Promoting better conversations about the appropriate use of medical tests, treatments and procedures
About Choosing Wisely Australia
Choosing Wisely Australia is an initiative of NPS MedicineWise in partnership with Australia’s health professional colleges, societies and associations. The campaign is enabling clinicians, consumers and healthcare stakeholders to start important conversations about tests, treatments and procedures where evidence shows they provide no benefit, or in some cases, lead to harm.

About NPS MedicineWise
NPS MedicineWise is an independent, not-for-profit and evidence-based organisation that works to improve the way health technologies, medicines and medical tests are prescribed and used. Established in 1998 with the primary aim of promoting quality use of medicines, today we have grown to connect with health consumers and health professionals nation-wide, changing attitudes and behaviours, and empowering all Australians to make the best possible healthcare decisions when they count.

Contents

3 Welcome message
4 Insights — David’s story
   Is this surgery necessary?
6 The Choosing Wisely conversation
8 OBJECTIVE 1
   Change clinician attitudes to practice
   Influencing change in primary care
9 Educational programs promote latest evidence
11 2018 National Meeting
12 Insights — Paul’s perspective
   Engaging young doctors to help drive change
14 OBJECTIVE 2
   Foster consumer engagement & acceptance
   Insights — Matthew’s perspective
   Helping patients know it’s okay to ask questions
18 OBJECTIVE 3
   Change key clinical practices
   Insights — David’s perspective
   Choosing opioids wisely
20 Insights — Debbie’s perspective
   Engaging consumers to improve wound care
22 OBJECTIVE 4
   Promote alignment with the healthcare system
24 Insights — Camilla’s perspective
   Growth of Choosing Wisely in Victoria
26 Insights — Asmara’s perspective
   Austin Health prompts scale-up
28 Insights — Nola’s perspective
   Research on medico-legal drivers of low-value healthcare
31 Appendix 1
   GP and specialist surveys
   Health Services clinician surveys
   Health Services consumer surveys
36 Appendix 2
   Choosing Wisely Australia Advisory Group
37 Appendix 3
   Choosing Wisely Australia members and supporters
Welcome message

For people working in an ever-evolving healthcare system and those who require healthcare services, the myriad of choices can be overwhelming. Colliding factors such as advancing technologies, emerging medicines, evidence reviews, budgetary constraints, patient expectations and health literacy all have an impact on the quality and safety of healthcare.

Overuse of medical tests and overdiagnosis of health conditions are challenges that need to be addressed worldwide. It’s the reason NPS MedicineWise, leveraging its expertise in the quality use of medicines and health technologies, launched the global Choosing Wisely campaign in Australia in April 2015.

The appetite for a cultural shift away from unnecessary tests, treatments and procedures is strong and I’ve joined NPS MedicineWise at an transformative time in the evolution of Choosing Wisely. The initiative continues to grow among the health profession and wider community, including into new areas of healthcare research, education and advocacy.

2018 highlights include:

- Choosing Wisely recommendations being embedded in three new educational programs developed by NPS MedicineWise for general practice
- Victoria delivering the first government-funded scale-up of Choosing Wisely for 11 health services, with increasing interest from other state and territory health departments in adopting the model
- membership growing to 69 health professional and consumer organisations, including 25 Champion Health Services
- the 2018 annual Choosing Wisely Australia National Meeting
- receiving the 2018 Practice Award at November’s Bond University Sustainable Healthcare Awards.

I’m pleased to present this year’s Choosing Wisely Australia Report and acknowledge the significant efforts of our committed members and supporters who are collaborating to influence a national culture change around low-value and unnecessary healthcare.

I encourage you to keep engaging with us at NPS MedicineWise and of course we are keen to welcome new members. If you want more information on how to become involved and how we can support your Choosing Wisely journey, please do contact us.

Dr Robyn Lindner, NPS MedicineWise Client Relations Manager, accepts the Sustainable Healthcare Award

Steve Morris
Chief Executive Officer
NPS MedicineWise
David’s story

“I didn’t question whether the surgery was necessary. From the discussion I had with the GP, I assumed it was my only option.”

David Synnot
Earlier this year, Adelaide retiree and avid walker David Synnot suffered extreme knee pain after moving heavy furniture and had difficulty walking. Physio was painful, so his GP sent him for an MRI. An X-ray was also performed. Diagnosed with a torn meniscus, David was referred to an orthopaedic surgeon who recommended an arthroscopy.

“Neither my wife Meredith or I questioned this referral,” David said. “Meredith had been referred to the same surgeon many years earlier when her knee completely locked up. An arthroscopy was performed immediately and successfully with no complications since then. With this history of an easy, quick and successful knee repair, we assumed we were heading towards the same good outcome for my knee.”

