

THE

Dartmouth

INSTITUTE

FOR HEALTH POLICY & CLINICAL PRACTICE

Shared Decision-Making Independently Associated with Patient Confidence in Self-Care for Adults with Inflammatory Bowel Disease

Aricca Van Citters, Megan Holthoff, Corey Siegel, Gil Melmed, Alice M. Kennedy, Paul Barr, Brant Oliver, Emily Morgan, Alandra Weaver, Gene Nelson, Glyn Elwyn

Presented by: Alice M. Kennedy

 @TDICoproduction

JULY 9, 2019

Disclosure of potential conflicts of interest

I currently have not, or have not had in the last two years, any affiliation, financial interest or other interest with a corporation or I am not receiving or have not received remuneration or royalties or research grants from a corporation.

Alice M. Kennedy

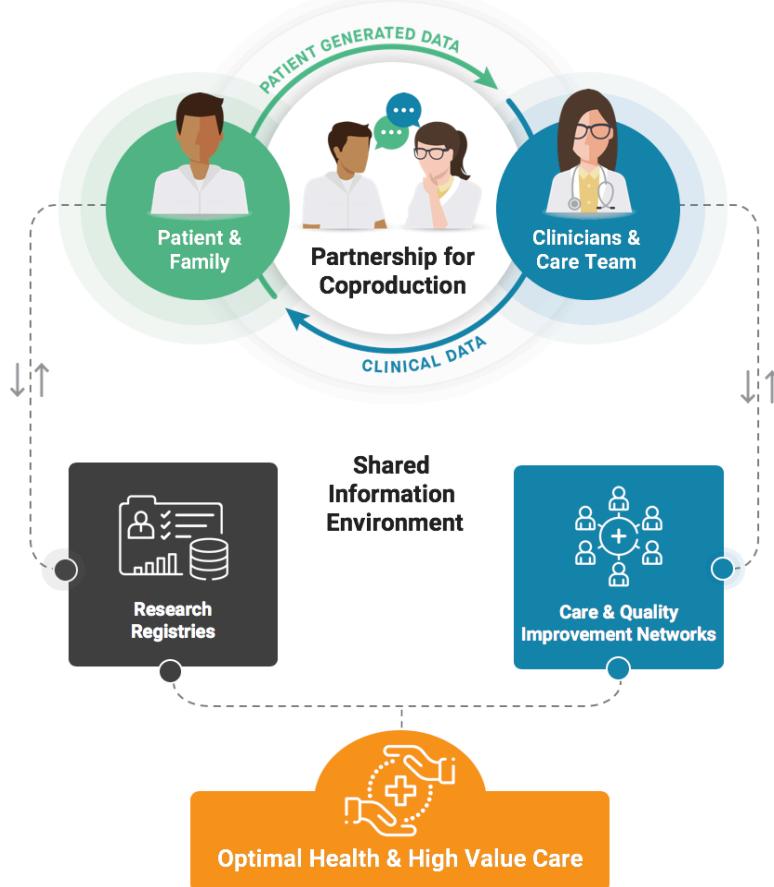
Aim:

- To understand the relationship between shared decision making and patient confidence, health outcomes, and value in a learning health system focused on coproducing healthcare services.



