

Choices and Resource Allocation: What role for patients and citizens?

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The Triple Aim

Berwick D M, Nolan T W, Whittington J.
Health Affairs 2008



Better health for populations



Better care for individuals



Lower per capita cost

Policy Responses

Health technology assessment

Clinical guidelines

Quality improvement

Value-based payments

Public reporting

Choosing Wisely

Patient and public engagement





Promoting health and wellness –
challenging misperceptions



Encouraging realistic expectations –
shared decision making

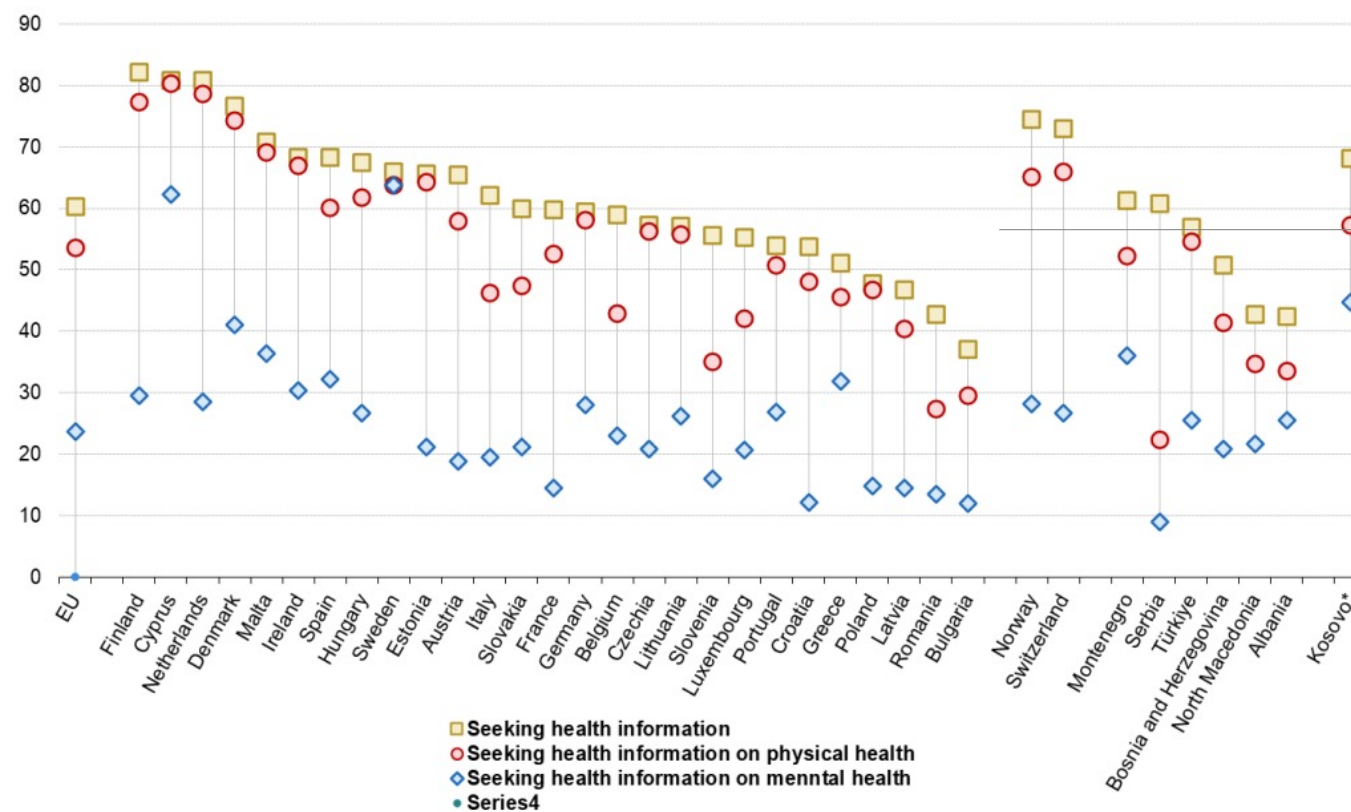


Proactive coordinated care –
personalised care planning

Engaging
patients and
citizens

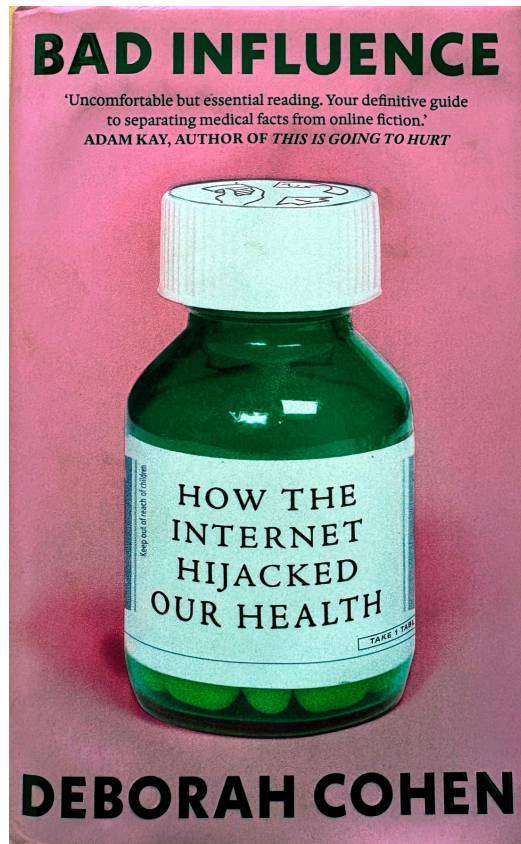
Individuals who used the internet to seek health-related information, 2025

(% of individuals aged 16 to 74)



*This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo declaration of independence.

