Attitudes and Experiences in Implementing Patient Decision Aids from a Sample of Orthopedic Clinics in a Shared Decision Making Learning Collaborative

Karen Sepucha¹, Ha Vo², KD Valentine², Felisha Ann Marques², Hany S Bedair¹, Thomas D Cha, Antonia F Chen, Jesse G Eisler, Prakash Jayakumar, Michael S Kain³, Lauren Leavitt², Benjamin Ricciardi⁴, James D Slover, Daniel Vicente Vigil, Richard Marc Wexler, Adolph J Yates⁵

¹Massachusetts General Hospital, ²Health Decision Sciences Center, ³Boston Medical Center, ⁴University of Rochester, ⁵Univ of Pittsburgh Med Ctr

INTRODUCTION:

To better understand the attitudes, experiences, and barriers toward implementing shared decision making (SDM) and patient decision aids (PDAs) in a sample of orthopedic clinics across the United States (US). METHODS:

We conducted a prospective survey study from August – December 2021 including clinicians and staff from nine orthopedic clinics (California, Connecticut, Massachusetts, New York, Pennsylvania, Texas, Washington) across the US who had agreed to participate in an Orthopedics SDM Learning Collaborative.

We asked participants how often they engaged their patients in SDM, their familiarity with PDAs and general thoughts regarding these tools. Participants were also asked about internal / institutional support for incorporating SDM and PDAs in their practice, and compatibility of PDAs with their organization's mission and approach to care delivery.

We asked clinicians about potential implementation barriers such as longer visit times, reduced surgery rates, and staff readiness to integrate PDAs into routine care.

Most questions had 5 response options; we reported the percentage who selected the top two options (e.g., "extremely" and "very" or "always" and "usually").

RESULTS:

The overall response rate was 61% (71/106); response rates by site ranged from 38% to 100%. Overall, 61% of surgeons (34/56) and 74% of clinic staff (37/50) completed the surveys.

Most of the responders (82%) reported that they engaged patients in SDM. The majority (74%) also felt positive about providing PDAs to their patients, but only 45% were familiar with the PDAs available to them. Respondents reported strong internal support from clinic leadership (89%) and surgeons (88%), but less from nonclinical staff (53%).

Most of the clinicians (71%) agreed that PDAs were compatible with their organization's mission and priorities. Staff (69%) also reported that getting PDAs to patients was at least somewhat compatible with their jobs.

Surgeons were not very concerned (9%) that engaging in SDM would make their visits longer and no one was very concerned about a reduction in surgical rates. However, only 27% felt confident their team was sufficiently supported with everything they needed to deliver PDAs to patients as part of routine care. DISCUSSION AND CONCLUSION:

Clinicians and clinic staff from the SDM Learning Collaborative sites had positive attitudes about providing PDAs and believed they were frequently practicing SDM. Visit length and reduced surgery rates were not flagged as major barriers to implementation, but clinic staff reported that providing PDAs was not always a high priority and felt they needed additional logistical support to get PDAs into patients' hands.