Group N°6

Effective shared care:
How do we share the treatment plans and information with the patient and all caregivers?

Break-out sessions

ESC Education Conference – 30 Jan - 31 Jan 2019
Current use, challenges and limitations

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The question (above) exemplifies the challenges: rephrase as ... How do we make the treatment plans together ....?

1. Challenges/limitations
   - Culture
     - The patient centeredness of the organization and the community in which it is based
   - Clinician
     - Lack of physician ownership, lack of evidence of benefit, attitudes to shared care
     - Perceived high self-efficacy
     - Resources: time, people, relevant materials
     - Complexity of situation
     - Potential/perceived threat to control of situation/autonomy
   - Patient
     - Setting – critical/acute/ward/outpatient/community – and acuity of situation
     - Age/generation gap/health literacy
     - Variability in patient preference for format of information delivery

2. Examples of practice where shared decision making is applied: situation vs strategy
   - Example from national lead
   - Heart failure inter-disciplinary team
   - MDT/ward round/outpatient – patient/relative/caregiver presence – this situation appears to be the exception
   - Involvement of family/loved ones/ caregivers: end-of-life/complex/acute situations - common
   - MDT decision – then inform patient – then modify advice according to:
     - Patient preference/wishes
     - Financial constraints of patient/social circumstances
     - Managed risk/benefit perceptions of multiple medications – by clinician in context of patient
   - ‘informed’ (or not) consent
Opportunities and development for the future

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Three basics, without which there is no hope:
1. Fundamental understanding that for success need to recognize this as time/people/materials resource requirement – otherwise irrelevant (rearranging deckchairs on the Titanic)
2. Patient-centred healthcare
3. Requirement for culture change – essential – we are not as good at this as we think we are

Summary of shared decision making process
1. Determine if a shared decision making is needed?
2. When it is needed:
   - Evaluate and improve the shared decision team status: create a real team concept (Beatles)
   - Understanding the patient’s situation and communicating with compassion
   - Gather information regarding the patient profile and preferences and interpret these
   - Develop a toolbox of practical didactic solid and digital tools
3. Reassess the process and outcomes

Additional considerations:
• Individualize and modularize approaches
• Throughout the whole patient journey
• Measurable benefit
• Learn from other specialties
• Gaming (rewards)
• Using digital technology/ a variety of materials in a patient-centered way
• Medical legal context of the country