IBD Qorus Learning Health System

- Patient-provider partnership for coproduction

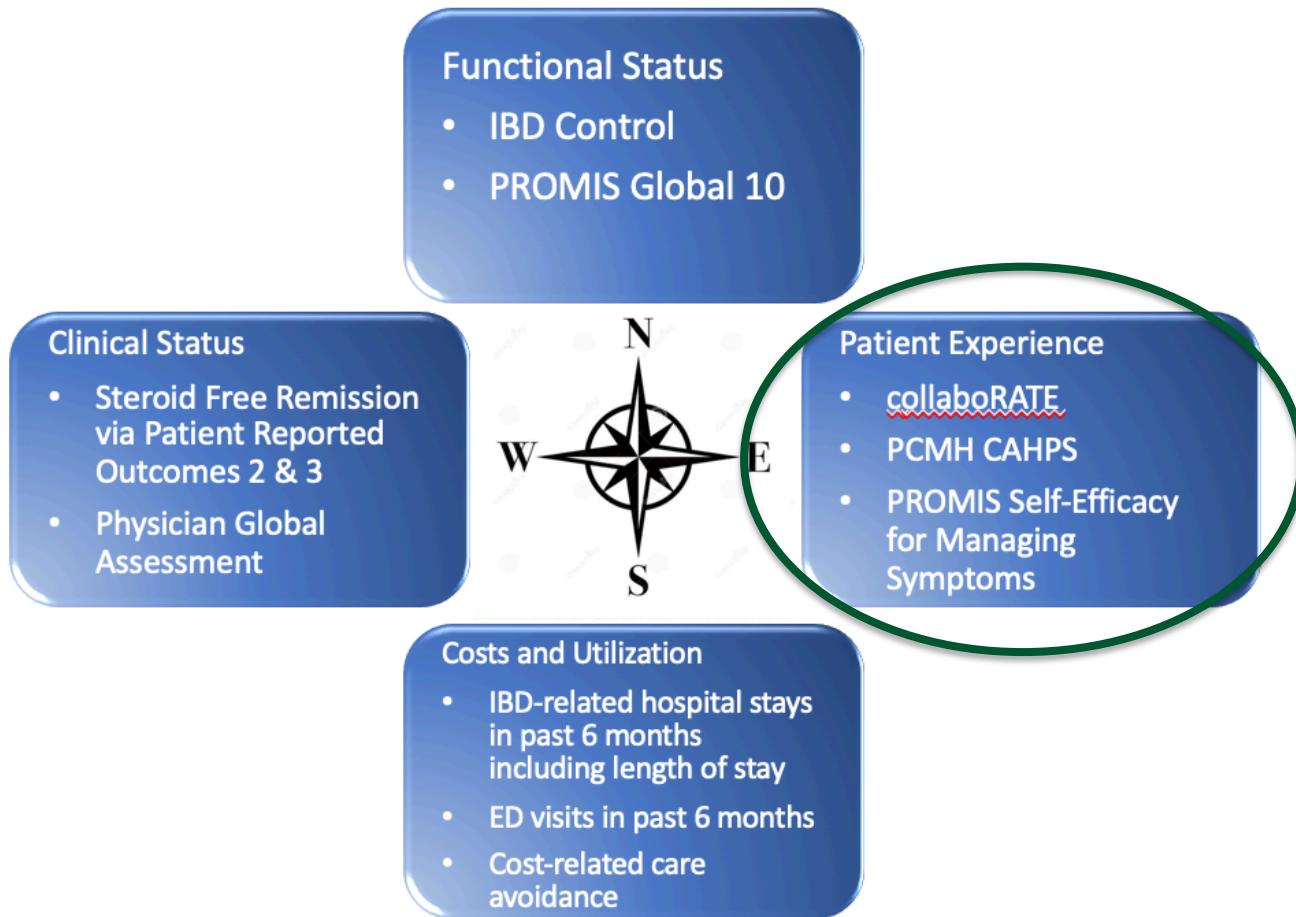


Quality Driven, Care Focused

- Inflammatory Bowel Disease (IBD) includes Crohn's Disease and Ulcerative Colitis
- 1.7 million persons in US diagnosed with IBD, 2.5 million persons across Europe
- Estimated 70,000 new cases diagnosed every year in the US
- Significant social, emotional, financial cost
- Service overuse