Their daughter, a health researcher aware of evidence against performing arthroscopies for degenerative meniscal tears, provided this advice to her parents.

“Ultimately, I was pleased with the possibility to avoid unnecessary surgery and took the material to my surgeon to discuss the alternatives,” David said.

Following a lengthy discussion and despite some reservations from the surgeon, David opted for conservative management of his injury and is now enjoying being pain-free. He was unaware of the Choosing Wisely 5 Questions at the time of his medical appointments.

“If we’d heard of the 5 Questions before we initially saw the GP, it would have led to a much fuller conversation at that level and we may not have proceeded any further. Asking about treatment options is very empowering for consumers, as well have having access to trustworthy research.”

In addition to the 5 Questions, Choosing Wisely Australia publishes lists of the latest evidence-based recommendations around tests, treatments and procedures to question.
The Choosing Wisely conversation

Improving conversations between health professionals and consumers about available and appropriate health management options is the cornerstone of the international Choosing Wisely movement, now operating in more than 20 countries.

The initiative brings together Australia’s health professional bodies, health services, clinicians and other healthcare providers, researchers, consumer advocates, consumers and the media in a national dialogue to shift the culture around low-value and unnecessary healthcare in this country.

Established in 1998 as an independent, non-government body to lead quality use of medicines and medical tests, NPS MedicineWise launched Choosing Wisely Australia in 2015, adding to its suite of quality improvement programs and services for health professionals and consumers.

As custodian of Choosing Wisely in Australia, NPS MedicineWise sets the strategy for implementation and evaluation, guided by an international framework for the initiative and informed by the Choosing Wisely Advisory Group.

**Key activities include:**

- growing engagement through recruitment and support of member and supporter organisations
- leveraging NPS MedicineWise programs and services to promote Choosing Wisely recommendations and principles, and evaluating impact
- hosting and supporting regular forums with members to promote implementation, including the annual Choosing Wisely National Meeting
- leading and supporting the ‘community of practice’ Champion Health Services network
- providing access to resources including NPS MedicineWise program materials and communications kits and evaluation tools
- partnering with consumer organisations to drive consumer engagement activities and development of consumer resources
- targeted communications via newsletters, social media and media.
A framework for change

Choosing Wisely Australia is informed by an agreed international framework with the following four key objectives, which are explored throughout the report:

**OBJECTIVE 1**  Change clinician attitudes to practice

**OBJECTIVE 2**  Foster consumer engagement and acceptance

**OBJECTIVE 3**  Change key clinical practices

**OBJECTIVE 4**  Promote alignment with the healthcare system

OBJECTIVE 1

CHANGE CLINICIAN ATTITUDES TO PRACTICE

Influencing change in primary care

Choosing Wisely Australia is reaching clinicians through important work being undertaken by Australia’s health professional colleges, societies and associations to formally identify low-value healthcare practices using the latest evidence-based research.

Since launch, 189 recommendations about tests, treatments and procedures have been published under the initiative in lists of five things clinicians and consumers should question. During 2018, 26 recommendations were published by Choosing Australia Wisely from the:

- Australasian Faculty of Rehabilitation Medicine
- Australian Rheumatology Association
- Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetists
- Pharmaceutical Society of Australia
- The Thoracic Society of Australia and New Zealand

NPS MedicineWise survey results highlight a disconnect between consumers and their GPs and specialists about why unnecessary healthcare is being requested.

While health professionals have indicated patient expectations, fear of litigation and uncertainty of diagnoses as key drivers, consumers said that they had unnecessary tests because their GPs recommended them.

To reduce this divide, Choosing Wisely Australia works with its members and supporters to raise awareness of why unnecessary healthcare occurs so we can overcome the barriers to change.

| healthcare provider recommended the test | 84% |
| consumer requested the test | 14% |

| Patient expectations are cited as a driver by: |
| GPs | 62% |
| specialists | 42% |

*2017 consumer and health professional NPS MedicineWise survey results*
Educational programs promote latest evidence

“Educational outreach visiting is one way that Choosing Wisely recommendations can be supported in general practice.”

Karen Thrift, Clinical Services Specialist, NPS MedicineWise

Each year, NPS MedicineWise launches new national educational visiting programs providing the latest evidence-based guidelines on managing specific conditions. Programs cover therapeutic areas commonly managed in general practice, where a gap is identified between best practice and actual medicine and medical test use. Evaluation results are published following each program’s conclusion.

These multifaceted programs involve educational visits to GPs, audit and feedback tools, online case studies and a range of resources such as demonstration videos, patient action plans and consumer resources. They also help to embed relevant recommendations from Choosing Wisely Australia into clinical practice.

In 2017-18, 29,444 educational visits were conducted by NPS MedicineWise Clinical Services Specialists in primary care, while 278,963 health professionals registered for online learning activities.
Neuropathic pain

In February 2018, NPS MedicineWise launched its neuropathic pain program, incorporating a Choosing Wisely recommendation from the Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists.

