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THE IMPLEMENTATION OF PATIENT-CENTERED HEALTH LITERACY AND SHARED DECISION-MAKING : A CASE STUDY OF A REGIONAL HOSPITAL IN THE SOUTH



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Introduction

The shared decision making (SDM)can help patients discuss with their physicians and help them better understand their clinical conditions while being more aware of their personal values and preferences. The patient decision aid (PDA) presents the various possible benefits and harms in a comparative manner, allowing patients to compare the impact of good and bad conditions from their personal point of view and then work with their healthcare providers to make the most appropriate decision.Another factor related to patient engagement is health literacy, where PDA is a tool and health literacy is a competency. Insufficient health literacy limits the effective dissemination and understanding of health information, resulting in low utilization of health promotion services.

Methods

- 1.The SDM team has been meeting every two months in 2019, with 21 team members, and the chairman of the SDM team will decide on the personnel to be invited to participate in the discussion.
- 2.SDM team members are responsible for reporting the number of cases received and PDA measurement indicators on a regular basis.
- 3.During the promotion period, it was found that the PDA content provided by the hospital was difficult to read for the patients, because the hospital's patients were elderly and not well educated. Therefore, two workshops on health literacy and shared decision-making were held to allow medical professionals to redesign the content of PDAs , so that patients or their families can Reading (How to) and listening (Act to)during the shared decision-making process, helping people understand the importance of these issues, reduce their worries about health and illness, and finally make decisions.

Patent Ductus Arteriosus(PDA)

快來洗腎了，我該選擇透析或是安寧緩和療護？

前言

當醫師診斷您的腎臟功能進入末期時，無法利用藥物及其他非侵入性治療改善腎功能時，您可能需要選擇一種適合自己的治療模式來取代腎臟功能，以維持生活品質並延緩壽命。

腎臟科主治醫師可以幫助您了解各種腎臟病治療的治療模式，瞭解兩種治療的優點、了解您的想法及您在意的事情，幫助您找出適合自己的選擇。

疾病簡介

所謂「慢性腎臟病」是指腎臟功能長期受損，導致體內毒素累積，引起各種症狀，如：疲勞、食慾不振、夜尿頻繁、水腫、貧血、骨質疏鬆等。當腎臟功能嚴重受損時，就需要進行透析治療。

適用對象

慢性腎臟病第 5 期病人，並符合下列三種情況以下者 適合：

(1)病人年齡大於 60 歲

(2)病人年齡大於 60 歲

(3)患有其他併發症，如：心臟病、糖尿病、高血壓、貧血、骨質疏鬆等。

新療法安寧緩和療法治療，則可避免透析治療的副作用，並能根據病人的生活狀況，提供個別化的治療。安寧緩和療護不鼓勵為主，應以此類治療作為輔助治療，而非主要治療。安寧緩和療護可幫助病人，在最後階段，能獲得舒適、安寧、尊嚴、永恆、幸福、平靜、寧靜等。

第一種：透析治療

透析可以清除血液中的毒素，有 2 種透析方式：

(1) 腹膜透析（俗稱「造肚子」）：利用腹膜作為過濾膜，將毒素從血液中清除。優點：操作簡單，可以在家中進行。缺點：需要長期使用導管，容易感染。適合：行動不便，希望在家中接受治療的病人。

(2) 血液透析（俗稱「洗血」）：利用人工腎臟（透析器）來過濾血液中的毒素。優點：清除毒素效率高。缺點：需要定期前往醫院，時間較長。適合：病情嚴重，需要快速清除毒素的病人。

第二種：安寧緩和和療護

安寧緩和療護，是以緩和症狀、改善生活品質為目的，而非以延長生命為目標。安寧緩和療護可幫助病人，在最後階段，能獲得舒適、安寧、尊嚴、永恆、幸福、平靜、寧靜等。

目前為止，您比較想選的治療模式是什麼呢？

請您勾選 ☐ 可能重組的治療模式

☐ 透析治療 ☐ 安寧緩和療護 ☐ 目前還不清楚

透過以下四個步驟來幫助您做決定

步驟一：洗腎（常規透析） vs 安寧緩和和療護

洗腎（常規透析）

- 病人接受不同的洗腎方式及洗腎時間。
- 配合治療時間：
- (1) 腹膜透析每日 3-5 次，每次 2-4 小時。
- (2) 血液透析每週 3 次，每次 4 小時。
- 學習新技巧，將痛苦轉化為心理負擔。

