Integration of patient values, goals and preferences for care during decisions surrounding therapy optimizes patient decision-making, especially in the context of cancer treatment. The weights placed on patient preferences for symptom and quality of life (SQL) and length of survival represent important values that must be thoroughly explored. Research shows that communication surrounding these critical values is not routinely integrated into care. While 95% of patients with cancer reported that they valued quality of life as much as length of survival, only 28% reported that changes in quality of life during treatment for cancer were discussed with their clinicians. This lack of attention to an area surrounding important patient values presents a significant target for intervention. The use of decision support for SQL assessment and management may be an innovative way to enhance patient-engagement, facilitate communication and improve patient-desired outcomes. As these types of interventions are developed and implemented, gathering input from patients and clinicians is essential to ensure that the decision support tools are optimized to enhance the process of care and influence outcomes. The proposed project builds on the past work conducted by our team related to implementing decision support for SQL assessment and management into clinical care. We have conducted the first large-scale randomized trial to examine the impact of SQL assessment with feedback and patient coaching on patient-clinician communication and the first study to develop complex decision support for simultaneous management of pain, depression, anxiety, fatigue and dyspnea. In the proposed project, we seek to adapt our approaches to new environments, which include community settings, and to optimize the delivery of SQL information. We have engaged a team composed of clinicians, patient advocates, nurse scientists, informatics and clinical decision support experts. We will engage patients and clinicians through focus groups to identify their preferences for the types of SQL information and the mechanisms for information delivery that would be generally applicable to decision support tools to improve management and outcomes of care in year 1. Based on this information, we will develop and test prototypes for SQL data provision and processing plus decision support strategies that can be used to enhance communication and management of SQL information through usability testing in year 2.

RELEVANCE
While investigators have developed questionnaires and electronic applications for patient-report of symptoms and quality of life (SQL) concerns, no group has comprehensively studied the preferences of patients with cancer as they share SQL experiences with clinicians nor the resultant processing and management of that information on the part of clinicians. Our project addresses the PCORI area of interest related to developing, refining, testing and evaluating patient-centered approaches, which include decision support tools, for translating evidenced based care into health care settings in ways that account for patient preferences for various outcomes. We will develop and test a structure and process in which the patient’s "voice" is heard as related to SQL concerns and priorities. We will systematically gather information from patients and clinicians to understand their preferences for the types of SQL information and processes for gathering it that would enhance care, and for decision support tools that would enhance management and outcomes of care. A prototype will be created to provide the foundation for a larger study to assess the impact of clinical decision support on enhancing patient-provider communication and clinical outcomes such as improved SQL management and decreased hospital and emergency room visits.