Balanced Set of Measures to Evaluate LHS

- Clinical Value Compass: multi-dimensional measure of value in a health system

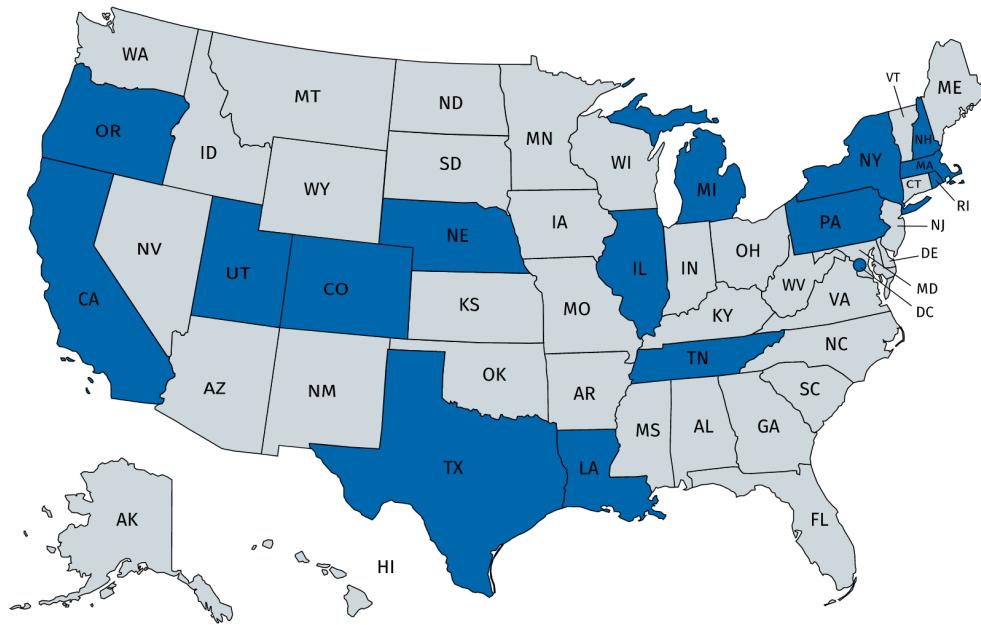


Patient Experience: collaboRATETM

- Measures the level of shared decision making in the clinical encounter from the patient's perspective
 - **How much effort was made to help you understand your health issues?**
 - **How much effort was made to listen to the things that matter most to you about your health issues?**
 - **How much effort was made to include what matters most to you in choosing what to do next?**

