Population Health Learning Activity: **Patient Engagement and Shared Decision Making**		
Relevant PCMH Concepts	**Care Coordination and Care Transitions (CC)** The practice systematically tracks tests, referrals and care transitions to achieve high quality care coordination, lower costs, improve patient safety and ensure effective communication with specialists and other providers in the medical neighborhood.	**Knowing and Managing Your Patients (KM)** The practice captures and analyzes information about the patients and community it serves, and uses the information to deliver evidence-based care that supports population needs and provision of culturally and linguistically appropriate services.
Relevant PCMH Competencies & Criteria	Competency B: Referrals to Specialists The practice provides important information in referrals to specialists and tracks referrals until the report is received. o *CC13*: Engages with patients regarding cost implications of treatment options.	Competency F: The practice identifies/considers and establishes connections to community resources to collaborate and direct patients to needed support. o *KM22*: Provides access to educational resources, such as materials, peer-support sessions, group classes, online self-management tools or programs. o *KM24*: Adopts shared decision-making aids for preference-sensitive conditions.
Learning Objectives (with relevant IPEC Core Competencies)	o Develop a review and assessment of, and recommendations for, decision-support tools, self-care and decision-making aids for a particular health issue to assist the practice in meeting its patients' needs. o Demonstrate shared decision making skills. o Use the full scope of knowledge, skills, and abilities of professionals from health and other fields to provide care that is safe, timely, efficient, effective, and equitable (RR5). o Integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient and community values and priorities/preferences for care (TT4). o Act with honesty and integrity in relationships with patients, families, communities, and other team members (VE9).	
IP Student Learning Activities	1) An IP student team identifies a common health issue in the practice, determined by the data compiled and needs identified within the *Population Health Profile Learning Activity* (if available). The team then: a) Reviews the practice's patient decision support and self-management materials including educational materials, self-management tools, decision-making aids, practice or community	

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IP Student Learning Activities
(Students will complete activities 1 OR 2, AND 3)
	education programs (including group classes and peer support), and list(s) of relevant resources available in the community, as compiled/maintained by the practice;
	   b) Interviews appropriate practice team members and if possible, patients or patient/family advocates, regarding the identified issue and adequacy of available resources, including shared decision making (SDM) resources;
	   c) Assesses adequacy of existing resources based on national guidance for health literacy, design, and SDM (*See resources listed in* **Diversity and Health Literacy Learning Activity**);
	   d) Determines whether additional evidence-based resources would address the identified health issue; and if so, identifies appropriate resources; and
	   e) Prepares a report of its findings and recommendations.
	
	2) A practice team member or UNE educator will review with the IP student team:
	   a) Available and/or onsite patient self-management and SDM tools that address the practice's most prevalent condition(s); and
	   b) The practice's process for tracking, monitoring, and reporting clinician and healthcare team engagement in SDM.
	
	3) *ADVANCED*: During a (shared or independent) patient encounter, members of the student team will use a preceptor-approved decision aid with a patient to clarify patient values and preferences in order to facilitate decision-making.

IP Student Learning Assessment	1) The student team presents the report of their findings and recommendations to appropriate practice team members, who will give the student team written feedback on their work and determine adjustments to the practice's resources. Following this presentation, the student team, preceptor(s) and/or facilitator will debrief the experience of working together as a team on this Learning Activity. 2) As a group, students and the facilitator will discuss the value of these tools; evaluate practice performance of SDM (if possible); agree on best practices for use of tools, resources and SDM performance measurement; and write a brief report on the students' work and learning. 3) *ADVANCED*: Students will debrief these experiences with their preceptor(s) and/or facilitator and other members of the student team, with written feedback provided to the students.
Resources	o Shared decision making (SDM) is "a process of communication in which clinicians and patients work together to make optimal healthcare decisions that align with what matters most to patients. SDM requires three components: 1) clear, accurate, and unbiased medical evidence about reasonable alternatives – including no intervention – and the risks and benefits of each; 2) clinician expertise in communicating and

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Resources	tailoring that evidence for individual patients; and 3) patients values, goals, informed preferences, and concerns, which may include treatment burdens " (National Quality Forum, 2017) o Choosing Wisely (ABIM Foundation) o Decision Support Toolkit for Primary Care (Dartmouth-Hitchcock Center for Shared Decision Making, 2018) o Patient Decision Aids (Ottawa Hospital Research Institute) o Shared Decision Making: A Standard of Care for All Patients (NQF, 2017) o Shared Decision Making National Resource Center (Mayo Clinic) o TeamSTEPPS Debrief Checklist o The SHARE Approach Shared Decision Making Toolkit (AHRQ) ▪ SHARE Quick Reference Guide (AHRQ) o Video: What is Shared Decision Making? (IHI) o IPEC Core Competencies (2016) o NCQA PCMH Standards and Guidelines (2017)

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