

# Shared Decision-Making Task Group



**Robert Volk, PhD**



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**NATIONAL  
LUNG CANCER  
ROUNDTABLE**

**UPDATES FROM THE SHARED  
DECISION-MAKING TASK GROUP**

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# Showcase Overview

1. Connecting quitlines with lung cancer screening
2. Collaborative projects with the American Academy of Family Physicians
3. Shared Decision Making Training Program

# Disclaimers

- Support was provided by the Patient-Centered Outcomes Research Institute, through awards CER-1306-03385 and D&I Award DI-2018C3-14825.
- The statements presented in this work are solely the responsibility of the authors and do not necessarily represent the views of the Patient-Centered Outcomes Research Institute, its Board of Governors or Methodology Committee.

# USPSTF Draft Recommendation Statement – July 7, 2020

## Shared Decision Making

- Shared decision making is important when clinicians and patients discuss screening for lung cancer.
- The decision to undertake screening should involve a thorough discussion of the potential benefits, limitations, and harms of screening.



# Project INFORM –

## Promoting Informed Decisions about Lung Cancer Screening

JAMA  
Network | **Open**<sup>™</sup>



Original Investigation | Oncology

### Effect of a Patient Decision Aid on Lung Cancer Screening Decision-Making by Persons Who Smoke A Randomized Clinical Trial

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**Goal** – to prepare smokers who were seeking tobacco cessation counseling to make informed decisions about LCS

Volk et al, JAMA Netw Open, 2020.  
PCORI Award CER-1306-03385

### Randomized trial

- 13 state quitlines
- 516 callers
- 86% follow-up rate at 6-months!

### Main findings

Smokers who received the decision aid were:

- better prepared
- clearer about their choice
- better informed.

Many saw a PCP to discuss screening and went on to be screened.



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# Project CONNECT – CONNECTing quitline clients with lung cancer screening services

- Training quitline call center staff to identify and refer callers to LCS resources
- Modifying intake process to identify age & smoking-history eligible callers
- Multiple referral pathways
- 2 phases with 8 quitlines
- Referred ~600 callers to date

lungscreen.health



**PROJECT CONNECT**  
Lung Cancer Screening Support

## Screening for Lung Cancer

*A Discussion Guide for You and Your Doctor*

- 1 YOU HAVE A DECISION TO MAKE**  
You have a decision to make about lung cancer screening. This is a guide to help you decide, with your doctor, if lung cancer screening is right for you.
- 2 WHO SHOULD BE SCREENED FOR LUNG CANCER?**  
Screening may be right for you if:
  - You are between 55-80 years of age.
  - You currently smoke or you quit less than 15 years ago.
  - You smoked, or have smoked, an average of one pack per day for at least 30 years.
- 3 WHAT TO THINK ABOUT WHEN MAKING A DECISION**  
  - You need to be screened every year.
  - Screening may not be right for you if you are in poor health.
  - If you're not willing to have surgery for lung cancer, then lung cancer screening may not be right for you.
  - Screening is a process. If something abnormal is found, more testing may be needed.

Important facts about lung cancer screening:

  - Screening can find lung cancer early when the chance for cure is greater.
  - False alarms are common. When screening shows something, most of the time it is not cancer.
  - You may need a biopsy.
  - You will be exposed to some radiation from screening and other testing.
  - Some lung cancers may be found that will never harm you.
- 4 MAKING A DECISION**
  - Are you willing to be screened every year?  
 Yes  No  Not sure
  - If cancer is found, are you willing to have surgery?  
 Yes  No  Not sure
  - How concerned are you about having a false alarm; needing more testing; radiation; finding a cancer that would never have harmed you:  
 Not concerned  
 Somewhat concerned  
 Very concerned
- 5 WHAT IS YOUR DECISION?**  
 I want to be screened  
 I do not want to be screened  
 I am not sure

**REMEMBER:** the best way to prevent lung cancer is to **STOP SMOKING**  
If you currently smoke, talk to your healthcare provider or call the nationwide quitline at: **1-800-QUIT-NOW (1-800-784-8669)**

**WILL INSURANCE PAY FOR SCREENING?**  
Private insurance plans may cover lung cancer screening with no out of pocket costs beginning at age 55.  
Medicare covers lung cancer screening for people up to 77 years old and who are otherwise eligible.  
You should know that you and your insurance will be responsible for costs of additional tests and treatment.

This work was partially funded through a Patient-Centered Outcomes Research Institute® (PCORI®) Implementation Award (21-2018C3-14620).