Methods

- 21 sites
- 1 clinician champion per site



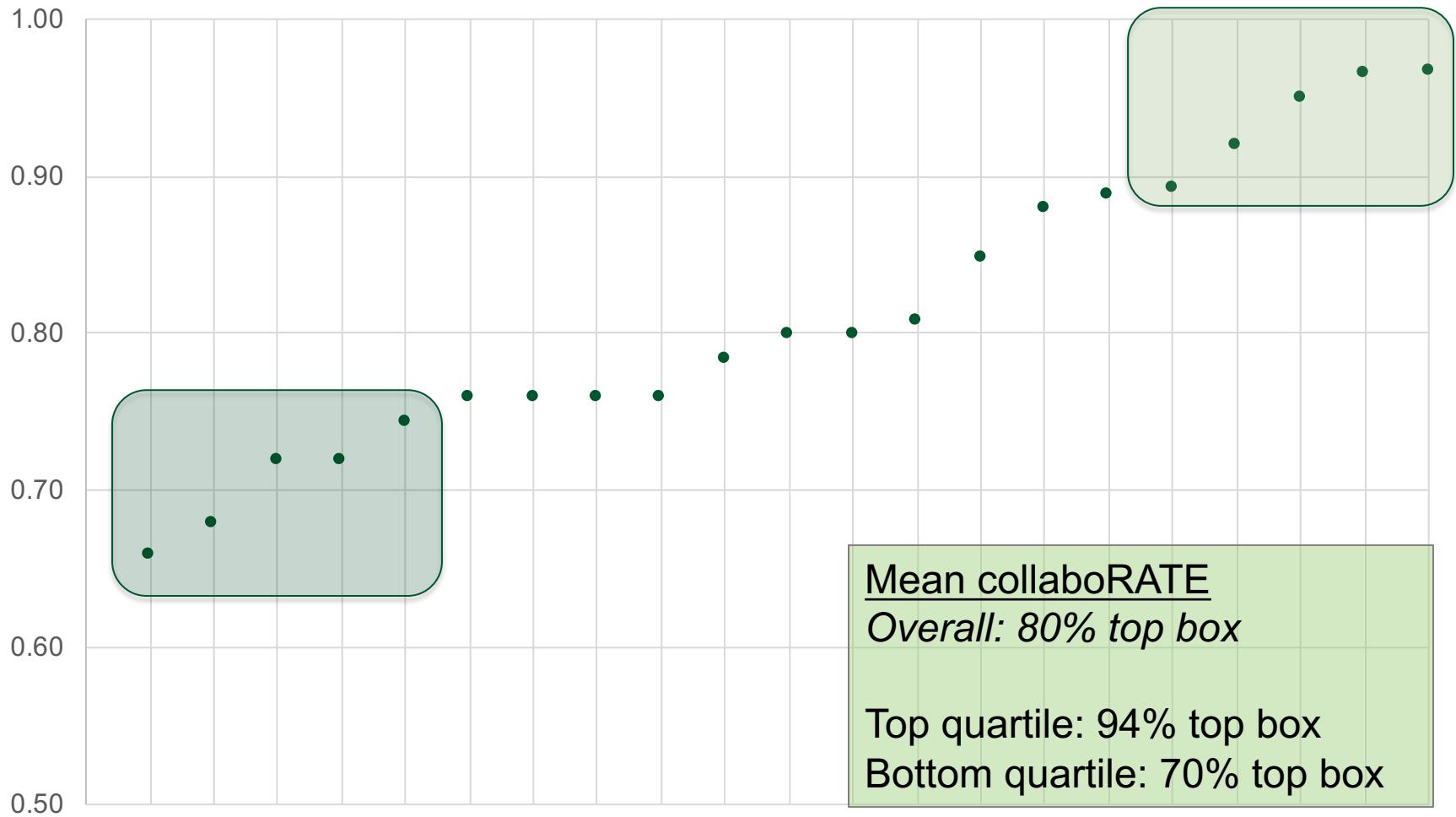
Patient Reported Outcomes Survey

- 15 question pre-visit survey
- All IBD patients
- May 2018
- 25-150 pts/site
- Total sample 1,145

