SDM訓練資源介紹

財團法人醫院評鑑暨醫療品質策進會廖熏香 副執行長





開始之前.....

- 您個人是否有時間和技能來培訓健康專業人員, 無論是在您自己的機構還是來自其他健康專業人 員或提供者組織的人員?
- 貴機構是否有時間讓人員參加培訓?
- 貴機構是否有實施SDM所需的員工、時間和資源?
- 這項工作是否有領導人支持?
- 貴機構有無強化及鼓勵採用PCOR和共享決策的 積極措施?



https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/workshop/about-shareworkshop.html



衛福部醫病共享決策推廣計畫之SDM教材

- 建議訓練時間:
 - 半天 (約3小時)
- 內容涵蓋三個單元
 - 1. 醫病共享決策(SDM)核心概念
 - 2. 決策輔助工具(PDA)介紹及應用
 - 3. 如何執行SDM(與病人進行SDM互動)
- 使用建議
 - 每單元約30分鐘至1小時
 - 可依據訓練時間長短及學員對SDM熟悉程度,挑選或 組合不同單元內容,或融入案例演練



醫病共享決策(SDM)核心概念

- 目標
 - 促進醫院管理者重視SDM
 - 幫助初學者快速了解SDM 重要概念及釐清迷思。
 - 幫助學員SDM的重要性。
- 內容重點:
 - SDM的What、Why、 When、Who、How、 Tips



醫病共享決策&知情同意、衛教最大差異



• 溝通**時機**不同。



• 內容由單一選項變為**多選項**。



• 討論病人的偏好和價值觀



· 透過高品質實證數據 保障病人知情後做出抉擇。



• 更尊重病人的考量和意願。



評鑑認證、品質促進、專業教育的卓越機構





決策輔助工具(PDA)介紹及應用

目標

- 了解決策輔助工具的用途與用法
- 迷思釐清
- 內容重點:
 - 什麼是決策輔助工具
 - 決策輔助工具的結構與用法
 - 決策輔助工具常見問題
- 提醒:
 - 指導學員如何"使用"PDA, PDA如何幫助他們, 而非如何"開發"PDA

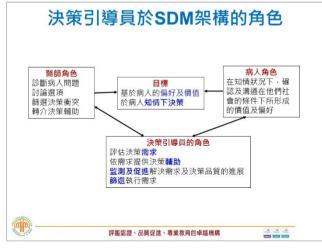




如何執行SDM(與病人進行SDM互動)

- 目標
 - 透過案例引發學員思考病人 價值觀的差異
 - 實施SDM的步驟
- 內容重點:
 - 案例討論
 - 引導方法與溝通技巧
 - 迷思釐清





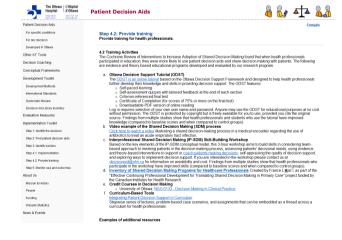


其他建議參考資源

- AHRQ: SHARE Approach
 - https://www.ahrq.gov/professi onals/education/curriculumtools/shareddecisionmaking/t ools/index.html



- 渥太華醫院研究組織(OHRI)之 培訓資源
 - https://decisionaid.ohri.ca/trai ning.htm





Ottawa Decision Support Tutorial









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Introduction

Tutorial

- Decision Support and Shared Decision Making (SDM)
- 2. Conceptual Foundation: The Ottawa Decision Support Framework
- 3. Clarify the Decision
- 4. Decision Conflict and Characteristics of the Decision and Participants
- Knowledge and Expectations
- Personal Values
- 7. Support and Resources
- 8. Monitor and Facilitate Progress
- 9. Methods of Delivering Decision Support
- 10. Case Study: Decision Support Using a Patient Decision Aid

Appendices

A. Glossary of Decision Support Terms

References





9.3 Decision Coaching

Decision coaching is decision support provided by a trained facilitator who is non-directive. The decision support aims to develop the patient's skills in thinking about the options, preparing for discussing the decision in a consultation with his/her health professional, and implementing the chosen option.^{53,54} Decision coaching is provided face to face or using the telephone by a member of the healthcare team within the practice or through a call centre. Decision coaching is used alone or combined with decision tools.

