**WebEx guidance/housekeeping**:

**Audio:**
Please use the teleconference line:

Telephone Number : 0203 651 6622 or 0800 0232036
Participant Passcode: 91474404#

**Questions**
We welcome any questions that you may have, you have two options to submit a question:
Option 1. Use the Q&A/Chat function to submit a text question via the WebEx
Option 2. Dial in to the teleconference line to ask a question over the phone

Questions will answered at the end of the presentation.

**Recording**
For your information, this online meeting is being recorded for our reference and the recording will be made available through our website following the meeting.

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Shared Decision Making in Primary Care

Louise Rogerson
Director of Service Development
Intelesant
The Beginning in Trafford

- Consistent high referrals to T&O in secondary care
- Poor awareness of local options in GP practice
- Poor utilisation of alternatives to traditional referral route
- Patients feeling confused about the pathway
- Long waiting times for physiotherapy
Patient Focus Group

• Would like to know more about their options
• Would like to know what support was available locally
• Would like a simple list describing their options and associated risks/benefits for them to decide for themselves
• Huge variation in GP approach and knowledge
GP review

• GPs strongly felt they did SDM already but did not record it and provided no written information for patients
• GPs described shorter consultations over a long period of time over which SDM evolved
• GPs were inundated with demands on their time and requirements from the PCT
• Agreed in principle with the idea
SDM Methods in primary care

• Create an option grid which described the clinical options and the local availability for appropriate services

• Create a template within the GP system to capture SDM taking place, improve the system capture of assessment information, and save time at point of referral

• Provide education sessions at GP practices

• Hold a central sharepoint to keep information up to date including patient leaflets
## Option Grid – treatment options

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
</table>
| Lose weight | Some pain relief  
Try and maintain BMI below 25 with diet control  
Increased mobility  
Better overall health | Requires commitment |
| Increase exercise | Complete or significantly reduced pain  
Improved function | Requires commitment |
| Physiotherapy | Additional support for patients to develop their exercise skills and improve commitment to their home exercise programme | Requires commitment and travel to the physiotherapy department - appointments only available between 8.30am and 4.30pm in Trafford |
| Walking aid | Support from a walking stick or crutch may reduce the weight going through the joint, improve walking pattern, and therefore ease the pain | |
| Insoles and supportive devices | Insoles may improve shock absorbency or improve biomechanics of the foot and so reduce pain | Requires appointment with podiatry for assessment, and commitment to use the prescribed insole which may restrict footwear choices |
| Pain medicines | Pain relief | Long-term use of some prescription medicines may |
## Option Grid local options

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lose weight</td>
<td>None as long as the diet is well managed</td>
<td>Your GP may suggest referral to Specialist Weight Management if BMI is high. <em>(GP – SWM referral proforma and referral guidance on website)</em></td>
</tr>
</tbody>
</table>
| Increase exercise             | Pain may get worse with exercises: this is due to increased work, pain does not mean harm is being done, if pain is severe, rest for a few days and build up more slowly | • Ask GP for knee exercise leaflet. *(GP – exercise leaflet on website)*  
• Exercise leaflet also available on Arthritis Research Centre website - [www.arthritisresearchuk.org](http://www.arthritisresearchuk.org)  
• Gentle chair based exercises run by Sport Trafford. For location and times of sessions contact Heather Kozer on 0161 912 3140  
• General exercise options can be found on the following websites:  
  - [www-traffordleisure.co.uk/activities/exercise-classes](http://www-traffordleisure.co.uk/activities/exercise-classes)  
  - [http://www.go3trafford.co.uk/](http://www.go3trafford.co.uk/)                                                                 |
| Physiotherapy                 | None as long as the activities are well managed                              | Physiotherapy is provided at Altrincham or Trafford General Hospital. You need to ask your GP to refer you. Physiotherapy groups are also available in Sale West. Please contact the Physiotherapy Dept at TGH if you wish to have your physiotherapy sessions there. *(GP – need to complete msk referral form and forward to TGH)* |
| Walking aid                   | None                                                                        | If you would like a walking aid, please ask your GP to refer to you to the Physiotherapy Dept at Trafford General Hospital for assessment and provision of the appropriate aid |
| Insoles and supportive devices| Insoles and orthotic devices sometimes make the pain worse, but this will be managed by the dispensing clinician | Your GP can offer advice if you would like to consider an insole or assistive device and would be able to refer you to the podiatry clinic for assessment and advice. |
GP template

shared decision making ortho guidance

SDM guidance

The text in red is the only essential text for the project, the purple is preferred, the teal is recommended to create a coded record of a patient status for future reviews.