The program was designed to improve the quality of life for people with neuropathic pain, and support GPs to take a structured approach to diagnosis.

GPs were encouraged to use a step-wise, guidelines-based approach to selecting medicines, and take a holistic approach to pain management, ensuring a focus on function and improving quality of life, rather than just pharmacological treatments for pain symptoms.

Managing GORD with PPIs in primary care

NPS MedicineWise launched its new program focused on the management of gastro-oesophageal reflux disease (GORD) with proton pump inhibitors (PPIs) in primary care in July 2018 and included recommendations from the Royal Australian College of General Practitioners and the Gastroenterological Society of Australia.

For the first time, Choosing Wisely’s 5 Questions were incorporated into the consumer online content and contextualised to the topic of PPIs.

Low back pain

October 2018 saw the release of the NPS MedicineWise low back pain program, which reframes the management of acute non-specific low back pain, offering new approaches for an age-old problem.

The program harnesses a range of recommendations from members such as Faculties of the Royal Australian College of Physicians and the Australian Physiotherapy Association, aiming to improve quality of life for people with acute non-specific low back pain through improved assessments and management in primary care and to reduce inappropriate imaging.

Recommendations driving high-value, high-quality care

A founding member of Choosing Wisely Australia, the Royal Australasian College of Physicians (RACP) continues to support the NPS MedicineWise initiative to improve the safety and quality of healthcare for Australian consumers.

This year, Choosing Wisely has promoted 20 recommendations developed under the RACP’s Evolve initiative, which drives high-value, high-quality care in Australia and New Zealand. Evolve identifies a specialty’s Top 5 clinical practices that may be overused, provide little or no benefit or cause unnecessary harm.

Through education, advocacy and innovation, Evolve supports trainees and specialists to safely phase out these clinical practices, and change clinical behaviour and decision-making to reduce unnecessary tests, treatments and procedures.
NPS MedicineWise hosted more than 200 delegates at the 2018 Choosing Wisely Australia National Meeting held in Canberra on 30 May, ahead of its National Medicines Symposium.

Delegates included representatives from Choosing Wisely member and supporter organisations, health departments and the health profession, as well as consumers, researchers and students. More than half of the participants were attending a Choosing Wisely event for the first time.

The National Meeting showcased implementation achievements and future challenges, across the themes of innovation, collaboration and consumer engagement.

Keynote speaker Daniel Wolfson, Executive Vice President and Chief Operating Officer of the ABIM Foundation, was instrumental in establishing Choosing Wisely in the US and recognised Australia as one of the leading implementers of the initiative globally.

Mr Wolfson said the nature of Australia’s healthcare system, strong engagement by the health profession and the expertise of NPS MedicineWise has created a strong platform for changing the culture around unnecessary healthcare in this country through better clinician-patient conversations about tests, treatments and procedures.

More information
- read a summary of the 2018 National Meeting in Croakey’s conference report
- read the oral and poster abstracts
- see key presentations.
Visit choosingwisely.org.au
“Old doctors are hard to change. Young doctors are still flexible, and they can change and if you involve them in these culture change projects at the start, that will stay with them for life.”

Dr Paul Buntine
Engaging young doctors to help drive change

During the past two years Eastern Health has been implementing its No Unnecessary Tests (NUTS) program, which has strong alignment with the principles of Choosing Wisely Australia. The NUTS philosophy is that patients should receive investigations that will benefit clinical decision-making.

Dr Paul Buntine, an Emergency Physician at Box Hill Hospital, Melbourne, said engaging senior leaders in behaviour change projects is instrumental to their success, but so is engaging junior doctors who are making most of the day-to-day decisions in our hospitals.

Initial work focused on reducing unnecessary pathology tests in emergency departments at Box Hill, Maroondah and Angliss hospitals through:

- audits of existing ordering practices
- engagement of clinician and consumer focus groups
- interventions for sustainable change, such as education, soft stops in ordering processes and publicity in grand rounds and other staff engagement activities.

“The primary focus of these interventions was not to reduce test numbers, but to educate clinicians to think carefully about the clinical usefulness of the tests they were ordering,” Dr Buntine said.

“Despite this, results showed an average drop of more than 50% across five specific blood tests. Interestingly, early effort to rationalise venous blood gas ordering using decision flags wasn’t successful, so the project was handed to a mid-level registrar who presented audit results to their colleagues.”

“Our venous gases halved overnight by involving a junior doctor and giving them a leadership role. With this situation, it hit the nail on the head.”

Other projects have focused on reducing unnecessary imaging, specifically for chest X-rays in intensive care and for chest X-rays and suspected pulmonary embolism in emergency.

