

Supporting shared decision-making for older people with multiple health and social care needs: a realist synthesis

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Plain English summary

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Plain English summary

In this study we reviewed the evidence to find out how to improve the way we involve older people with multiple conditions, and their family carers, in decisions about their health and social care. We call this approach 'shared decision-making' (SDM). In particular, we wanted to find out how SDM can work in community settings where many different health and social care workers (such as general practitioners, nurses and social carers) may be involved in caring for the older person.

Engaging with stakeholders, such as professionals, patients and carers, we developed an initial 'theory' about how interventions to support SDM for older people should work. This was then tested and developed through a structured search for evidence. We then went back to the stakeholders to test the findings of the review and refine them further.

The findings indicate that, for older people with multiple conditions, SDM should not just be thought of as one conversation between a patient and a doctor. Rather, it should be thought of in terms of a series of conversations that patients, and their family carers, may have with a variety of health and care professionals. Some of the things we know are important for older people are face-to-face consultations, ongoing relationships with trusted professionals and time and space to consider the available options. These help older people to talk about what is important to them and give them the confidence to be involved in decision-making. SDM works best when all the professionals involved understand SDM and think that it is important.

We need more research to tell us how we can best support older people who find engaging in SDM difficult and increased consideration of how workers other than doctors can be involved in SDM.

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