Source: Eurostat (online data code: isoc_ci_ac_i)



Internet use can mislead

Social media

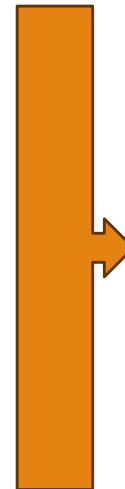
Influencers

Wearable devices

Marketing

Covert advertising

Artificial Intelligence



Over-medicalisation

Vaccine hesitancy

Misinformation

A large, dark red hand is shown from the wrist down, holding a small orange and white container. A stream of black and white capsules is falling from the container. The background is a solid red color.

Sorry, but no amount of antibiotics will get rid of your cold.

The best way to treat most colds, coughs or sore throats is with plenty of fluids and rest. Talk to your health care provider.

I/we pledge to provide patients with the highest quality of care by avoiding unnecessary antibiotic use.

Signature

Choosing
Wisely
Canada

Choosing Wisely Canada



MORE IS
NOT
ALWAYS
BETTER

www.ChoosingWisely.ca

Challenging Misperceptions

More medicine is better medicine		Unnecessary care = unnecessary risk + cost
Screening and early diagnosis is always good		Overdiagnosis can cause harm
Benefits of treatments always outweigh harms		Balance between benefits and harms is often marginal or uncertain
Denial of treatment = rationing		Efficiency = better for everyone (NOT rationing)
Doctors know best so should make all decisions		Patients' informed preferences matter

Shared decision-making



Clinicians and patients working together to select tests, treatments or support packages, based on clinical evidence and the patient's informed preferences.

Coulter and Collins. Making Shared Decision Making a Reality. King's Fund 2011



What patients need to know about treatment options

Benefits? (what are the benefits)

Risks? (what are the risks?)

Alternatives (what are the alternatives)

Nothing (what will happen if I do nothing?)

Patient decision aids can help

Evidence-based tools to help people participate in decision-making

Leaflets, booklets, or online, for use before, after or within clinical consultations

Information about options

Help patients clarify and communicate their values and preferences

Should I Have Knee Replacement Surgery?

1. Understand the facts 2. Compare Options **3. Your Feelings** 4. Your Decision 5. Quiz Yourself 6. Your Summary

What matters most to you?

Our personal feelings are just as important as the medical facts. Think about what matters most to you in this decision, and show how you feel about the following statements.

Reasons to have knee replacement surgery	Reasons not to have knee replacement surgery
I want to be able to do low-impact activities, such as swimming and golf, as well as chores and housework.	My knee doesn't really get in the way of the physical activities I like or need to do.
< < < < > > > More important Equally important More important	
I have more bad days than good.	I have more good days than bad.
< < < < > > > More important Equally important More important	

Patient decision aids: the evidence

In 209 studies involving 107,698 participants, use has led to:

- Greater knowledge
- More accurate risk perceptions
- Greater comfort with decisions
- Greater participation in decision-making
- Fewer people remaining undecided
- Fewer patients choosing major surgery
- Better agreement between values and choice



Stacey D et al. Cochrane Library 2024

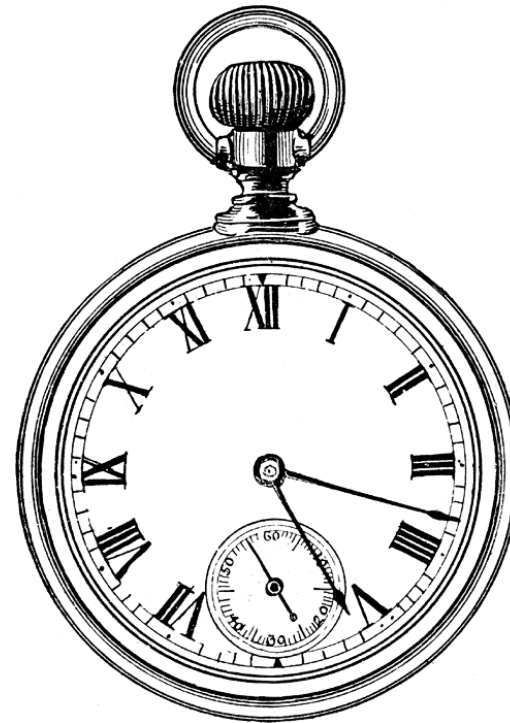
Self-care is important for managing long term (chronic) conditions

Professional care –

- 5 hours per year

Self-care –

- 8,755 hours per year (> 99% of their time)



Treatment burden

MALCOLM WILLET



Patients with 3 chronic conditions complying with all clinical guidelines:

- 6-13 medications per day
- 1.2-5.9 healthcare visits per month
- 49.6-71.0 hours per month in health-related activities

Du Vaure et al. BMJ Open 2016

Personalised care planning

Conversation between a patient and a clinician to jointly agree goals and actions for managing the patient's health problems + support to implement these actions.