安寧緩和和療護

- 病人接受安寧緩和療護，能避免透析治療的副作用，並能根據病人的生活狀況，提供個別化的治療。
- 以緩和症狀及支持性的醫療為主，而非以延長生命為目標。
- 病人接受安寧緩和療護，能避免透析治療的副作用，並能根據病人的生活狀況，提供個別化的治療。

步驟二：您選擇醫療方式會在意的項目有什麼？以及在乎的程度為何？

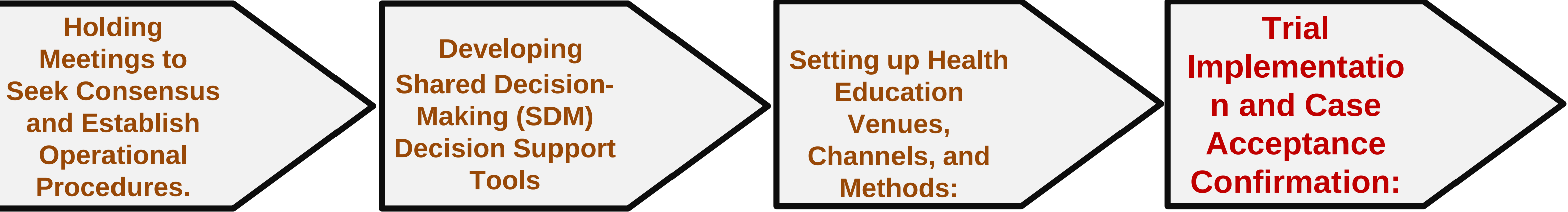
請依照下列表格填寫，逐一圈選一個比較傾向的情況。

接受洗腎的理由	比	比
我及家人能配合洗腎時間及生活習慣	3	2
我期望能自己時間安排接受治療	3	2
我期望能自己時間安排接受治療	3	2
我期望能自己時間安排接受治療	3	2
我期望能自己時間安排接受治療	3	2
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我期望能自己時間安排接受治療	3	2
我期望能自己時間安排接受治療	3	2
我期望能自己時間安排接受治療	3	2

步驟三：您對治療方式的認知有多少？請試回答下列問題

1. 接受安寧緩和療法，是為了延緩生命，改善生活品質及生活品質？
☐ 是 ☐ 否 ☐ 我不確定
2. 接受安寧緩和療法，能避免痛苦？
☐ 是 ☐ 否 ☐ 我不確定
3. 接受安寧緩和療法，能避免痛苦？
☐ 是 ☐ 否 ☐ 我不確定
4. 決定接受安寧緩和療法，能避免痛苦？
☐ 是 ☐ 否 ☐ 我不確定

Clinical Implementation Process:



Results

1. The number of projects promoting SDM has been increased from 2 in 2017 to 16 in 2022.
2. In 2021, 191 questionnaires were collected from medical staff and 113 valid questionnaires were collected from patients; the patient satisfaction rate of medical SDM was 86.1%, the satisfaction rate of consultation process was 88.5%, and the average satisfaction rate of medical staff was 77.6%.
3. Collaboration with SDM promotion, our diabetes care team was also awarded with several prizes, including 2021 Diabetes Diabetes Health Promotion Organization Executing Result, New Admissions, and Organizational Innovation Awards.
4. On February 25, 2022, the hospital held a quality improvement competition and selected 10 topics from 16 topics for oral presentation by the hospital and system judges. 6 topics were awarded the Silver Medal Award, Bronze Medal Award, and Honorable Mention.
5. In recent years, 12 oral and poster papers have been published on the topic of SDM.

Conclusion

SDM is a very time-consuming task for medical professionals. However, it is fair to the patient and provid

Patient and Healthcare Personnel Satisfaction