Dr Buntine said imaging was a tougher area in which to drive change, as clinicians spend more time seriously contemplating a head CT than ordering a series of blood tests.

“But I think imaging probably has a bigger impact on patients in a hospital and there are bigger risks typically in performing a CT than there are in taking some blood, to do with radiation, false positives, contrast issues and incidental findings,” he said.

The introduction of a decision-making flow chart helped guide the pulmonary embolism imaging project, which saw a reduction in unnecessary scans from 1815 to 1116 (40%) over 12 months.
OBJECTIVE 2

FOSTER CONSUMER ENGAGEMENT & ACCEPTANCE

Matthew’s perspective

“Part of the solution is helping to create a culture where patients feel they can ask questions of their doctors.”

Dr Matthew Anstey
Chair, Choosing Wisely Australia Advisory Group
Helping patients know it’s okay to ask questions

Sir Charles Gairdner Hospital in Perth, Western Australia is one of 25 Choosing Wisely Australia Champion Health Services working to improve patient outcomes by addressing practices of low-value care. Part of the process is cultivating an environment where patients can feel comfortable asking questions about any test, treatment or procedure recommended. Is it necessary? What are the risks?

The ideal scenario is where patients will be prepared with questions to ask their doctors about treatments and planned investigations. In response, doctors will make time in their consultations for patients to ask questions, and then provide the information needed to make an informed and shared decision about their healthcare options.

Intensivist and Choosing Wisely Clinical Lead at Sir Charles Gairdner Hospital Dr Matthew Anstey said:

“We’re keen to boost consumer engagement in Choosing Wisely Australia and have been discussing with our Consumer Advisory Council how we might get patients more engaged in asking questions.

“As a first step we undertook a survey of patients and family members on the wards, in outpatients and emergency, to understand whether people would find it useful to have a copy of the Choosing Wisely 5 Questions in consulting rooms or to take away with them for their next doctors’ visit with 69% and 65%, respectively, reporting they would.

“We are now in the process of developing a 5 Questions postcard to offer outpatients visitors when they check in at the reception desk, with space for them to write answers. The goal is to help patients feel they can ask questions.”

Ahead of the postcards being available, awareness is being raised among doctors as the hospital works to create those ‘permissible environments’ where patients and their representatives can feel it’s okay to ask more about an intervention.
Partnership engaging consumers in wise use of medicines

Be Medicinewise Week (BMW) is an annual campaign by NPS MedicineWise to help Australians get the most out of their prescription, over-the-counter and complementary medicines. This year’s campaign MedicineWise families ran 20–26 August with strong engagement from Choosing Wisely members and supporters.

Within the key messaging of making safe and wise decisions about medicines and health, BMW promoted the Choosing Wisely 5 Questions for consumers urging them to be fully informed about any medicines they are recommended. The 5 Questions were included in the BMW campaign toolkit and media, marketing and social media activities. Media activities alone reached more than four million people.

Choosing Wisely Australia member healthdirect Australia actively promoted the campaign and featured a BMW graphic on 9,000 medicine pages.

General Manager of Consumer Health Services at healthdirect Australia Andrew Bryant says the 10-year partnership with NPS MedicineWise has provided opportunities for collaboration, information sharing and promotion.

“We have a shared vision for the health of Australians and both strive to provide reliable health information and services. I have no doubt that together we are helping Australian health consumers to make more informed decisions about their health,” he said.

NPS MedicineWise and healthdirect Australia continue to collaborate to deliver Medicines Line, a telephone service providing information to consumers about medicines.

Also, this year the organisation has linked more than 13,600 people to important Choosing Wisely information such as the latest recommendations of healthcare to question from Australia’s health professional colleges, societies and associations.

Co-design of consumer advocacy resources

A new toolkit of resources to support consumer healthcare advocates raise awareness of Choosing Wisely Australia is being co-designed by a Consumer Expert Working Group — a joint initiative of NPS MedicineWise and the Consumers Health Forum of Australia.
The group, comprising representatives from Primary Health Networks, consumers and health professionals, was established following feedback from consumer advocates who wanted to promote the messages of Choosing Wisely within their networks.

The toolkit aims to help consumer advocates raise awareness of Choosing Wisely, particularly the importance of consumers having good conversations with their healthcare professionals about tests, treatments and procedures being recommended to them.

Health consumer advocates will be able to use a new ‘Conversation Starter Kit’ to engage their peers in a discussion about low-value healthcare and the benefits of taking a Choosing Wisely approach to healthcare management.
There was an overwhelming desire among consumers, clinicians and system leaders to minimise unanticipated harm from opioids while ensuring people have access to alternative and appropriate treatments to relieve their pain.”