# New Initiatives with the American Academy of Family Physicians

1. Membership survey
2. Environment scan of LCS SDM/IDM tools
3. New Shared Decision-Making Tools
4. CME for LCS

~ 24 month initiative

Partners: AAFP, NLCRT, MDACC

# Project 1: Membership Survey and Key Informant Interviews

**Goal** – To explore family physicians' current LCS practices, and perceived challenges/barriers to implementing SDM

Survey 2000 AAFP members

Conduct 20-30 key informant interviews with physicians engaged in LCS



**INTERVIEWS**

# Project 2: Environmental Scan of LCS Decision Support Tools

**Goal** – Determine how benefits and harms are communicated in existing decision aids, identify evidence sources, and evaluate aids against current certification standards.

Provide critical overview of tools related to needs of family physicians.



# Project 3: New SDM Tools for LCS

**Goal** – Produce and test for acceptability/usability a suite of SDM tools for use in varied primary care settings and patient groups

User-centered design approach, with multiple rounds of testing/refinement

Field test with 10 family physicians using the tool with patients

Disseminated through AAFP and NLCRT

The image shows a screenshot of a patient decision aid titled "Screening for Lung Cancer: A Discussion Guide for You and Your Doctor". The guide is part of the "PROJECT CONNECT" initiative, which provides Lung Cancer Screening Support. It is structured into five numbered sections:

- 1 YOU HAVE A DECISION TO MAKE**: Explains that the patient has a decision to make about lung cancer screening and provides a guide to help decide with their doctor.
- 2 WHO SHOULD BE SCREENED FOR LUNG CANCER?**: Lists criteria for who should be screened, including age (55-80), smoking history (currently or quit less than 15 years ago), and pack-years (average of one pack per day for at least 30 years).
- 3 WHAT TO THINK ABOUT WHEN MAKING A DECISION**: Lists factors to consider, such as the need for annual screening, health status, willingness to undergo surgery, and the process of screening. It also includes "Important facts about lung cancer screening" such as early detection, false alarms, and the need for a biopsy.
- 4 MAKING A DECISION**: Contains three questions with checkboxes for "Yes", "No", and "Not sure":
  - Are you willing to be screened every year?
  - If cancer is found, are you willing to have surgery?
  - How concerned are you about having a false alarm; needing more testing; radiation; finding a cancer that would never have harmed you?
- 5 WHAT IS YOUR DECISION?**: Contains checkboxes for "I want to be screened", "I do not want to be screened", and "I am not sure".

Additional information includes a "STOP SMOKING" section with the 1-800-QUIT-NOW number, and a "WILL INSURANCE PAY FOR SCREENING?" section explaining Medicare and private insurance coverage. A footer note mentions funding from the Patient-Centered Outcomes Research Institute (PCORI).

# Project 4: CME for LCS

**Goal** – To develop online curricula on LCS, presented in multiple vignettes of 15-30 minutes of learner engagement time

Self-paced, individual learning

Target audience: family physicians, care team staff

Patient and public involvement through AAFP  
*Patient Engagement Faculty*



Thank You





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## DEVELOPING A SHARED DECISION MAKING TRAINING PROGRAM

**Support for Practitioners and Care Coordinators**

Ronald Myers, DSW, PhD

*Thomas Jefferson University*



# Disclosures

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# Collaborating Organizations

- National Lung Cancer Roundtable
- The American College of Chest Physicians (CHEST)
- Sidney Kimmel Cancer Center, Thomas Jefferson University
- GO<sub>2</sub> Foundation for Lung Cancer

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# Mission of the Partner Organizations

- Partner organizations are developing a unique online Shared Decision Making (SDM) Training Program that can prepare healthcare practitioners and care coordinators with knowledge and skills needed to fulfill USPSTF and CMS guidelines for SDM in lung cancer screening (LCS).

# Focus of the SDM Training Program

- Develop curriculum that includes information and tools to:
  - Identify patients who are eligible for LCS
  - Educate patients about LCS and tobacco treatment resources
  - Engage patients in SDM and LCS.



# SDM Training Program Components

- The curriculum of the 1-hour accredited online program includes three (3) modules:
  - Assessment of Eligibility for Lung Cancer Screening and Tobacco Treatment
  - Education about Lung Cancer Screening and Tobacco Treatment
  - Decision Support in Lung Cancer Screening

# Learning Objectives

- At the conclusion of the course, participants should be able demonstrate knowledge and be able to:
  - Identify patients who are eligible for SDM and LCS
  - Educate patients about LCS, elicit values, clarify preference
  - Document SDM and order LCS





# Prototype Pilot Test - 2021

- Target Audience
  - Primary care physicians
  - Specialist physicians
  - Advanced practice providers
  - Nurse practitioners
  - Care coordinators

Thank You



# Q&A Session



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# 2020 Annual Meeting



## NATIONAL LUNG CANCER ROUNDTABLE

December 7 - 8, 2020

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