The SHARE Approach
Essential Steps of Shared Decision Making

An Introduction to the SHARE Approach
presented by:
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Disclosures

- This presentation is adapted from the AHRQ SHARE Approach: Essential Steps for Shared Decision Making
- This presentation does not constitute the entire SHARE Training workshop
Module 1 – Learning objectives

At the conclusion of this activity, the participant will be able to:

- Define shared decision making.
- List critical elements required in effective shared decision making.
- Explain key steps for conducting shared decision making.
AHRQ is a Federal agency that is part of the U.S. Department of Health & Human Services.

AHRQ’s mission is to **produce evidence** to make healthcare safer, higher quality, more accessible, equitable, and affordable, and to work within the U.S. Department of Health and Human Services and with other partners to **make sure that the evidence is understood and used**.
AHRQ’s activities to support shared decision making

- Develops broad array of decision support resources
  - Patient decision aids
  - Clinician resources

- Training of healthcare professional on shared decision making
  - Train-the-trainer workshop and toolkit

- Engagement of patients in decision making
  - Questions are the Answer campaign
Modified Version of Module 1

Shared Decision Making and the SHARE Approach
The “What,” “Why,” and “When” of Shared Decision Making
Shared decision making occurs when a health care provider and a patient work together to make a health care decision that is best for the patient.

The optimal decision takes into account evidence-based information about available options, the provider’s knowledge and experience, and the patient’s values and preferences.
Recap: Why do shared decision making?

- Recognized as good clinical practice for providing patient-centered care.¹
- Patients want to be involved.²-³
- Improves patient satisfaction and experience of care.⁴
- May improve health outcomes for patients.⁵-⁸
- National policy and quality improvement initiatives promote shared decision making.⁹
When is shared decision making appropriate?

- alternative treatments for a condition
- decision must be made about which treatment to use.
- benefits and risks of options are closely balanced
- right option depends in part on the patient’s values and preferences.

**Some examples**

- Cancer screening (colorectal and prostate)
- Cancer treatment (early stage breast and prostate cancer)
- Hip and knee osteoarthritis
- Coronary artery disease
- Uterine fibroids and abnormal uterine bleeding
- Low back pain (spinal stenosis and herniated disc)
- Medications for a variety of chronic conditions (diabetes, depression, hypertension)
Brief Introduction to the “Who” and “How” of Shared Decision Making
The SHARE Approach is:

- A five-step process for shared decision making.
- Exploring and comparing the benefits, harms, and risks of each health care option.
- Meaningful dialogue about what matters most to the patient.
The SHARE Approach

- **Step 1:** Seek your patient’s participation
- **Step 2:** Help your patient explore and compare treatment options
- **Step 3:** Assess your patient’s values and preferences
- **Step 4:** Reach a decision with your patient
- **Step 5:** Evaluate your patient’s decision

Refer to page 2, Tool 2
AHRQ promotes the use of PCOR decision aids in shared decision making

Sharing decision aids with patients improves patient care and outcomes$^4$

- A growing body of literature shows that providing patients with decision aids regarding their health treatment or screening decisions can have positive results.
Sharing decision aids with patients improves patient care and outcomes

Sharing decision aids with patients:

- Improves patient knowledge regarding options
- Reduces decisional conflict
- Increases active role in decision making
- Improves risk perceptions of possible benefits and harms
- Patients’ choices are more consistent with their informed values
- Enhances communication between patients and their clinicians
Who is involved in shared decision making in the clinical setting?

- The entire medical team should be familiar with and involved in shared decision making.
Supportive materials from AHRQ

Decision support resources are an important part of the “how” of shared decision making.
Health Care Encounter Without Shared Decision Making

Video Presentation
Is this typical of the patient-provider interactions you’ve observed?

How satisfied is Rebecca with the outcome of the encounter? Why?

How satisfied is Dr. Miller with the outcome of the encounter? Why?
The **SHARE** Approach

Step by Step
The SHARE Approach
Essential Steps of Shared Decision Making

Five steps for you and your patients to work together to make the best possible health care decisions.

Step 1: Seek your patient’s participation
Communicate that a choice exists and invite your patient to be involved in decisions.

Step 2: Help your patient explore and compare treatment options
Discuss the benefits and harms of each option.

Step 3: Assess your patient’s values and preferences
Take into account what matters most to your patient.