Dr David Rosengren
Choosing opioids wisely

The potential to adapt the format of the Choosing Wisely Australia 5 Questions to ask your doctor resource to address challenges faced by clinicians and consumers around specific conditions and treatments is being explored by the Queensland Clinical Senate.

The Queensland Clinical Senate has recommended to the Queensland Health Minister and Director-General that a stewardship program be developed to support the state’s response to prescription opioid use, pain management and high-risk pain medications other than opioids.

Chair Dr David Rosengren said: “The evidence is clear that well-managed opioid use is effective in a very defined group of patients. Outside of this group however, prescription opioid medication is putting patients at unnecessary risk of harm and even death.”

At a July 2018 meeting on ‘Managing the pain of opioids’, participants discussed recommendations to address inappropriate use of opioids.

This included exploring the value of using the Choosing Wisely Australia 5 Questions to address specific issues such as opioid misuse. For example:

- do I really need this pain medication?
- what happens if I don’t take these medications?
- can I have a pain management plan to share with my family and other healthcare providers?

“I am certain that this conversation will remain high on the agenda in Queensland and if we all continue to champion the cause we will see progress in this space,” Dr Rosengren said.

Read the Queensland Clinical Senate Meeting Report — July 2018.
Choosing Wisely Australia has published recommendations about appropriate use of analgesics for pain.
Understanding and responding to consumer needs and expectations is essential to a patient-centred culture in healthcare — a culture that designs systems and processes around people.”

Debbie Cowan
Choosing Wisely aligns strongly with the Planetree philosophy in guiding a positive experience for patients, families and staff.

Debbie Cowan is Senior Director, Stakeholder Engagement, Metro South Health. She says: “We have an extensive consumer and community network and an active consumer Community of Practice (CoP) providing strategic advice to our organisation. The CoP comprises 66 volunteer advisors who we engaged early in our Choosing Wisely journey.

“A recent focus has been addressing a fragmented and siloed approach to wound management after community insights revealed duplication of services, inefficient use of consumables, high cost of consumables, repeat presentations and confusion for patients.

“Integral to our success is the continued involvement of our consumers to ensure our understanding and practice of high-value care aligns with consumer expectations,” Ms Cowan said.

A range of actions being adopted in response, include:

- focusing on patient activation and health literacy to enable patients to speak up about wound treatments, using the Choosing Wisely 5 Questions
- staff training and education for consistency of practice
- using suitable alternatives to more expensive dressings and other consumables
- reviewing contracts with service providers to ensure consistent practice
- reviewing policies and procedures to ensure uniform documentation and consistent practice
- revising referral pathways to reduce duplication and unnecessary processes
- use of e-consult to reduce unnecessary appointments.
Champion Health Services network

With increasing numbers of hospitals wanting to join Choosing Wisely, NPS MedicineWise established a network of Choosing Wisely Champion Health Services. Spread across Australia, 25 Health Services have joined the initiative and are implementing changes within their hospitals to reduce unnecessary healthcare practices.

NPS MedicineWise provides the framework and resources to support health service members to implement Choosing Wisely projects, including:

- operating principles
- communications guidelines and tools
- regular webinars for health services to share learnings
- latest educational tools and resources
- survey instruments focused on health professionals and consumers
- evaluation support
- connections to a growing network of engaged clinicians, health professional colleges and their affiliates, and consumer advocacy.

Find out more about how to become a Choosing Wisely Champion Health Service and its benefits at choosingwisely.org.au
Insights from health services

This year, for the first time, individual Champion Health Services have measured the attitudes and perceptions of health professional staff about low-value care, using a purpose-built survey developed by NPS MedicineWise. Results provide a baseline measure of culture against which change can be assessed over time.

Further surveys were conducted to measure consumers’ awareness of Choosing Wisely and attitudes to asking questions about recommended tests, treatments and procedures.

For more information on these surveys, see page 33.

94% of medical practitioners agree they have a responsibility to reduce the inappropriate use of tests, treatments and procedures.

About one-quarter of consumers agree that some tests can produce misleading results that can lead to unnecessary treatment.

With so many people in our Champion Health Services committed to making a difference through Choosing Wisely, a new awards program to recognise these efforts was launched in September.

A comprehensive awards program kit was developed to support health services adopting the awards, formally recognise individuals and teams who are doing great Choosing Wisely work and drive further engagement in the initiative.

We look forward to sharing the work of these champions over the coming year.
“This project is about taking Victorian health services on a journey towards behavioural change — working with them and learning together, rather than a top-down approach.”

Camilla Radia-George
In 2016–17, Austin Health and Eastern Health in Melbourne were the first health services in Victoria to become Choosing Wisely Australia Champion Health Services, through the support of the State Government’s Better Care Victoria (BCV) innovation fund.

