



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Shared Decision Making as a Tool for Effective Engagement

Elizabeth Whitney, L.I.C.S.W.

and

Laurie Curtis, M.A., C.P.R.P.



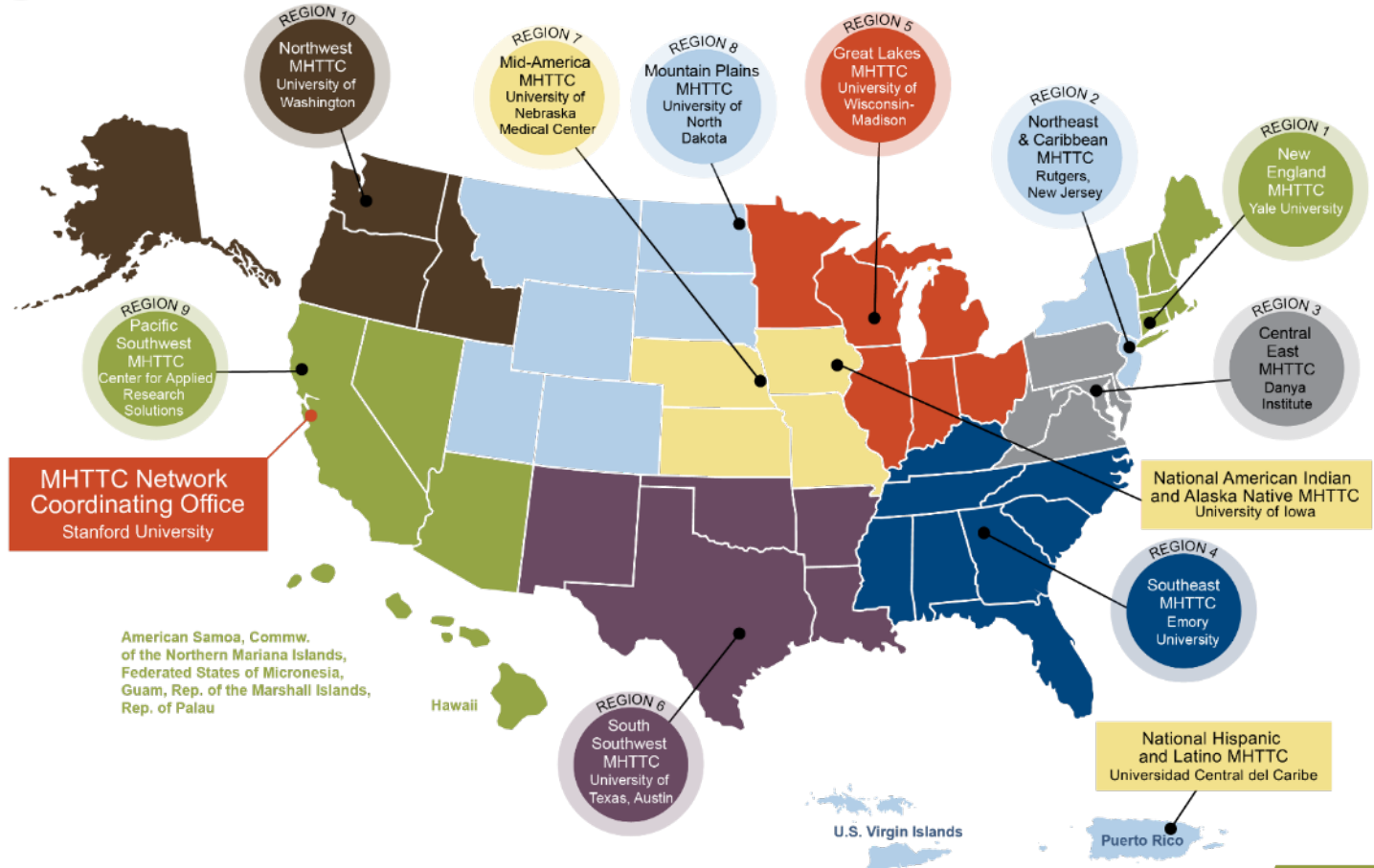
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Central East MHTTC Goals

Funded by SAMHSA to:

- **Accelerate** the adoption and implementation of mental health related evidence-based practices.
- **Heighten** the awareness, knowledge, and skills of the behavioral health workforce.
- **Foster** alliances among culturally diverse practitioners, researchers, policy makers, family members, and consumers.
- **Ensure** the availability and delivery of publicly available, free of charge, training and technical assistance.

