

Shared Decision Making Summit
Reports back to larger group

***Supports and Training for Clients to
Engage in SDM***

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- As a client how do you get to that power statement? How does a person really get a sense of what their preferences are? They may not have even thought about work or medications.
- We talked about some person centered tools that are being developed at EOHS through a CMS grant and I think we'll hear more about these. They are being adapted for different services with preferences for the client to help them communicate with the provider. There is also a training piece for the provider side because they must buy into this for it to be effective.
- A lot of people are uncomfortable with choices, mental illness or not. Choices create anxiety for a lot of people. How can we make this easier? Our group endorses the peer specialist role as someone who can meet with a client in a comfortable way so they could work on little things to build up to making bigger choices. Choice isn't something you can just spring on someone and a peer specialist can be sensitive and help consumers along.
- Peer specialists can also bring them up to date on EBP and other options within the field. Maybe go to a session with them? As a client it's kind of intimidating to sit with a doctor. It isn't easy to assert yourself when it comes to medications. Medications, too, can really affect abilities and make a person seem zombie-like. If I had a peer advocate earlier in it may have made a difference.
- Peer specialists in a way could even the playing field with consumers and providers. Consumers want to and should know how they're doing in the eyes of the provider. Open communication is important. How do providers see consumers? Knowing that will help with forming decisions. Peer specialists should help clients think about their options.