

# Key strategies for patient priorities aligned decision-making

- **Start with one actionable thing (specific ask) that matters most to the patient**
  - There is so much going on, can't do it all at once so need to start somewhere
  - Focus on one actionable thing that the patient really wants to work on
  - Adherence may improve if begin with what matters most to the patient
  - Ask: *'If we could accomplish or change one thing in your health or health care, what would it be? \_\_\_\_\_ What would that be in service of (do more of)?'*
  - Examples:
    - Wants help with dizziness so she can drive regularly.
    - Wants to be less short of breath so she can go to senior center.

- **Use patient's priorities (not just diseases) in communicating, decision-making, assessing benefit**
  - What is the cost (on valued domains) of not doing something? Patient response may be self-motivating and can lead to discussion of value of treatment.
  - Link treatments to patient's values, health outcome goals, and care preferences
  - If patient wants to be able to do something (e.g., walk more, travel, fish, care for grandkids) but is not willing to engage in healthcare activities that may help, then highlight how health care activity may bring him/her closer to what is important.
  - Examples:
    - *"Would you be willing to try the CPAP for a week and see if it helps with your fatigue? If it helps with your fatigue, you may be able to walk more with your wife."*
    - *"Would you be willing to do more tests if it would allow us to figure out the problem so that you could continue to live independently?"*

- **Focus on desired activity (not symptoms)**
  - Symptoms are not always curable; not always clear what is causing the symptom and is often multifactorial
  - Goal is not a discrete diagnosis but improved function and quality of life
  - Shift discussion from symptom lists to how patient feels he/she is living
  - How do symptoms effect meaningful activities/abilities?
  - How are healthcare tasks helping (or getting in the way of) functioning
  - Examples:
    - *"If you were not so short of breath what you do more of?"*

- **Conduct serial trials (trial & error); use patient goal to assess if change is helpful**
  - Assess what is getting in the way of (barriers to) using a medication, accepting a procedure, test, or healthcare task. Then identify options for getting around barriers
  - Decrease burdensome care
    - Are there treatments (medications, etc.) that make your symptoms worse and are negatively impacting your goal achievement? If this treatment were cut back, would it help you achieve something that is important to you?
    - Agree to cut back on a treatment, especially if potential benefits are modest

- **Collaborative negotiations (when differ)**
  - Define the issue in such a way that it becomes a common goal (i.e. how best to help the patient achieve her health priorities).
  - Make sure everyone is using the same information when considering and discussing treatment options.
  - Identify sources of differing recommendations (e.g. one clinician feels disease-specific guidelines don't apply; another clinician may feel benefit > harm).
  - Brainstorm therapeutic alternatives (mutual problem-solving).
  - Often a compromise solution or planned trials for effects of changes can be agreed upon