is just one of many innovative areas in health care that Washington State is taking a lead on. In 2007 Washington became the first state to pass legislation around shared decision making when the Blue Ribbon Commission bill (Chapter 259) enacted a shared-decision making pilot. The legislation also provided that if a provider uses a “certified decision aid” as part of the informed consent process that there is a presumption that informed consent has been given and obtained.

In 2012, state legislation granted the Health Care Authority’s chief medical officer the authority to certify patient decision aids. The certification criteria are guided by the work of the International Patient Decision Aid Standards (IPDAS) Collaborative, addressing the domains of content, development process and effectiveness.

Required Criteria Used to Certify Patient Decision Aids in Washington

Does the patient decision aid adequately:
1. Describe the health condition or problem
2. Explicitly state the decision under consideration
3. Identify the eligible or target audience
4. Describe the options available for the decision, including non-treatment
5. Describe the positive features of each option (benefits)
6. Describe the negative features of each option (harms, side effects, disadvantages)
7. Help patients clarify their values for outcomes of options by a) asking patients to consider or rate which positive and negative features matter most to them AND/OR b) describing each option to help patients imagine the physical, social (e.g. impact on personal, family, or work life), and/or psychological effects
8. Make it possible to compare features of available options
9. Show positive and negative features of options with balanced detail
10. If outcome probabilities are included, allow comparison across options using the same denominator
11. Provide information about the funding sources for development
12. Report whether authors or their affiliates stand to gain or lose by choices patients make using the PDA
13. Include authors/developers’ credentials or qualifications
14. Provide date of most recent revision (or production)
15. Follow plain language guidelines, to ensure understanding of people with low literacy and/or low health literacy skills

Additional Criteria for Screening and/Testing, if applicable:
16. Describe what the test is designed to measure
17. Describe next steps taken if test detects a condition/problem
18. Describe next steps if no condition/problem detected
19. Describe consequences of detection that would not have caused problems if the screen was not done
20. Include information about chances of true positive result
21. Include information about chances of false positive result
22. Include information about chances of true negative result
23. Include information about chances of false negative result

Does the Patient Decision Aid and/or the accompanying external documentation (including responses to the application for certification) adequately:
- Disclose and describe actual or potential financial or professional conflicts of interest?
- Fully describe the efforts used to eliminate bias in the decision aid content and presentation?
- Demonstrate developer entities and personnel are free from listed disqualifications in Attachment A?
- Demonstrate that the Patient Decision Aid has been developed and updated (if applicable) using high quality evidence in a systematic and unbiased fashion?
- Demonstrate that the developer tested its decision aid with patients and incorporated these learnings into its tool?
- Demonstrate that the patient decision aid or supporting document reports readability levels

For additional information about the Washington State Certification Program:
www.hca.wa.gov/about-hca/healthier-washington/shared-decision-making

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