

## 2014/2015 Summer Studentship Project Application Form

Send to: Research Office, University of Otago Christchurch, PO Box 4345, Christchurch, by 3pm on **4 July 2014**

### Supervisor Information (First named supervisor will be the contact):

Supervisor's Name(s): Pip Mason/Ben Hudson

Department: General Practice / Practice Support Liaison Pegasus Health

Institution: Pegasus Health

Phone: 03 3539952 or 021 2269403

E-mail: pip.mason@pegasus.org.nz

Mailing Address: 160 Bealey Avenue Christchurch

### Research Category (Choose one category only – to be used for judging the students' presentations):

Community

### Project Title (20 words MAXIMUM):

**Decision Aids for Cardiovascular Risk Management in Primary Care.**

### Project Description:

#### Introduction:

The assessment and management of patients' cardiovascular risk forms an important part of the primary care workload, and activity in this area is now used as a measure of quality of care. The New Zealand guidelines for managing cardiovascular disease risk (CVDR) were recently updated in the revised Primary Care Cardiovascular Handbook which introduced a much stronger emphasis on shared decision making (SDM) for primary prevention, a move that has also been adopted internationally. This is a welcome development as there is clear evidence that SDM leads to better decision making by patients. However, SDM is not always practised by clinicians even though many believe they are doing this. SDM in consultations may be supported by the use of decision aids which have been shown to improve patients' knowledge of their options and to reduce decisional conflict.

The assessment and recording of CVDR is now a national health target, and since 2012, general practitioners (GPs) and practice nurses (PNs) in Pegasus Health have been encouraged to record CVDR activity in a systematic manner. However, the calculation of an individual's estimated CVDR is just the start of a potentially complex discussion about its management. A number of computerised CVDR calculators are currently in use and some of these include a decision aid component. However, little is known about how often CVDR decision aids are used in consultations, how useful GPs, PNs and their patients find them, or how they influence management decisions. Pegasus Health is currently considering rolling out a standard computer-based CVDR calculator which could include a built-in decision aid. To inform the design and implementation of such a software package we need to better understand how GPs and PNs currently communicate with patients about their CVDR and their management options, whether and how decision aids are used at present, how they might be used in the future, and GP and PN preferences for the format and presentation of these aids.

#### Aim:

The aim of this project is to:

- Understand the role the GPs and PNs believe they play in patients' CVDR decision making.
- Understand GPs' and PNs' current practice in CVDR decision making.
- Identify whether GPs and PNs currently use CVDR decision aids.
- Identify barriers and facilitators to the use of CVDR decision aids.
- Identify GP and PN preferences for decision aid format.
- Identify other tools that GPs and PNs need to optimise CVDR decision making.

## Method:

The project will have 2 phases:

1. A random sample of GPs and PNs in Pegasus Health will be invited to participate in one-to-one interviews. We will interview six GPs and six PNs to explore their current approaches to SDM in CVDR, their use of decision aids, their suggestions for and expectations of a new decision aid.
2. These interviews will then inform the design of a questionnaire which will be sent to all Pegasus Health GPs and PNs. The design of the questionnaire will depend on the findings from the first phase of the study, but we anticipate that we will collect data on GPs' and PNs' current practice in CVDR management and their preferences for decision aids or other tools to enhance SDM in this field.

## Analysis:

Data from phase one will be examined for emergent themes which will be used to design the questionnaire. Data from the questionnaire will be entered into an Access database created for the project with support from the Pegasus Health analytical team and analysed using simple descriptive statistics.

## Significance:

Cardiovascular disease is a major cause of mortality and morbidity in New Zealand. GPs and PNs assess patients' CVDR on a daily basis but we currently have little understanding of how they communicate CVDR and help patients make risk-management decisions (which might include lifestyle changes and the use of preventive medication). There is good evidence that we should be moving towards a SDM approach in primary prevention of cardiovascular disease, but it is known that this often doesn't occur. The provision of decision aids may assist GPs and PNs to enhance SDM with patients in this area, but we lack information about practitioners' use of, and attitudes to, SDM and decision aids for CVDR management. We anticipate that gathering this information will help optimise the design and implementation of a new computerised decision aid for CVDR management and that this will improve the quality of care delivered in practices across Canterbury.

Please email the completed Project Application form to: [research.uoc@otago.ac.nz](mailto:research.uoc@otago.ac.nz)

**Also** send a signed hard copy via the internal mail to:

Research Office, University of Otago, Christchurch School of Medicine, PO Box 4345, Christchurch 8140