Decision coaching strategies include:54

- clarifying decision and monitoring needs
- facilitating access to evidence-based information
- verifying understanding
- clarifying personal values
- enhancing skills in deliberation, communication, and accessing support from others and resources
- · monitoring and facilitating progress in decision making and achieving decision quality

Decision coaching can be used with the Ottawa Personal Decision Guide to provide decision support. Each seeks to:

- a. Clarify the decision: The first step focuses on clarifying the specific decision, when the decision has to be made (timing), the stage of the patient's decision making, and their leaning.
- b. Explore the decision by probing the patient's knowledge, values, and support needs. The patient lists, or the coach asks the patient to identify, the options, benefits and harms to assess knowledge of options and outcomes. Then, the patient is asked to use stars (0-5) to rate how much each benefit and risk matters to them (clarify values). It is not necessary to complete this step in one sitting; the purpose is to determine gaps as a basis for planning next steps.
- c. Assess needs for support from others by determining the patient's preferred role in decision making. More information about others involved (e.g., people, opinions, pressures, ways they can support) can be probed if there appears to be support problems. The focus should be on others who are most involved and important in the decision.
- d. Screen for unresolved decisional needs using the 4-item SURE test that is designed to inform clinical practice.⁴⁸ If the patient responds "No" to one or more items, there are unresolved decisional needs and he/she is in decisional conflict. Decisional conflict predicts downstream delay or discontinuance of chosen option, regret, and the tendency to blame their health professional for bad outcomes.²¹⁻²³
- e. Plan next steps: The decision coach and/or the patient checks strategies to address the patient's unresolved decisional needs pertaining to knowledge, values, and support. A list of strategies is provided. As the decisional needs resolve or change, questions can be repeated and updated.



SHARE Approach 六項教學資源

- SDM工作坊介紹
- 模組1:共享決策和SHARE方法
- 模組2:在共享決策中使用以病人為中心的結果研究(PCOR)
- 模組3:溝通
- 模組4:將共享決策付諸實踐
- 教師模組



https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/index.html



模組1:共享決策和SHARE方法

最完整

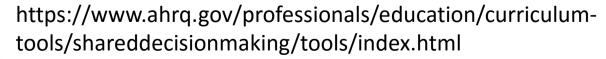
- 工具1:共享決策的基本步驟:快速參考指引
- 工具2:共享決策的基本步驟:以對話啟動者為範例的推廣參考 指引
- 工具3:克服病人的溝通障礙:醫療人員參考指南
- 工具4:健康識能和共享決策:醫療人員參考指南
- 工具5:向病人傳達數字:醫療人員參考指南
- 工具6:使用回覆示教技術:醫療人員參考指南
- 工具7:文化評估:協助學員了解自身機構的文化
- 工具8:將共享決策付諸實踐:臨床團隊用戶指南
- 工具9:以共享決策實現以病人為中心的護理:管理者和實踐領導者簡介

https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/tools/index.html



模組3:溝通

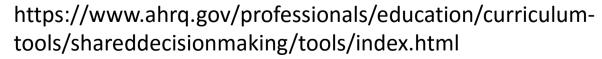
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- 工具4:健康識能和共享決策:醫療人員參考指南
- 工具5:向病人傳達數字:醫療人員參考指南
- 工具6:使用回覆示教技術:醫療人員參考指南
- 工具7:文化評估:協助學員了解自身機構的文化
- 工具8:將共享決策付諸實踐:臨床團隊用戶指南
- 工具9:以共享決策實現以病人為中心的護理:管理者和實踐領 導者簡介





模組4:將共享決策付諸實踐

- 工具1:共享決策的基本步驟:快速參考指引
- 工具2:共享決策的基本步驟:以對話啟動者為範例的推廣參考 指引
- 工具3:克服病人的溝通障礙:醫療人員參考指南
- 工具4:健康識能和共享決策:醫療人員參考指南
- 工具5:向病人傳達數字:醫療人員參考指南
- 工具6:使用回覆示教技術:醫療人員參考指南
- 工具7: 邁向文化競爭力的步驟: 概況介紹共享決策的實施資源
- 工具8:將共享決策付諸實踐:臨床團隊使用指南
- 工具9:以共享決策實現以病人為中心的照護:管理者和實踐領導者簡介







教師模組

- 準備現場培訓的步驟
- 如何制定實際培訓計劃
- 如何編制培訓教材
- 如何使用行銷資源工具包。
- 如何以及何時聯繫未來的受訓人員
- 您的研討會參與者如何獲得繼續教育學分。
- 在今天的培訓之後,還有其他AHRQ活動,包括在線學習中心,認可的網絡研討會和技術支持。

https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/workshop/module5/shareworkshop-mod5guide.html#six

教師可依照訓練時間 長短、對象、教學目標,彈性組合上述模 組或教學工具。



Join the SDM learning journey with us

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