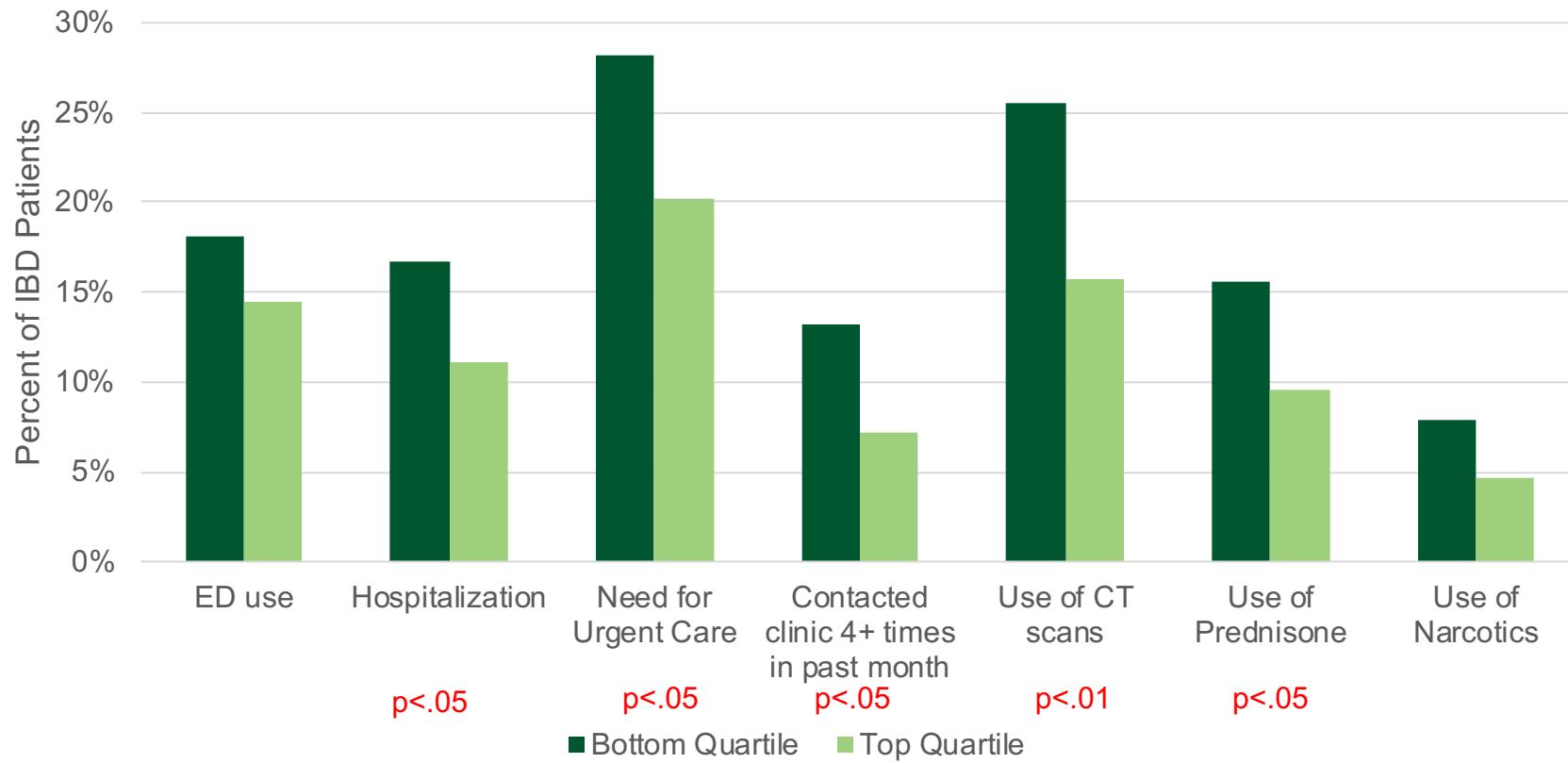
collaboRATETM

- 3 question post-visit SDM measure
- Consecutive IBD patients
- April-June 2018
- 25+ pts/site
- Total sample 837

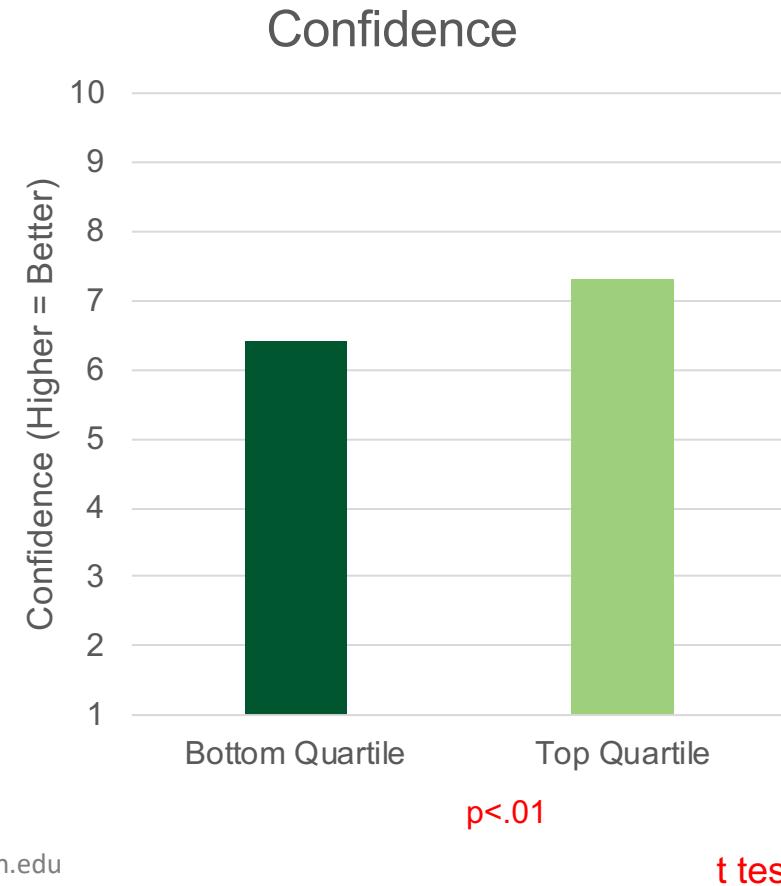
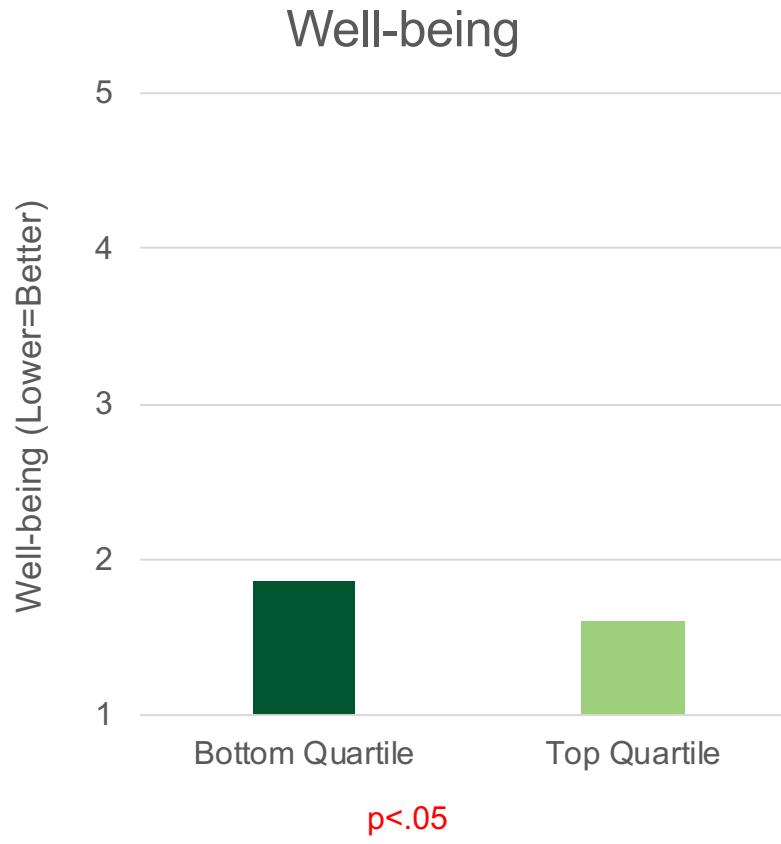
collaboRATE Top Box



