



Shared Decision Making Programme

Decision point maps

In partnership with Capita Group Plc





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1 Background



As part of our activity to embed Shared Decision Making (SDM) and Patient Decision Aids (PDAs) into commissioning processes, Capita undertook to develop a series of decision point maps.

A decision point map was defined as a matrix for a specific clinical pathway, identifying for each PDA the likely relevant patient decision points and the relevant professional, e.g. GPs, secondary care clinicians, midwives, advanced practitioners who will interact with the patient/carer at that point in the pathway.

In early conversations with commissioners and providers, we found that they frequently asked where and when decision aids should be used and who by.



2 Purpose of decision point maps



The maps are intended to be used to support the effective commissioning and implementation of SDM by identifying:

- The key decision points in the patient pathway and therefore where SDM, including PDAs can be utilised
- Who the key clinicians and stakeholders are in the pathways
- The potential commissioning levers that could be used
- The potential information system prompts which would aid the embedding of SDM within everyday practice

Capita will use the maps to:

- Support our work with local organisations, enabling us to effectively target specific decision points in the pathway (and therefore identify appropriate providers) and to work with clinician groups to promote SDM and the use of tools such as PDAs
- Aid engagement with system providers in understanding the key touch points for patients and healthcare providers



3 Developing the decision point maps



We prioritised pathways where:

- Capita and AQuA have been focussing on as part of our work with health economies/ clinical teams
- PDA scopes were agreed or were well developed

For each pathway, we identified:

- Which parts of the health system are involved in key decision points
- Who the key clinical groups or stakeholders are
- What the potential commissioning levers are and what prompts can be used within the system to initiate use of PDAs

Capita then reviewed and refined the maps with a GP before testing them more widely with commissioners, clinicians and AQuA's special interest groups.

Figure 1 – decision point map development process

Pathway Review

- Review of PDA and/or Scoping documents and map to patient pathway to identify:
- Key decision points
- Key stakeholders
- System prompts and commissioning levers
- Creation of Decision Point maps for key pathways

Clinical Input

- Capita internal clinical validation of decision points and stakeholder groups by Dr Mike Warburton (General Practitioner)
- Updating of the decision point maps

Local Validation

- $\bullet \textbf{Testing of decision point matrices as part of the local engagement project which will include: } \\$
 - Local commissioners
 - •Local clinicians
- AQuA Special Interest Groups (where relevant)
- Finalise maps



4 Dependencies



In order to develop the maps, there were several areas where we required input or support from third parties, including:

- Access to PDAs and scope documents from Totally Health
- Local engagement from commissioners, providers, clinicians and patients to test the maps
- Support from AQuA to validate renal maps





5 Decision point map: Osteoarthritis of the hip and Osteoarthritis of the knee

Setting	Interaction	Relevant organisations/ professionals	Relevant information systems	Relevant commissioning levers
Health information/ prevention	Individual may access support and information from friends, family, voluntary sector or health information sources (local or national)	Arthritis UKAge UK		
Primary care	 SDM sheet could be used to support the conversation between the patient and GP during consultation: To discuss conservative treatment options within primary care Prior to referral to tier 2 service Prior to referral to orthopaedic specialist (excluding red flag symptoms) GP to direct the patient to the online PDA and decision coaching service 	 GP Primary care/community physiotherapist LTC practice nurse 	 READ code within practice system SDM sheet in GP IT system 	QOF QPLESReferral criteria
Community based specialist services	 SDM sheet could be used to aid the conversation between the patient and the tier 2 MSK clinician: To discuss conservative treatment options within primary care Prior to referral to orthopaedic specialist Tier 2 MSK clinician to direct the patient to the online PDA and the decision coaching service 	 Extended Scope Practitioners (ESP) GP with Special Interest (GPwSI) 	 Community information system Choose and book 	Contracting requirement
Acute care	 SDM sheet could be used to aid the conversation between the patient and the orthopaedic surgeon: To discuss treatment options prior to listing and consenting for surgery Orthopaedic surgeon to direct the patient to the online PDA and the decision coaching service 	 Orthopaedic surgeon Extended Scope Practitioners (ESP) 	 GP IT system Choose and book Hospital patient system Informed consent 	CQUINContracting requirement