Following their successful implementation of the initiative — the No Unnecessary Tests project at Eastern Health and particularly the whole-of-organisation approach of Austin Health — Safer Care Victoria opened Expressions of Interest for health services to apply for funding to participate during 2017–18.

Manager Innovation Projects at Safer Care Victoria Camilla Radia-George said: “We liked how Austin Health wanted to pull every strand of the organisation into tackling issues of low-value care and how they developed policy, decision-making tools and education to support clinicians to choose the most appropriate interventions for patients.

“We saw their fantastic outcomes in reducing unnecessary or potentially harmful tests, treatments and procedures. “And we believe this was only possible because they involved staff at all levels in pieces of Choosing Wisely work. It’s this important aspect we wanted to take through the scale-up of the initiative.”

The BCV-funded project is loosely based on a learning methodology from the Institute for Healthcare Improvement in the United States, which brings together early adopters of an initiative and takes them on a journey together.

To do this, BCV funded Choosing Wisely project officers and clinical leads in health services, and hosts collaborative workshops every six to eight weeks that cover areas such as early identification of low-value care, education, implementation, sustainability and evaluation.

“The ideal result is that we have a pipeline of ideas about how we can make efficiencies in the way we work, ultimately providing clinically appropriate services for patients,” said Ms Radia-George.
Asmara’s perspective

“Wouldn’t it be great if every rotation by a registrar or junior doctor was to a Choosing Wisely hospital?”

Asmara Jammali-Blasi
She works closely with the Choosing Wisely clinical leads at Austin Health, Dr Simon Judkins and Dr Belinda Yeo, to support the scale-up of the initiative in five rural and six metropolitan health services.

“This is a wonderful opportunity for Austin Health to partner with Better Care Victoria and NPS MedicineWise and to showcase 12 months of hard work on a bigger platform,” Mrs Jammali-Blasi said.

The Scaling Collaboration is a significant effort involving face-to-face workshops, site visits and information sharing to help reduce areas of low-value or unnecessary care for the benefit of the Victorian health system and its patients. Many of the resources developed at Austin Health, such as templates for governance, clinical practice guidelines and educational and promotional materials have been replicated and shared across the new sites.

Project workshops are held every couple of months and depending on the implementation timeline for each health service. In the early stages, areas of low-value care the health services wanted to address were identified, along with appropriate interventions. Later workshops covered stakeholder engagement, a communications strategy, medical education and data collection. The process is being independently evaluated.

Mrs Jammali-Blasi said: “One of the greatest challenges with introducing a new initiative in a hospital is the issue of competing priorities. This includes accreditation processes and the implementation of electronic health records.

“Other challenges include some of our sites having different areas of focus. Some are looking at imaging, some pathology, there’s a real mix. So, we need to adapt resources and auditing tools to suit each site.

“On the other hand, the project is bringing together sites that may not have usually connected because of geography.”

Asmara Jammali-Blasi was instrumental in establishing Choosing Wisely at Austin Health and is now the Project Lead for the Choosing Wisely Scaling Collaboration in Victoria.

NPS MedicineWise support for health services implementing Choosing Wisely

NPS MedicineWise has 20 years’ experience in health systems and healthcare behaviour change and human-centred design methodologies, implementation science and social marketing. Through Choosing Wisely, the organisation has mentored health services to better understand and use these methods and tools. This includes understanding why problems occur, the interventions likely to create a sustained impact, and how these are best evaluated.

Within the scaling collaboration, NPS MedicineWise shared its experience by hosting a series of design workshops with health services, including focused sessions to review performance data to identify appropriate areas for change, and larger peer-based sessions to choose and scope relevant low-care interventions.

To further support health services, NPS MedicineWise developed a resource that works through a range a behaviour change models and evidence to introduce health service staff to these concepts.
“Legal fears can undermine the adoption of Choosing Wisely recommendations. We need to understand what those fears are, so we can do something about them.”

Assoc Prof Nola Ries
Research on medico-legal drivers of low-value healthcare

GPs and specialists surveyed by Choosing Wisely Australia report fear of litigation as a main driver for unnecessary tests, treatments and procedures (see page 30). A collaboration by two Sydney researchers who met at the 2017 Choosing Wisely Australia National Meeting is exploring low-value care and its medico-legal drivers. The two-year project is funded by the Avant Foundation.

Associate Professor Nola Ries, of the Faculty of Law, University of Technology, Sydney, and Dr Jesse Jansen, Senior Research Fellow, Sydney School of Public Health, University of Sydney, are combining their expertise in medical law and shared decision making in health, respectively, with the aim of advancing the quality, safety and professionalism in clinician-patient relationships.

Assoc Prof Ries said: “There seems to be some evidence that clinicians misperceive the scope of their legal risk, that the law is more onerous than it is. Our theory is that changing the law (to protect doctors from lawsuits, as in the United States) isn’t enough. We need to understand more about clinicians’ fears, beliefs and attitudes.”