Aim: to help people live well, focusing on their goals and priorities and building their capacity for self-care.



Personalised care planning for people with long-term conditions

In 19 trials involving 10,856 participants, personalized care planning led to:

- **Better** physical health (blood glucose, blood pressure)
- **Better** emotional health (depression)
- **Better** capabilities for self-management (self-efficacy)

Importance of self-management support

Those who had the knowledge, skills and confidence to manage their own healthcare had.....

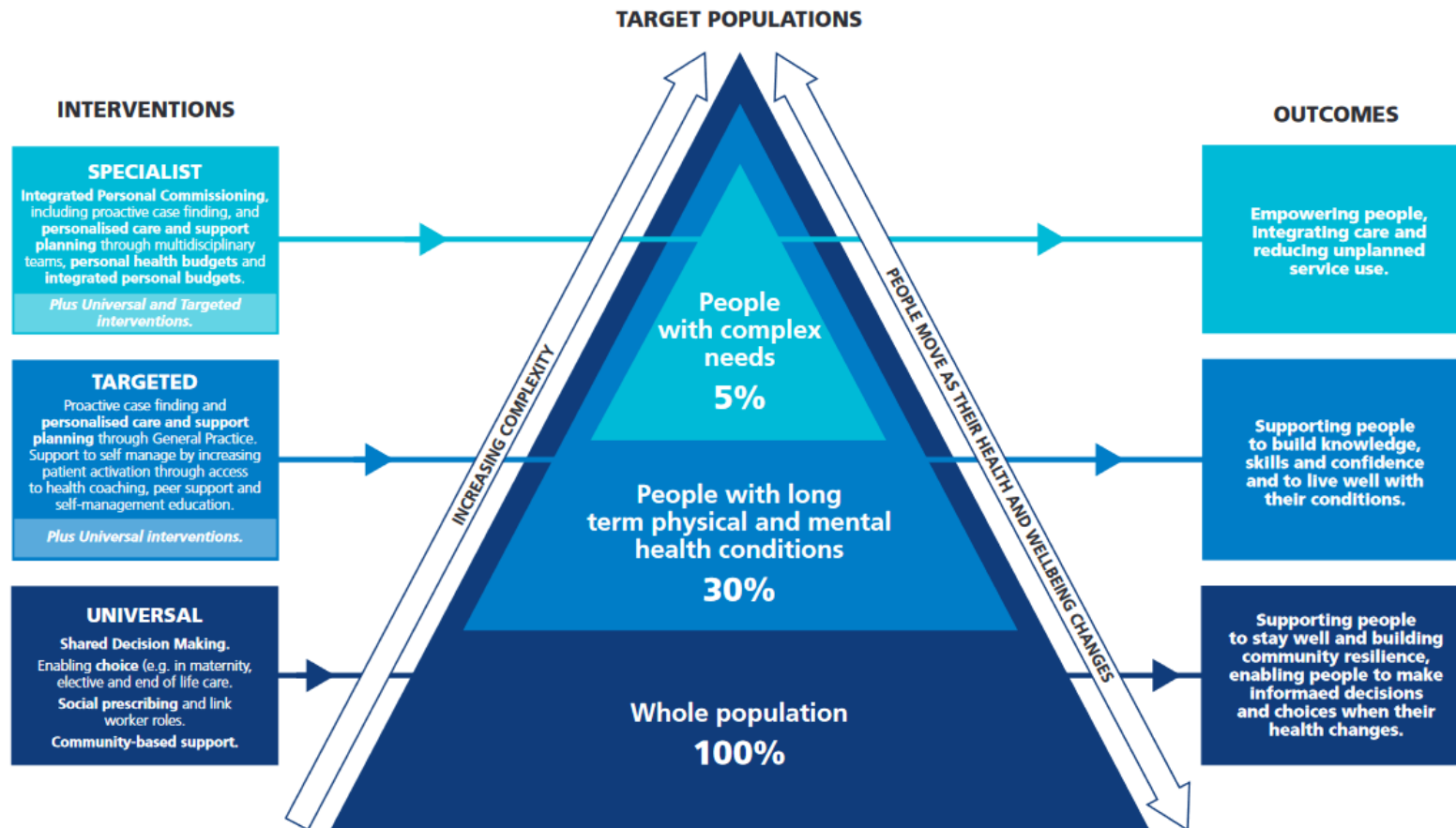
- 38% fewer emergency admissions
- 32% fewer A&E attendances
- 18% fewer general practice appointments

The Health Foundation 2018



Comprehensive Model of Personalised Care

All age, whole population approach to personalised care



Working towards the Triple Aim

Provision of reliable, trustworthy health information to combat misinformation

Shared decision-making to become the norm in clinical practice

Proactive, coordinated care planning and support for people with long-term conditions