Step 4: Reach a decision with your patient
Decide together on the best option and arrange for a followup appointment.

Step 5: Evaluate your patient’s decision
Plan to revisit decision and monitor its implementation.

www.ahrq.gov/shareddecisionmaking
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The mnemonic “SHARE” is a learning device to help you readily recall the steps in the SHARE Approach Model.

You may find that you do not present them in “linear order” during encounters.

The important takeaway is to address all five steps.
Tool 2 - Expanded Reference Guide with Sample Conversation Starters

The SHARE Approach

Essential Steps of Shared Decision Making:
Expanded Reference Guide with Sample Conversation Starters

Workshop Curriculum: Tool 2

The SHARE Approach is a 1-day training program developed by the Agency for Healthcare Research and Quality (AHRQ) to help health care professionals work with patients to make the best possible health care decisions. It supports shared decision making through the use of patient-centered outcomes research (PCOR).
Communicate that a choice exists and invite the patient to participate in the decision-making process.

- **Tips**
  - Summarize the health problem and communicate there may be more than one treatment choice.
  - Ask your patient to participate with the health care team.
  - Assess the role your patient wants to play.
  - Include family/caregivers in decisions.

Refer to page 3, Tool 2.
Step 1: Seek your patient’s participation

Conversation Starters

“Now that we have identified the problem, it’s time to think about what to do next. I’d like us to make this decision together.”

“There is good information about how these treatments differ that I’d like to discuss with you before we decide on an approach that is best for you.”

“I’m happy to share my views and help you reach a good decision. Before I do, may I describe the options in more detail?”

Refer to page 3, Tool 2.
Other ways to invite patients to participate

Do you have other phrases that you use as conversation starters to get patients engaged?
Know Your Options
Three questions for your provider

1. What are my treatment options?

2. What are the benefits and harms (risks)?
   - Learn about the benefits and risks of your treatment options: http://www.ahrq.gov/patients-consumers/treatmentoptions
   - Learn about questions to ask your provider: http://www.ahrq.gov

3. Where can I find more information to help me decide?
Engaging your patients to ask questions

- Post the “Know Your Options” poster in your waiting room and exam rooms. Find it:
  - On the AHRQ Web site at www.ahrq.gov/shareddecisionmaking

- Learn about AHRQ’s “Questions are the Answer” campaign.

Using public campaigns to raise patient awareness is effective.\textsuperscript{11, 12}
Step 2: Help your patient explore and compare treatment options

Discuss the benefits and risks of each treatment option, using evidence-based decision-making resources to compare treatment options.

- **Tips**
  - Check for patient knowledge of the options.
  - Clearly communicate risks and benefits of each option.
  - Explain the limitations of what is known about the options.
  - Use simple visual aids and evidence-based decision aids when possible.
  - Summarize by listing the options.

Refer to pages 5-8, Tool 2.
Step 2: Help your patient explore and compare treatment options

**Conversation Starters**

- “Here are some choices we can consider.”

- “Let me tell you what the research says about the benefits and risks of the medicine/treatments that you are considering.”

- “I have some booklets I want to give you that have information about your condition and the treatment options.”

- “These tools have been designed to help you to understand your options in more detail.”

Refer to pages 5-8, Tool 2.
Communicate with your patient about the outcomes that are most important to him or her.

**Tips**

- Encourage your patient to talk about his or her values and preferences.
- Use open-ended questions.
- Listen actively to the patient and show empathy and interest.
- Acknowledge what matters to your patient.
- Agree on what is important to your patient.

What matters most to your patient?
- Recovery time
- Out-of-pocket costs
- Being pain free
- Having a specific level of functionality

Refer to page 9, Tool 2.
Step 3: Assess your patient’s values and preferences

<table>
<thead>
<tr>
<th>Conversation Starters</th>
</tr>
</thead>
<tbody>
<tr>
<td>“When you think about the possible risks, what matters most to you?”</td>
</tr>
<tr>
<td>“As you think about your options, what’s important to you?”</td>
</tr>
<tr>
<td>“Which of the options fits best with treatment goals we’ve discussed?”</td>
</tr>
<tr>
<td>“Is there anything that may get in the way of doing this?”</td>
</tr>
</tbody>
</table>

Refer to page 9, Tool 2.
Step 4: Reach a decision with your patient

Decide together on the best option and arrange for follow-up steps to achieve the preferred treatment.

