

Thought Leader Group Vision for Shared Decision Making

Our overall vision strives for a patient centered health care system that is respectful of, and responsive to, individual **patient** preferences, needs and values, and ensures that **patient** values guide clinical decisions. (Cite to IOM Definition of Patient Centered Care)

Evidence based shared decision making (SDM) is the norm for patients in Washington State. This requires that:

- Patients and families expect/demand SDM in their clinical interactions, and are engaged and active partners in the SDM process.
- SDM measurably improves patient experience. Relevant patient-driven metrics are identified, tracked and monitored to ensure use and quality of SDM and impact on clinical, patient-centered outcomes, and to allow continuous process improvement.
- SDM implementation actively promotes health equity and reduction of disparities; SDM training, tools, and processes incorporate need for cultural humility and sensitivity, including race, ethnicity, language, gender, socioeconomic status, etc.
- All key stakeholders in SDM (patients, providers, payers, etc.) have a clear understanding of the value of SDM including the value to the patient and “What’s in it for me”.
- Mutual support and accountability extends to all stakeholders, including health plans, purchasers, healthcare institutions, clinicians, professional liability carriers and patients.
- Providers are supported in implementing and maintaining SDM and experience it as a net positive (improves quality of patient interaction, reduces burden of complicated decisions, and includes appropriate compensation for time).
- Systems are designed to support easy, efficient, and effective use of SDM and PDAs, including workflow processes, EHR incorporation, etc.
- Financial systems capture the value created by SDM and PDAs for all involved stakeholders, and use these benefits to support the resources needed for the process (including time as well as financial costs).
- SDM spread includes rural and urban areas, primary care and specialty providers, and diverse patient groups.
- Washington continues to lead and inform national spread of SDM.