Central East Region

HHS REGION 3

Delaware

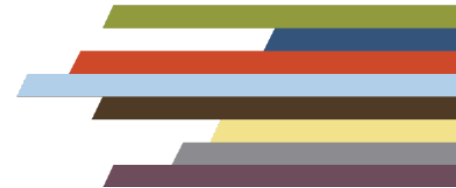
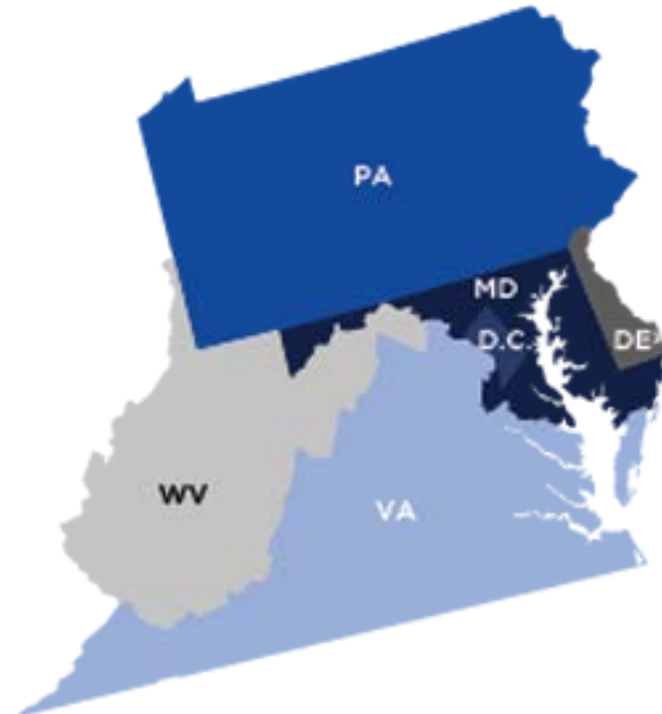
District of Columbia

Maryland

Pennsylvania

Virginia

West Virginia



The series . . .

MHTTC Webinar Series:

Person-centered Tools for Effective Engagement

February 26

1:00 to 2:00 PM

March 19

1:00 to 2:00 PM

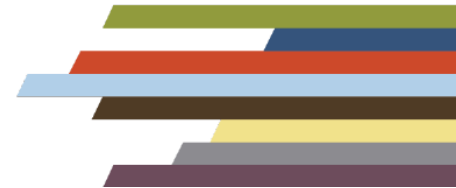
April 14

11:00 AM to 12:00 Noon

May 13

1:00 to 2:00 PM

All times stated in Eastern Standard Time





**Success is
predicated on
engagement**

**Shared
decision
making is a
tool for
effective
engagement**

Emerging Medical Best Practice

“A growing body of evidence demonstrates that patients who are more actively involved in their health care experience have better health outcomes and incur lower costs.”

Health Affairs, 2013

“In clinical practice, primary care patients receiving compassionate and patient-centered care with shared decision-making have repeatedly been shown to have better health outcomes and with fewer tests and specialist referrals and, therefore, lower costs to the system than those with poorer communication with their physicians and healthcare teams.” *Clinical Leader 2 Jan 2020*

“Our review suggests that when patients report that they have participated in shared decision making, they are likely to enjoy better affective-cognitive outcomes, such as improved satisfaction and less decisional conflict.” *Shay LA, Lafata JE. 2015*

Research finds

“There is very low correlation between doctors’ and patients’ perceptions about adverse effects and distress related to neuroleptic medications.

Doctors significantly underestimate patient distress.

They are often unaware of how impacted their patients are by the adverse effects of these drugs.”

Barbui, Bianchini, Esposito et al., 2012.



And yet....

A 2012 survey in health care found that most people preferred making medical decisions together with their doctor.

The majority said they wouldn't speak up if what they wanted conflicted with their physician's recommendations.