Tips

- Ask your patient if he/she is ready to make a decision.
- Ask your patient if he/she needs more information.
- Schedule another session if your patient needs more time to consider the decision.
- Confirm the decision with your patient.
- Schedule follow-up appointments to carry out preferred options.

Refer to page 10, Tool 2.
Step 4 dialogue: Reach a decision with your patient

<table>
<thead>
<tr>
<th>Conversation Starters</th>
</tr>
</thead>
<tbody>
<tr>
<td>“It’s fine to take more time to think about the treatment choices. Would you like some more time, or are you ready to decide?”</td>
</tr>
<tr>
<td>“What additional questions do you have for me to help you make your decision?”</td>
</tr>
<tr>
<td>“Now that we had a chance to discuss your treatment options, which treatment do you think is right for you?”</td>
</tr>
</tbody>
</table>

Refer to page 10, Tool 2.
Step 5: Evaluate your patient’s decision

Support your patient so the treatment decision has a positive impact on health outcomes. For management of chronic illness, revisit decision after a trial period.

Tips

- Make plans to review the decision in the future.
- Monitor implementation of treatment decision.
- Assist your patient with managing barriers to implementation.
- Revisit the decision if the option does not produce the desired health outcomes.

Refer to page 11, Tool 2.
### Step 5: Evaluate your patient’s decision

**Conversation Starters**

| “Let’s plan on reviewing this decision at our next appointment.” |
| “If you don’t feel things are improving, please schedule a follow-up visit so we can plan a different approach.” |

Refer to page 11, Tool 2.
The patient is generally responsible for implementing many of the decisions that are made, particularly decisions made in a primary care setting (e.g. lifestyle changes or taking medications).

Adherence to treatment is enhanced by shared decision making!\(^6-7,12\)
Shared Decision Making in Action

Video Presentation
Rebecca and Dr. Miller share a decision

How satisfied is Rebecca with outcomes of the encounter?

How do you think shared decision making will impact Rebecca’s health outcomes?

How satisfied is Dr. Miller with the outcome of the encounter?
Shared decision making is a two-way street

- Occurs when a health care provider and a patient work together to make a health care decision that is best for the patient.

- The optimal decision takes into account evidence-based information about available options, the provider’s knowledge and experience, and the patient’s values and preferences.
The SHARE Approach is a five-step process for shared decision making that includes exploring and comparing the benefits, harms, and risks of each health care option through meaningful dialogue about what matters most to the patient.
Key takeaways

- Conversation starters can help you engage patients as you present each of the SHARE Approach Model’s five steps.
Key takeaways

Using evidence-based decision aids in shared decision making can:

- Improve patient’s knowledge of options
- Result in patient having more accurate expectations of possible benefits and risks
- Lead to patient making decisions that are more consistent with their values
- Increase patient’s participation in decision making
To find out more about AHRQ’s SHARE Approach, visit

www.ahrq.gov/shareddecisionmaking
Putting Shared Decision Making Into Action

Role Play Activity
(managing Osteoarthritis pain with medicines)
Instructions

- Break into your assigned group.
- Choose roles: Provider, patient, reporter, observers.
- Refer to the Conversation Starters handout and the SHARE Approach model as you role play.
- Refer to your consumer and clinician summaries during this activity.

Role play:
- Reporter asks for volunteers for provider and patient.
- Role play a shared decision-making encounter.
- Observers provide feedback.
Ms. Jones is a 70-year-old woman with diagnosed osteoarthritis (OA), and she has moderate pain.

Until recently she had been doing fine with OA pain by maintaining a healthy weight and exercise. In the past few months, she has been experiencing more OA pain, and he now wants to consider a modality to control the pain better.

In general, Ms. Jones does not like to take prescription or oral medications, if there is another option.

Her treatment options are:

- Acetaminophen (Tylenol®)
- NSAIDs (Advil®, Motrin®, Aleve®, Celebrex®)
- Topicals (BENGAY®, Aspercreme®, Theragen®)
- Supplements (glucosamine, chondroitin)
Debrief

Summarize your group’s role play.

- Could you fit all steps in?
- What was most challenging?
- What worked best?
- How long did it take?
- How difficult would this be to implement in real life?
References