The project will include an international literature review to advance knowledge on psychosocial drivers of defensive practices and low-value care in the Australian medico-legal context, and interviews with key stakeholders, such as medico-legal experts, specialist medical colleges, health services and consumer organisations.

The findings will inform the development and testing of an educational intervention aimed at reducing low-value defensive practice and promoting communication and decision-making strategies for high-value care.

Dr Jansen said: “It’s so hard to change behaviour, but if you can change the system so certain behaviours are a bit more difficult, that would be ideal.”

Dr Jesse Jansen (left), Assoc Prof Nola Ries and research assistant Charlie Hacker
Why health professionals request an unnecessary test, treatment or procedure: 2018 Survey

<table>
<thead>
<tr>
<th>Reason</th>
<th>GPs</th>
<th>Specialists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient expectations</td>
<td>63%</td>
<td>42%</td>
</tr>
<tr>
<td>Potential for medical litigation</td>
<td>51%</td>
<td>37%</td>
</tr>
<tr>
<td>Uncertainty regarding the diagnosis</td>
<td>55%</td>
<td>43%</td>
</tr>
<tr>
<td>Difficulties accessing information from doctors in other settings including results</td>
<td>54%</td>
<td>43%</td>
</tr>
<tr>
<td>Patient referred specifically for the (unnecessary) test, treatment or procedure</td>
<td>53%</td>
<td>61%</td>
</tr>
<tr>
<td>The need to keep patients engaged</td>
<td>22%</td>
<td>23%</td>
</tr>
<tr>
<td>Taking the approach that it’s better to test than not to test</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td>The recommended test, treatment or procedure is unavailable</td>
<td>6%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Healthcare researchers have been looking at new ways to build evidence for reducing low-value healthcare and can play a valuable role in supporting the growth of Choosing Wisely through the publication and promotion of their insights.

How to get involved

There are plenty of ways to become involved in Choosing Wisely Australia. To find out how you or your organisation can get involved, including how to become a member or supporter:

Visit the choosingwisely.org.au website
- see what’s involved in becoming a Champion Health Service
- contact us by telephone at 02 8217 8700 or email at choosingwisely@nps.org.au
- follow us on Twitter, Facebook and LinkedIn.
Appendix 1

GP AND SPECIALIST SURVEYS

Annual surveys have been conducted with GPs and specialists since 2015. Response rates for these surveys were:

- **2016**: 12% for GPs (n=406) and 16% for specialists (n=337)
- **2017**: 7% for GPs (n=264) and specialists (n=160)
- **2018**: 6% for GPs (n=234) and 7% for specialists (n=194).

**GP and specialist awareness of Choosing Wisely Australia has increased year on year**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPs</td>
<td>55%</td>
<td>59%</td>
<td>63%</td>
</tr>
<tr>
<td>Specialists</td>
<td>38%</td>
<td>49%</td>
<td>56%</td>
</tr>
</tbody>
</table>

**Significantly more GPs and specialists have seen the Choosing Wisely Recommendations in recent years, compared with the first year of the initiative**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPs</td>
<td>38%</td>
<td>54%</td>
<td>51%</td>
</tr>
<tr>
<td>Specialists</td>
<td>29%</td>
<td>45%</td>
<td>47%</td>
</tr>
</tbody>
</table>

**Most GPs and specialists agree there is a problem with the use of unnecessary tests, treatments and procedures in medical practice**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPs</td>
<td>79%</td>
<td>85%</td>
<td>82%</td>
</tr>
<tr>
<td>Specialists</td>
<td>85%</td>
<td>89%</td>
<td>87%</td>
</tr>
</tbody>
</table>

**Significantly more GPs and specialists ‘strongly agree’ that they have a responsibility to help reduce the use of inappropriate tests, treatments and procedures in recent years, compared with the first year of the initiative**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPs</td>
<td>36%</td>
<td>47%</td>
<td>47%</td>
</tr>
<tr>
<td>Specialists</td>
<td>45%</td>
<td>55%</td>
<td>59%</td>
</tr>
</tbody>
</table>
## Reason for requesting an unnecessary test, treatment or procedure

