

There is a growing interest in shared decision-making interventions for healthcare professionals, but there is uncertainty regarding how effective they are, and how to best implement them

Siyam T, Shahid A, Perram M, Zuna I, Haque F, Archundia-Herrera MC, et al. [A scoping review of interventions to promote the adoption of shared decision-making \(SDM\) among health care professionals in clinical practice](#). Patient Education and Counseling. 2019;102(6):1057-1066.

What is the context of this review?

- Shared decision-making (SDM) between healthcare professionals and patients increases the active role patients play in their own health and care. It can notably:
 - improve patient knowledge about treatment options
 - reduce decision-making conflicts
 - ensure that decisions are more aligned with the patients' values
- SDM can also support healthcare professionals and health systems by:
 - reducing the anxiety that they usually face when making healthcare decisions on behalf of the patient, as they are now working closely with the patient
 - reducing healthcare costs
- SDM is not consistently used, because some healthcare professionals feel a lack of knowledge, skills, or tools/guidelines on how to use SDM.
- This scoping review aims to examine strategies that can be used to implement SDM, the outcomes of SDM, and whether there are any guidelines to help implement SDM.

Box 1: Coverage of OHT building blocks

This review addresses [building block #4](#):

- 1) defined patient population
- 2) in-scope services
- 3) patient partnership and community engagement
- 4) patient care and experience (domain 20 – shared decision-making)**
- 5) digital health
- 6) leadership, accountability and governance
- 7) funding and incentive structure
- 8) performance measurement, quality improvement, and continuous learning

What question is being addressed?

- What is known about interventions to support the use of shared decision-making among healthcare professionals in their clinical practices?

How was the review done?

- Several online databases were searched using keywords relevant to SDM.
- The authors were supported by grants from the University of Alberta and private donors.

How up to date is this review?

- The authors searched for relevant studies published up to 14 December 2017.

What are the main results of the review?

- The authors found a total of 13,978 potential studies, of which 238 were deemed relevant.
- Types of SDM interventions discussed in the literature:
 - 50% of the interventions discussed in the literature were concerned with educating healthcare professionals about SDM through educational meetings, educational materials, and educational outreach visits
 - Most of the SDM interventions aimed to define and explain healthcare problems to patients, and clarify patient values
- Outcomes of SDM:
 - The outcomes that were most commonly reported by patients were: greater satisfaction, knowledge, communication with their healthcare professionals, involvement in healthcare, quality of patient-provider interaction and reduced decisional conflicts
 - The outcomes that were most commonly reported by healthcare professionals were: more positive attitude towards SDM, improved knowledge of SDM, greater confidence in involving patients in SDM, and positive attitude in involving patients in SDM
 - The outcomes that were most commonly reported by observers in each study were: improved provider-patient communication, improved understanding of SDM skills, and improved patient involvement
- Although the literature shows a wide variety of SDM interventions, the studies examining the outcomes, effectiveness, and strategies to implement these interventions vary. This makes it difficult to determine which strategy and intervention most effectively promotes the use of SDM. The authors recommend creating more standardized definitions and guidelines on how to implement SDM programs.

How confident are we in the results?

- This is a moderate-quality review with an AMSTAR score of 6/9.

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