6 Decision point map: cataracts

Setting	Interaction	Relevant organisations/ Professionals	Relevant information systems	Relevant commissioning levers
Health information/ prevention	Individual may access support and information from friends, family, voluntary sector or health information sources (local or national)	Age UK	, i	
Primary care	SDM sheet could be used to support the conversation between the patient and their opticians prior to completion of the GOS18 form by the optician. Optician to direct the patient to the online PDA and coaching service SDM sheet could be used to support the conversation between the patient and their GP during the consultation prior to referral to GPwSI or ophthalmologist. GP to direct the patient to the online PDA and decision coaching service	OpticianOptometristGP	 READ code within practice system SDM sheet in GP IT system 	GOS contractQOF QPLESReferral criteria
Community based specialist services	SDM sheet could be used to support the conversation between the patient and GPwSI/community ophthalmologist prior to listing/consenting to surgery or referral to ophthalmologist GPwSI/community ophthalmologist to direct the patient to the online PDA and the decision coaching service	 GP with Special Interest (GPwSI) Community ophthalmologist 	Community information systemChoose and book	CQUINContracting requirement
Acute care	SDM sheet could be used to support the conversation between the patient and the ophthalmologist prior to listing/consenting for surgery Ophthalmologist to direct the patient to the online PDA and the decision coaching service	 Ophthalmologist 	 GP IT system Choose and book Hospital patient system Informed consent 	CQUINContracting requirement





7 Decision point map: Lower Urinary Tract Symptoms (LUTS)

Setting	Interaction	Relevant organisations/ professionals	Relevant information systems	Relevant commissioning levers
Health information/ prevention	Individual may access support and information from friends, family, voluntary sector, health information sources (local or national) or men's magazines	Prostate ActionBladder and Bowel Foundation		
Primary care	 SDM sheet could be used to support the conversation between the patient and their GP during the consultation: To discuss treatment options within primary care such as conservative measures (lifestyle changes, education, fluid intake, or no treatment or medical treatments (alpha blockers, 5 alpha reductase inhibitors, antimuscarinics, plant extracts Prior to referral to tier 2 service Prior to referral to urologist (excluding red flag symptoms) GP to direct the patient to the online PDA and decision coaching service 	 GP Practice nurse 	 READ code within practice system SDM sheet in GP IT system 	QOF QPLESReferral criteria
Community based specialist services	 SDM sheet could be used to support the conversation between the patient and the tier 2 service: To discuss conservative treatment options within primary care Prior to referral to urology specialist Tier 2 service to direct the patient to the online PDA and the decision coaching service 	 GP with Special Interest (GPwSI) Community urologist Urological specialist nurse 		Contracting requirement
Acute care	 SDM sheet could be used to support the conversation between the patient and the urologist: To discuss treatment options Prior to listing/consenting for surgery for transurethral resection of the prostate or laser surgery Urological surgeon to direct the patient to the online PDA and the decision coaching service 	 Urologist Urological specialist nurse 	 GP IT system Choose and book Hospital patient system Informed consent 	CQUINContracting requirement





8 Decision point map: PSA testing

Setting	Interaction	Relevant organisations/ professionals	Relevant information systems	Relevant commissioning levers
Health information/ prevention	Individual may access support and information from friends, family, voluntary sector, health information sources (local or national) or men's magazines	Prostate ActionBladder and Bowel Foundation		
Primary care	 SDM sheet could be used to support the conversation between the patient and their GP during the consultation: To discuss the individuals preference with regard to PSA testing GP to direct the patient to the online PDA and decision coaching service 	• GP	 READ code within practice system SDM sheet in GP IT system 	QOF QPLESClinical/ pathology guidelines





9 Decision point map: end stage renal failure

Setting	Interaction	Relevant organisations/ professionals	Relevant information systems	Relevant commissioning levers
Health information/ prevention	Individual may access support and information from friends, family, voluntary sector or other health information sources (local or national)	 British Kidney Patent Association (BKPA) Kidney Patient Association (KPA) Polycystic Kidney Disease (PKD) Charity UK National Kidney Federation 		
Primary care	SDM sheet could be used to support the conversation between the patient and their GP where the patient wishes to discuss their treatment options. This is most likely to be supportive care to the patient who will be under a renal team	• GP	 READ code within practice system SDM sheet in GP IT system 	
Acute care	SDM sheet could be used to support the conversation between the patient and the renal physician/renal nurse specialist: To discuss treatment options for chronic renal failure Prior to referral to the transplant team Renal physician/renal nurse specialist to direct the patient to the online PDA and the decision coaching service	Renal physicianRenal nurse specialist	 Hospital patient system/renal system Informed consent Transplant work up protocol 	CQUINContracting requirement
Tertiary care	SDM sheet could be used to support the conversation between the patient and the transplant team prior to putting the patient on the waiting list or listing for live donor surgery Transplant team to direct the patient to the online PDA and the decision coaching service	Transplant surgeonTransplant team	Hospital patient systemInformed consent	 Transplant service specification







Shared

Decision Making

Programme

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