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SCHWERPUNKT

The OPTION scale for the assessment of shared decision making (SDM): methodological issues

Die OPTION-Skala zur Erfassung Partizipativer Entscheidungsfindung: methodische Aspekte

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KEY WORDS

shared decision making;
patient participation;
physician-patient relationship;
psychometrics;
OPTION scale

Summary

Background: Promoting patient involvement in medical decision making has become a desirable goal in medical consultations. Reliable and valid measures are necessary to evaluate interventions designed to promote shared decision making and to understand determinants and associations. The OPTION (“observing patient involvement”) scale is the most prominent observation instrument for assessing the extent to which clinicians actively involve patients in decision making.

Objective: This paper discusses psychometric and methodological characteristics of the OPTION scale.

Results: There is little support for the purported unidimensional structure. Although reliabilities are acceptable, results are highly heterogeneous across studies. There is also little evidence concerning validity. In particular, studies mainly failed to support convergent validity. Additional issues pertain to lack of item independence, restriction of range, and failure to consider dyadic aspects.

Conclusions: Given these findings, a number of methodological and conceptual issues still need to be addressed for the effective measurement of patient involvement. Directions for future research are discussed.

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SCHLÜSSELWÖRTER

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Entscheidungsfindung;
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Beziehung;
Psychometrie;
OPTION-Skala

Zusammenfassung

Hintergrund: Die Beteiligung von Patienten an medizinischen Entscheidungen ist zu einem wichtigen Qualitätsmerkmal in Konsultationen geworden. Die Evaluation von Interventionen zur Förderung partizipativer Entscheidungsfindung und Forschung zum Verständnis von Determinanten effektiver medizinischer Entscheidungsfindung verlangt reliable und valide Messinstrumente. OPTION ist das am weitesten verbreitete Beobachtungsinstrument zur Erfassung des Ausmaßes, in dem Ärzte ihre Patienten aktiv an der Entscheidungsfindung beteiligen. **Ziel:** In dieser Arbeit werden psychometrische und methodologische Aspekte der OPTION-Skala diskutiert.

Ergebnisse: Für die angenommene einfaktorielle Struktur gibt es keine klare Evidenz. Die Reliabilitäten liegen meist im akzeptablen Bereich, sind über verschiedene Studien heterogen. Die Validität ist kaum belegt. Insbesondere die konvergente Validität von OPTION konnte nicht bestätigt werden. Als weitere Probleme werden Abhängigkeiten zwischen Items, geringe Streuung in den OPTION-Werten und die fehlende Berücksichtigung dyadischer Aspekte identifiziert.

Schlussfolgerungen: Die Übersicht verweist auf verschiedene konzeptuelle und psychometrische Probleme, die in zukünftigen Untersuchungen berücksichtigt werden müssen. Es werden Anregungen für weitere Forschungsarbeiten gegeben.

Introduction

The relevance of patient involvement in medical consultations is widely acknowledged [1,2]. Shared decision making (SDM) appears to be effective in producing better psychological outcomes as well as in increasing patient satisfaction [3–5]. Given the importance of patient involvement in medical decision making, it is vital that precise measures are developed to evaluate the performance of clinicians with regard to SDM. However, a gold standard is missing, and an appraisal of the appropriateness of existing instruments must be made based on psychometric properties, whereas validity is a matter of debate [6] (and Scholl in this issue).

The OPTION (“observing patient involvement”) scale [7,8] represents the currently by far most prominent measure. Due to the OPTION scale’s role amongst the instruments in the field and its widespread use in evaluating medical decision making processes, a thorough methodological appraisal of the scale is needed. This paper discusses relevant issues in this regard, in particular those relating to factor structure and internal consistency, agreement across raters, validity, and feasibility aspects. We will proceed with a description of the measure, a review of studies that used the OPTION while focussing on factor structure, reliability, and validity, a discussion of other issues (feasibility and utility, restriction of range, item independence, and consideration of dyadic aspects) and finish with an evaluation and recommendations for improvement.

The OPTION scale

OPTION is an observation-based measure which aims to assess the extent to which clinicians involve patients in medical decision making during consultations. OPTION was developed based on a review of instruments, a theoretical framework, and qualitative studies involving patients and general practitioners [7]. The scale consists of 12 items, each assessed on a five-point scale, ranging from “the behaviour is not observed” to “the behaviour is

exhibited to a very high standard” [8]¹. Verbal anchors describing the scale points for each item in greater detail are provided in the OPTION manual (available at www.optioninstrument.com). OPTION sum scores range from 0 to 48, with higher scores indicating higher competencies of SDM. The OPTION scale has been translated into various languages, including Chinese, Dutch, French, German, Italian, Spanish, and Swedish.

Review of studies employing OPTION

Relevant studies were identified through searches of the PsycINFO, PubMed, Science Citation Index, and Social Science Citation Index databases for the years 2003 – 2011 using the search terms “OPTION”, “shared decision making”, and “patient involvement”. Moreover, a forward search was conducted on the basis of articles that cite one of the original studies [5,8]. Finally, websites of relevant journals were searched for articles in press. This search strategy led to the identification of an initial set of 109 articles. Among of these, 25 articles described studies employing the OPTION scale. Study protocols as well as completed studies that used a modified OPTION scale (for example by using only a subset of items) were not considered (e.g., [9–11]). Table 1 lists all studies that reported a measure of internal consistency, inter- or intra-rater reliability.

Factor structure and internal consistency

While a unidimensional structure has been claimed by the originators of the OPTION scale, few studies have tested this assumption. In a semi-exploratory principal components analysis (PCA) on the initial version of the scale, a single factor was extracted which explained 35% of the variance [7]. However, neither fit statistics nor eigenvalues were reported, making it impossible to judge whether a different number of factors might better describe the data. Using

¹ In the present paper, we focus on the revised OPTION scale, which utilizes magnitude instead of attitude scaling.

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