Reviewer’s report

Title: A Case-Based Approach to Shared Decision Making Skills Training for Clinicians

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Reviewer: France Légaré

Reviewer’s report:

- Major Compulsory Revisions

This is an interesting paper. However, I have few suggestions and questions.

1) Title: I suggest the authors reflect on adding a statement about the content of their paper: for example, development and feasibility of….; or pilot testing of a …… .

2) Abstract: In its current format, the abstract is not very informative.

a. As mentioned above, please consider modifying the background section to indicate clearly that you developed and pilot tested an online educational program using a case based strategy.

b. The methods section is clearly under developed. I would move out from this section any results (e.g. 49 clinician members) and add to the results section. Overall, this section should inform the readers on:

i. Study design and type of sample: e.g. cross sectional and convenient sample; also, it would be possible to also refer to a multipronged study with three phases: 1) review of SDM training programs, models and measurements systems; 2) development of the case to be embedded within an online program; and 3) pilot testing

ii. Participants: inclusion criteria and recruitment strategy

iii. Intervention: Online educational program

iv. Data collection: self-administered questionnaire

v. Data analysis

c. The results section should be modified accordingly:

i. Response rate

ii. Data should be provided and any interpretative statement should be removed (e.g. knowledge of SDM was high) and replaced by the study results (e.g. score from Table 2)

d. The conclusion should be modified accordingly: this is a cross sectional study, only post intervention data; therefore, it is not recommended to conclude that the participants improved their knowledge and confidence since we have no baseline data. I suggest the authors simply state that they provided a detailed report on the development of an online educational program using a case based strategy
and pilot data indicates that participants found completing the online program feasible and achieved high scores. However, we do not know if they improved (no baseline data) and future studies are needed to assess its impact.

3) It would be useful if the authors would provide a clear definition of case-based learning to help readers distinguish it from other educational methods.

4) Methods section: Overall, this is a difficult section to follow as there were multiple phases included in this study design. First the authors review the literature of SDM training programs, models and measurements systems. Second, they elaborated a SDM process model. Third, they elaborated a case to be embedded within an online training program. Lastly, they pilot tested the online training program. This type of complex multipronged studies are always difficult to report on since, each phase could be the topic of one single paper. Therefore, it may be impossible to provide all the details needed to appraise the rigor within each phase. However, if this is to be understood to be a report of the development and pilot testing of a new program, I believe this type of paper needed to be encouraged.

a. I suggest to consider the following structure:

i. Study design: this is a multipronged study with three phases: 1) review of SDM training programs, models and measurements systems (they may want to include one more phase: development of the SDM process model); 2) development of the case to be embedded within an online program; and 3) pilot testing.

ii. Phase 1: review of SDM training programs, models and measurements systems and development of the SDM process:

1. Sources and identification of clinician SDM competencies
2. Data Abstraction
3. Data Analysis
4. Quality assessment (was it done? if not why?)
5. Synthesis: this is where the SDM process model is devised

iii. Phase 2: development of the case and of the online training program; it would be useful to have access to some of the material: screen shots or access to the training program or to a demonstration DAC from this company.

iv. Phase 3: pilot testing:
1. Participants and recruitment; this is a convenient sample
2. Intervention: done above
3. Data collection
4. Data analysis

5) Discussion section:

a. Add limitations to be discussed: this is not a study design that can be used to assess the impact of the program; therefore I am not convinced that the authors can refer to the Kirkpatrick evaluation framework and say that they have
addressed its first two levels; they have used this evaluation framework to guide the choice of their questionnaire but have not addressed evaluation per se.

6) Overall comments: This study is about testing the acceptability and feasibility to use a case based learning strategy embedded within an online training module to teach SDM to healthcare providers. The authors would thus enrich the knowledge base of such innovation by adding the following information: responses rates of targeted individuals and follow up throughout the pilot study; completion of the online training program (%); modalities of completion of the online training program (log one or more than one time) etc.

- Minor Essential Revisions

- Discretionary Revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I have produced and delivered SDM training programs for healthcare providers in the past and the authors have cited our work.