

**Washington Health Alliance
Consumer Education Committee Meeting
December 20, 2018**

SUMMARY NOTES

Location: Call-in

Committee Members Attending: Gloria Bingham, Washington State Nurses Association
Sarah Greene, *Health Care Systems Research Network, Committee Chair*
Leah Hole-Marshall, *Washington Health Benefit Exchange*
Carolyn Martin, *National Libraries of Medicine, NW*
Andrew Radolf, *Retired, UNESCO*
Tammy Wild, *American Cancer Society*

Staff and Guests Present:
Nancy Giunto, *Washington Health Alliance*
Rebecca Snyders, *Washington Health Alliance*

Approval of Meeting Notes

Rebecca opened the meeting with introductions. Summary notes from the November meeting were approved.

Discussion: Podcast on Shared Decision Making

Rebecca shared a podcast from *Catalyst for Payment Reform* interviewing Chief Medical Officer, Emily Transue, MD, of the Washington Health Care Authority (HCA) about their shared decision making pilot for maternity. Although the podcast's focus was on providers, Rebecca felt it was worth sharing to generate some discussion and provide background on shared decision making from the provider perspective as the committee decides how best to help patients have these conversations with their doctors.

Sarah observed that one of the most difficult barriers to address is the burden/time for providers. Are there tools we can give the consumer that can help them in addressing these barriers? Much of the information already out there emphasizes that patients should be having this discussion with doctors, but stops short of the how. Are there tools we can provide that would answer the questions of how can you:

1. Start the discussion with your provider in a way that engenders partnerships?
2. Express your preferences concisely?
3. Have an outcome that enhances your decision satisfaction/quality?

Tammy commented that one of the surprise take-aways from the podcast was that providers think they are already practicing shared decision making; however, evidence from patients, and in Tammy's own experience, shows otherwise. She said she often hears from patients that they are not being included in the decisions; the provider sees them briefly, hands them a prescription and that's it.

Sarah said that this will be challenging. The pilot study in the podcast is clinically focused and is different from our committee's goal of engaging consumers in decision making, but the asset is that the HCA does have a lot of existing tools.

Leah said that the Bree Collaborative and others in the state are focusing in the next year on shared decision making, and how to educate and encourage providers to engage their patients. She added that we would want to be sure our work is consistent and aligned with the work of the HCA. The HCA has been working on this for several years, but has not seen a lot of uptake. Nancy pointed out that one of the barriers in the uptake has been state laws and the risk of engaging in some of this. In 2007, Washington became the first state to pass legislation around shared decision making. The legislation also provided that if a provider uses a certified decision aid as part of the informed consent process that there is a presumption that informed consent has been given and obtained.

Gloria said that many patients are reluctant to speak up and have the conversations. Sarah said she has also seen it in oncology and this would be an opportunity to provide tools for patients who want to have these conversations but don't know where to start.

Discussion: Committee Focus for 2019

Discussion turned to how to create tools aligned with the committee's goal of addressing inappropriate care for lower back pain, such as imaging and opioids. Andrew said that many patients would prefer less aggressive interventions than surgery. Patient values often guide the decision. Sarah added that there are some interesting tools out there that address patient's individual styles of decision making and provide tools tailored to their style.

Leah suggested that going forward we consider calling it patient engagement rather than shared decision making as it is better understood, especially by patients. Gloria said there is a lot of value to teaching patients how to have these conversations. Too often, we tell them what to do, but not how to do it.

The committee members discussed the possibility of creating a series of short videos that could be hosted on the Own Your Health website. Rebecca suggested they could be videos of role playing a conversation with a provider based on different styles of decision making. Carolyn advised that as we create these, we keep diversity and culture in minds. The committee agreed this might be a good focus for the coming year, and that rather than a broad campaign on appropriate care for low back pain, we focus on creating videos on how to have conversations with the providers, but using back pain as the example.

Own Your Health Update

Rebecca reported that Andrew has submitted an article for the Own Your Health Website on the difference between hospice and palliative care. Rebecca also has written several articles and said all would be posted on the site in the next few weeks and marketed.

There was a brief discussion on continuing to market Own Your Health and the website and to look for opportunities to drive more people to it. Andrew mentioned that in doing research for his article, many he interviewed had not heard of it or the Alliance, but were impressed when he showed them the websites.

Updates and Wrap up.

Sarah mentioned that the February meeting of Health Literacy Northwest might be of interest to committee members. The guest speaker is Thomas H. Gallagher, MD. Dr. Gallagher is a leading international expert on communicating with patients and their families in cases of medical error and adverse outcomes. Sarah will send Rebecca information on the event which will be shared with the rest of the committee.

The next CEC meeting will be Thursday, January 17 at the Alliance. Rebecca will be sending out meeting invites for 2019 next week.