They are nervous about being labeled a “bad patient.”

Adams JR, Elwyn G, Légaré F, Frosch DL, 2012



**Who is
here
today?**



Elizabeth Whitney, M.S.W., L.I.C.S.W.

Associate Professor of Practice
Assistant Director of Field Education
Simmons College
Boston, MA 02115



Shared Decision-making is...

Shared decision making is a **collaborative process** that allows individuals and their care teams to **make treatment decisions together**, taking into account the **best scientific evidence**, as well as **individual values and preferences**.



Shared Decision-making

Can be applied to all situations where **competing options exist** or **approaches need prioritization**.

Features a **style of communication** and often **a set of tools (decision aids)** that helps balance:

- Objective information about a person's condition, concerns and treatment options
- The individuals' preferences, goals, cultural values and beliefs



I can share info about evidence-based ways for dealing with anxiety and depression.

Two

Experts

I know what depression is like for me, what I've tried already, and my preferences for treatment or services.



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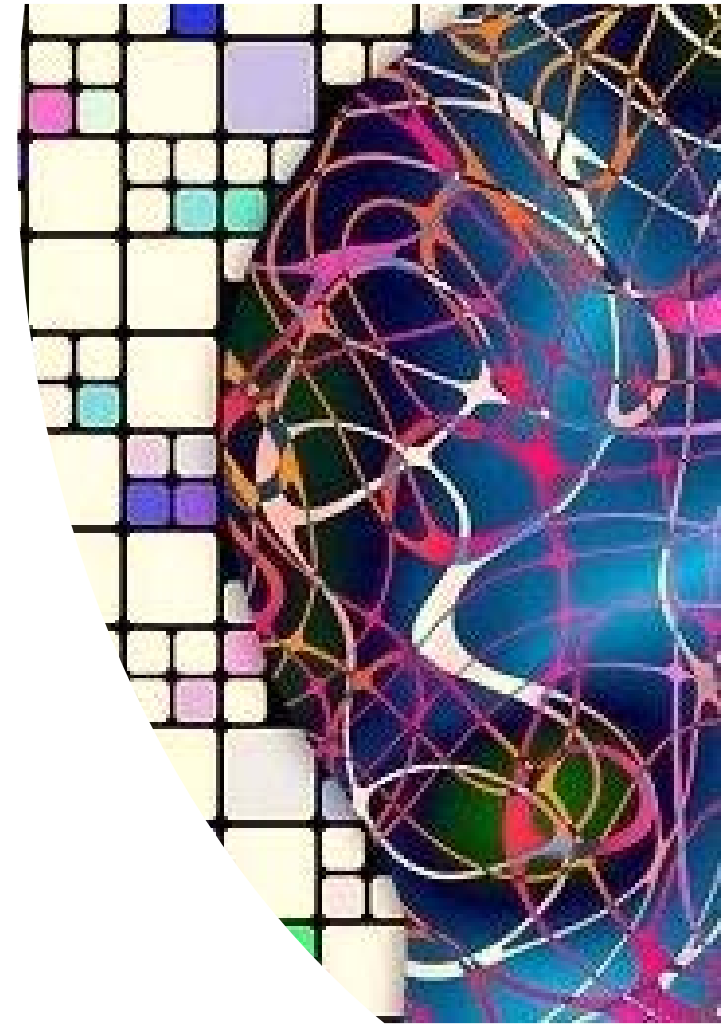




**Why
engage in
shared
decision-
making?**

The decision-making process can be

- Complex
- Confusing
- Time consuming
- Often time sensitive
- Highly personal
- Without perfect solutions

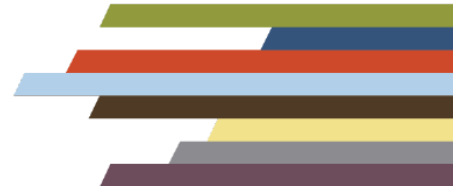


“SDM is an ethical imperative”

Pat Deegan, PhD

Why should I use a shared decision-making approach?

- Avoid preference misdiagnosis. SDM is used with preference sensitive decisions – where choice makes a difference.
- Address all types of treatment and life decisions. Decisions about treatment are not just medical decisions.
- Perfect informed consent.
- Increase engagement.



