

Engaging health consumers through shared decision making (SDM)

SDM is a collaborative process that allows patients and their providers to make health care decisions together, considering the best scientific evidence available and the patient's values and preferences. SDM 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.

SDM uses tools, called patient decision aids (PDAs), that can help people engage in shared health decisions with their health care provider. High-quality PDAs include up-to-date, unbiased information about the health condition and pros and cons of multiple options for treatment. PDAs also help elicit information about patient values that might lead them to a particular choice and encourage meaningful discussion with providers.

Research shows that use of these aids leads to increased knowledge, more accurate risk perception, and fewer patients remaining passive or undecided about their care. For example, a PDA could help someone who is considering a joint replacement or back surgery or deciding what kind of care they want at end of life.

Washington is a leader in SDM

In 2007, Washington became the first state to pass legislation around shared decision making, when the Blue Ribbon Commission bill (Chapter 259) included that if a provider and patient engage in SDM using a "certified decision aid," there is a presumption that informed consent has been given and obtained.

PDA certification: in 2012, state legislation granted the Health Care Authority (HCA) the authority to certify high-quality PDAs. The certification criteria are guided by the work of the International Patient Decision Aid Standards Collaborative, addressing the domains of content, development process, and effectiveness. In 2016, HCA worked with state and national experts to develop and implement a one-of-a-kind process to certify PDAs. Since then, HCA has certified over 50 PDAs for topics including end of life care, orthopedics, maternity, and screening for cancer.

Bree Collaborative guidance: in 2019, Washington's Bree Collaborative convened a workgroup and developed practical guidance for SDM implementation. The recommendations present evidence for the importance of shared decision making, provide a framework to support broader-scale adoption, and recommend areas of focus for Washington State. This includes behavioral health, cancer screening, advance care planning, and surgical procedures.

SDM supports many statewide priorities

SDM is a key component or facilitator of multiple Washington State priorities, including:

¹ Greene J. and Hibbard, Judith H., "Why does Patient Activation Matter? An Examination of the Relationships between Patient Activation and Health-related Outcomes." Journal of General Internal Medicine. 2012;27(5):520-6.



Health equity: HCA defines health equity as everyone having a fair and just opportunity to be as healthy as possible. SDM empowers patients and their families in making health care decisions with their providers, ensures unbiased presentation of options, and reduces provider assumptions about patient values. Studies have shown that the use of PDAs can reduce disparities in care by increasing access to appropriate treatment in underserved populations, while decreasing inappropriate overuse in other populations.² PDAs can also help overcome barriers to care, such as cancer screening for vulnerable populations.

Maternity care: SDM supports statewide efforts to improve maternal health and birth outcomes by helping women better understand their options. These include trial of labor after cesarean section (C-section), genetic testing for certain fetal conditions, approach to fetal macrosomia (larger than average baby), contraceptive options, etc. SDM can help reduce unnecessary C-sections, including associated risks.

High-value care: increasing value in health care means ensuring people get the right care, at the right time, in the right place. No one should receive inappropriate or unwanted care. SDM increases value by ensuring care decisions fit the patient's preferences and are based on good evidence. Requirements for SDM in HCA's Centers of Excellence programs for spine care and joint replacement and in the Accountable Care Program help support higher value as well as improved patient experience.

More information

- Visit the HCA website to learn more about SDM in Washington State.
- View the Bree Collaborative recommendations.

² Ibrahim SA, Blum M, Lee GC, et al. Effect of a decision aid on access to total knee replacement for black patients with osteoarthritis of the knee: a randomized clinical trial. JAMA Surg 2017; 152(1): e164225