Higher SDM associated with Lower Service Use and Higher Quality Care



Higher SDM associated with Higher Functioning



After controlling for disease activity, shared decision making is independently associated with...

	Chi square / t-test	Controlling for disease activity *
Functioning		
Well-being	p<.001	p=.056
Confidence to control / manage health	p<.001	p=.004
Service Use		
ED visit in past 6 months	p=.137	---
Hospitalized in past 6 months	p=.013	p=.135
Need for urgent care	p=.005	p=.107
Messaged IBD >4 times/month	p=.018	p=.269
Quality		
CT scan in past 6 months	p<.001	p=.031
Use of prednisone	p=.012	p=.171
Use of narcotics	p=.074	---

* Disease activity
 Active (Manitoba IBD Index: 0-4)
 Inactive (Manitoba IBD Index: 5-6)

Conclusions

- **Shared Decision Making is associated with:**
 - Functioning (higher well being and confidence)
 - Quality (lower use of CT scans and prednisone)
 - Service use (lower hospitalization, need for urgent care, and high frequency contact with clinic)
- **After controlling for disease activity, SDM is independently associated with:**
 - Greater level of confidence in patients' ability to take care of themselves
 - Lower likelihood of receiving a CT scan
- **Limitations:**
 - Site-level data for SDM; Patient-level data for outcomes
 - Future research should explore relationships between patient-level SDM and outcomes.

Next Steps:

- 1-year follow up in process
- Explore stability of relationships between collaboRATE and Value Compass measures
- Expand collaboRATE/clinical and patient reported outcome measures across multiple complex conditions
 - Cystic Fibrosis
 - Rheumatoid Arthritis
 - Palliative Care
 - Multiple Sclerosis

THANK YOU

Patients and Care Teams of IBD Qorus Collaborative
Coproduction Team and Preference Lab at Dartmouth
Crohn's & Colitis Foundation
Corey Siegel and Gil Melmed