3-Talk Model of SDM Deliberation

Prior preferences



Informed preferences

**Choice
Talk**

**Option
Talk**

**Decision
Talk**

**Good
Decision!**

Decision Support

Brief (inside consultation)

Extensive (outside consultation)



A vertical decorative bar on the left side of the slide, composed of several colored rectangular segments: yellow, brown, light blue, olive green, grey, dark blue, orange, and purple.

How is SDM different from what most of us do now?



What do you mean by “activation”?

Why is it important?



If this is standard practice in medicine, why is it so challenging in mental health and substance use services?



Do you really have to use decision aids?



Can you give some examples of how to use this – other than decisions about medications?



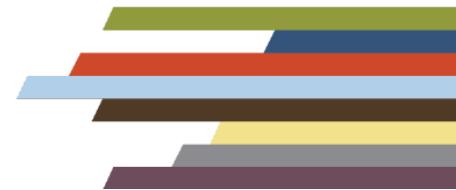
**How do you handle the fact
that choices may be limited?**



What if you don't agree with a person's choice?

Resources

- [SAMHSA Shared Decision-making Tools: Antipsychotic Medications. Medication Assisted Treatment for Opioid Use Disorder](#)
- [SAMHSA Shared Decision-making](#)
- [SAMHSA. Shared Decision-making in Mental Health Care Practice, Research, and Future Directions](#)
- [AHRQ: The SHARE Approach—Achieving Patient-Centered Care with Shared Decision-making](#)
- [AHRQ: Shared Decision-Making Toolkits](#)
- [Pat Deegan’s Common Ground](#)
- [Mental Health America. You’re on the Team](#)
- [Schauer, C., Everett, A., del Vecchio, P., & Anderson, L. \(2007\). Promoting the value and practice of shared decision-making in mental health care. Psychiatric Rehabilitation Journal, 31\(1\), 54–61.](#)



Citations

- [Health Affairs, Health Policy Brief, 14 Feb 2013](#)
- [Schneider, R.F., Changing Your Corporate Culture To Hear The Concerns Of Patients. Clinical Leader, 2 Jan 2020](#)
- Shay, L. A., & Lafata, J. E. (2015). Where is the evidence? A systematic review of shared decision making and patient outcomes. *Medical decision making : an international journal of the Society for Medical Decision Making*, 35(1), 114–131. doi:10.1177/0272989X14551638
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- Adams JR, Elwyn G, Légaré F, Frosch DL. Communicating With Physicians About Medical Decisions: A Reluctance to Disagree. *Arch Intern Med*. 2012;172(15):1184–1186. doi:10.1001/archinternmed.2012.2360
- Elwyn, G., Durand M.A., Song, J., Aarts, J., Barr, P.J., Berger, Z. et al. (2017). A three-talk model for shared decision making: multistage consultation process. *BMJ*; 359 :j4891
- Dixon, Lisa & Holoshitz, Yael & Nossel, Ilana. (2016). Treatment engagement of individuals experiencing mental illness: Review and update. *World Psychiatry*. 15. 13-20. 10.1002/wps.20306.
- [Learning the lessons from SDM](#)

Contact Us...



Elizabeth Whitney, MSW, LICSW
Associate Professor of Practice
Assistant Director of Field Education
Simmons College
Boston, MA 02115
elizabeth.whitney@simmons.edu



Laurie Curtis, MA, CPRP
Senior Program Manager
Advocates for Human Potential, Inc.
lcurtis@ahpnet.com

Evaluation



[Evaluation Link](#)

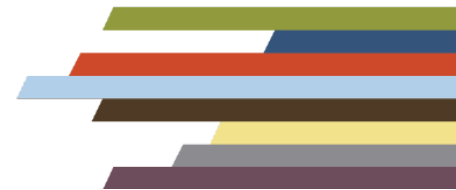
Once you complete the evaluation, you will be directed to the resource page and certificate request form.

Appreciation



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Funded by Substance Abuse and Mental Health Services Administration

a program managed by



[Central East MHTTC website](#)

[Oscar Morgan](#), Project Director

[Danya Institute website](#)

[Email](#)

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