A Tool Preparing Patients with Stage III Non-Small Cell Lung Cancer for Shared Decision Making: Validating Acceptability and Usability

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Usability

Patients play a smaller role in treatment decision making than preferred.

Background

After diagnosis, adults with Stage III non-small cell lung cancer (NSCLC) face an overwhelming range of decisions, many of which are preference-sensitive. Patients often report poor communication with their clinicians, including limited discussion and consideration of their treatment preferences.

Gaps in Preparing for Stage III NSCLC Treatment Decision Making

1. Few existing tools and resources available to assist patient preferences, needs, and goals.
2. Lack of consideration of patient preferences in treatment decision making.
3. Patients play a smaller role in treatment decision making than preferred.
4. Time constraints and technical medical terminology impair patient provider communication.

To improve engagement and value, for patients in preparing to communicate effectively with clinicians, Avalere used a human-centered design approach to develop the Preparation for Shared Decision Making (PFSDM) tool. Avalere adapted the tool from the PFSDM tool in breast cancer that was developed and validated by Avalere in 2019. Tool development included in-depth interviews with patients diagnosed with Stages II-IV NSCLC. Avalere also conducted in-depth interviews with 2 medical oncologists, 1 radiation oncologist, 6 social workers, and 1 nurse navigator, all of whom treat patients with Stage III NSCLC. Following interviews with patients and care team members, we integrated feedback into the tool and reported the principle of the tool to patients and care teams to assess the principles of the tool to patients and care providers.

The Tool Has 5 Sections to Help Patients with Stage III NSCLC Prepare for Treatment Decisions

1. Transfer to Expect on the Plan Your Care.
2. Other Goals and Needs To Consider When Moving Your Care Team.
3. Questions to Ask for Your Oncologist.
4. Questions to Ask for Your Family and Care Team.
5. Resources That May Be Helpful for You.

The Tool was developed to help patients prepare for treatment decisions, many of which are preference-sensitive, in the context of Stage III NSCLC. The tool was designed to help patients make informed decisions about their treatment plans, based on their values and preferences. The tool was developed to be easy to use and understand, and to provide patients with information and guidance that is relevant to their situation.

Methods

We used a qualitative study to identify clinicians, and conducted 21 in-depth, semi-structured interviews with adults diagnosed with Stage III NSCLC. Interviews were conducted with patients, caregivers, and providers to assess the acceptability and usability of the tool.

The interview guide included questions about the tool's use, patients' preferences, and barriers and facilitators to using the tool. The interviews were recorded, transcribed, and analyzed using the framework method for qualitative data analysis.

Validation Theme/Subtheme Definitions

Theme/Subtheme | Code | Number of Utterances
--- | --- | ---
Acceptability (n=6) | | 16
Understandability (n=4) | | 4
Clarity of Information (n=2) | | 2
Amount of Information (n=2) | | 2
Usability (n=4) | | 4

Validation Findings for Usefulness Subtheme by Section of Tool

Results

If the tool achievements:
1. (18/20) were traced and
2. (10/16) were traced
3. (15/16) were traced
4. (12/16) were traced

4. (18/16) were traced

The most commonly reported issues were issues with navigation (n=16), issues with structure (n=15), and issues with clarity (n=14). Overall, the tool was found to be easy to use and understand and to provide patients with information that is relevant to their situation.

Summary of Validation Findings for the Tool Overall

| Theme/Subtheme | Code | Number of Utterances |
--- | --- | ---
Acceptability (n=6) | | 16
Understandability (n=4) | | 4
Clarity of Information (n=2) | | 2
Amount of Information (n=2) | | 2
Usability (n=4) | | 4

Validation Findings for Understandability Subtheme by Section of Tool

| Theme/Subtheme | Code | Number of Utterances |
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Understandability (n=4) | | 4
Clarity of Information (n=2) | | 2
Amount of Information (n=2) | | 2

Conclusion

Results, regardless of whether the tool is used by the tool, will help prepare to communicate their preferences with their patients when making decisions. Results will be used to update the tool with patient recommendations and inform future evaluation of the value of incorporating the tool into clinical workflow and the tool's impact on clinical outcomes.

Acknowledgments

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References