Diagnosis
Localised, secondary osteoarthritis of pelvic region/thigh
Localised, secondary osteoarthritis of the lower leg
Localised, primary osteoarthritis of the lower leg
Localised, primary osteoarthritis of the pelvic region/thigh

Examination of Joint
Visual analogue pain scale
On examination of hip joint no abnormality detected
On examination of knee joint no abnormality detected
O/E - joint swelling
O/E - joint stiffness
O/E - joint power
O/E - bony abnormality
Plain X-ray knee

Assessment of function
Able to manage steps and stairs
Unable to manage steps and stairs
Difficulty managing steps and stairs
Able to mobilise indoors
Unable to mobilise indoors
Difficulty mobilising indoors
Able to mobilise outside
Unable to mobilise outside
Difficulty mobilising outside
Able to mobilise using mobility aids

Advice for Patient

At the first consultation print off the patient leaflet, the website can be opened if demonstration required for patient.

The SURE tool is to be printed off and given to patient once the decision is made, advise the patient to complete and hand back to reception. Remind them that the purpose of the tool is to evaluate the use of the decision aid, not the doctor.
Assessment of function

- Able to manage steps and stairs
- Unable to manage steps and stairs
- Difficulty managing steps and stairs
- Able to mobilise indoors
- Unable to mobilise indoors
- Difficulty mobilising indoors
- Able to mobilise outside
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Advice for Patient

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Shared Decision Making Undertaken

Shared decision making

Apply this code when decision is made, and the shared decision making has been used

Decision record

- Knee joint operations
- Hip joint operations
- Peri articular injection
- Hip replacement planned
- Knee replacement planned
- Analgesics requested
- Physiotherapy
- Physical exercises

Reminders:
1. Patient likes to be known as - 4/4/08 KSL
2. Temazepam only to be given from acute
3. Uses HARTAS

Micky MOUSE 1Z7 7M - 01/12/1999 (M)
GP recruitment

Shared Decision Making

"Let's talk about what options are available to you at this stage. There are option grids and decision aids available to help you see what your options are."

Tools to Aid Discussion
- Option Grids
- Patient Decision Aids

THE RIGHT CHOICE

NO DECISION ABOUT ME, WITHOUT ME

At our orthopaedic focus group, one patient said:

"What I need is a list of options with a description of the risks and benefits for me to make the right decision...surgery would be the last thing I would choose if I knew those other things could actually relieve my pain."

The Shared Decision Making Option Grid provides the ideal solution, it effectively summarises your clinical conversation in a simple written form for the patient to take away and consider. In Trafford, we have modified the grid to include local service options and community groups relevant to the condition considered. Patients can also access an internet based decision aid at NHS Direct if they would like further support to consider the impact of their condition and their decision.

Shared Decision Making ensures patients are fully engaged with the next step of their journey to a successful outcome, and supports GPs in presenting the best practice recommendation alongside their clinical opinion for each individual patient.

Be a trendsetter and get involved!

We have already recruited several GPs to be part of an exciting pilot in improving care for patients. For more information contact Val Barrow (Val.Barrow@traford.nhs.uk or 0161 573 6092)
Sharepoint site

- Patient exercise leaflets
- Physiotherapy self referral form (only allowed SDM practices to self refer)
- Diet advice
- OA advice from patient.co.uk
- Option grids
- Minor surgery referral forms
- Knee replacement surgery leaflet
Key messages

• Recognise that GPs have very limited time with a patient
• Providing information to the patient supports behaviour change
• Giving GPs up to date information about services in a simple format within their system makes life easier
• Accurate coding and information capture supports SDM over a number of years
Thank you and Any Questions?

Louise@intelesant.com