<table>
<thead>
<tr>
<th>Reason</th>
<th>GPs</th>
<th>Specialists</th>
<th>GPs</th>
<th>Specialists</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2016</td>
<td>2017</td>
<td>2018</td>
<td>2016</td>
</tr>
<tr>
<td>Patient expectations</td>
<td>60%</td>
<td>62%</td>
<td>63%</td>
<td>44%</td>
</tr>
<tr>
<td>Potential for medical litigation</td>
<td>58%</td>
<td>54%</td>
<td>51%</td>
<td>41%</td>
</tr>
<tr>
<td>Uncertainty regarding the diagnosis</td>
<td>54%</td>
<td>49%</td>
<td>55%</td>
<td>46%</td>
</tr>
<tr>
<td>Difficulties accessing information, including results, from doctors in other settings</td>
<td>50%</td>
<td>52%</td>
<td>54%</td>
<td>55%</td>
</tr>
<tr>
<td>Patient referred specifically for the unnecessary test, treatment or procedure</td>
<td>32%</td>
<td>36%</td>
<td>33%</td>
<td>34%</td>
</tr>
<tr>
<td>The need to keep patients engaged</td>
<td>20%</td>
<td>19%</td>
<td>22%</td>
<td>11%</td>
</tr>
<tr>
<td>Taking the approach that it’s better to test than not to test</td>
<td>14%</td>
<td>9%</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>The recommended test, treatment or procedure is unavailable</td>
<td>10%</td>
<td>12%</td>
<td>6%</td>
<td>7%</td>
</tr>
</tbody>
</table>

### GP practice in line with Choosing Wisely Australia recommendations increased from 2017 to 2018.

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>2017</th>
<th>2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would ‘rarely or never’ prescribe antibiotics for otitis media in non-indigenous children aged 2-12 years, where reassessment is a reasonable option</td>
<td>36%</td>
<td>39%</td>
<td>+3%</td>
</tr>
<tr>
<td>I would ‘rarely or never’ advocate routine self-monitoring of blood glucose for people with Type 2 diabetes who are on oral medication only</td>
<td>39%</td>
<td>44%</td>
<td>+5%</td>
</tr>
<tr>
<td>I would ‘often or always’ have conversations around prognosis, wishes, values and end of life planning in patients with advanced disease</td>
<td>60%</td>
<td>63%</td>
<td>+3%</td>
</tr>
<tr>
<td>I would ‘often or always’ choose not to use PPIs long-term in patients with uncomplicated disease without regular attempts at reducing dose or ceasing</td>
<td>64%</td>
<td>70%</td>
<td>+6%</td>
</tr>
</tbody>
</table>
HEALTH SERVICES CLINICIAN SURVEYS

NPS MedicineWise provides survey instruments to Champion Health Services to enable them to survey their staff and consumers about attitudes to and drivers of unnecessary care. Comparable clinician survey data has been provided by three Choosing Wisely Champion Health Services. Baseline data is shown below:

Health Service 1 = 135 respondents
Health Service 2 = 153 respondents
Health Service 3 = 183 respondents.

### Health professional attitudes to unnecessary tests, treatments and procedures

<table>
<thead>
<tr>
<th></th>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree that there is a problem with the use of unnecessary tests, treatments and procedures in medical practice</td>
<td>48%</td>
<td>80%</td>
<td>60%</td>
</tr>
<tr>
<td>Agree that having unnecessary tests, treatments or procedures can be harmful for patients</td>
<td>81%</td>
<td>90%</td>
<td>92%</td>
</tr>
<tr>
<td>Agree that medical practitioners have a responsibility to help reduce inappropriate use of tests, treatments and procedures</td>
<td>90%</td>
<td>96%</td>
<td>97%</td>
</tr>
</tbody>
</table>

### Level of influence in reducing unnecessary tests, treatments and procedures in the workplace

<table>
<thead>
<tr>
<th></th>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited or no influence</td>
<td>63%</td>
<td>44%</td>
<td>56%</td>
</tr>
<tr>
<td>Some or moderate influence</td>
<td>31%</td>
<td>52%</td>
<td>40%</td>
</tr>
<tr>
<td>High level of influence</td>
<td>6%</td>
<td>4%</td>
<td>4%</td>
</tr>
</tbody>
</table>

### Perceived demand for unnecessary tests, treatments or procedures by colleagues or supervisors

<table>
<thead>
<tr>
<th></th>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived that colleagues or supervisors asked for unnecessary tests, treatments or procedures on a <strong>daily or weekly</strong> basis</td>
<td>24%</td>
<td>67%</td>
<td>40%</td>
</tr>
<tr>
<td>Perceived that colleagues or supervisors asked for unnecessary tests, treatments or procedures on a <strong>fortnightly or monthly</strong> basis</td>
<td>40%</td>
<td>22%</td>
<td>32%</td>
</tr>
</tbody>
</table>
### Common reasons for requesting an unnecessary test, treatment or procedure

<table>
<thead>
<tr>
<th>Reason</th>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncertainty regarding the diagnosis</td>
<td>39%</td>
<td>33%</td>
<td>41%</td>
</tr>
<tr>
<td>Difficulty accessing information from doctors in other settings</td>
<td>26%</td>
<td>48%</td>
<td>34%</td>
</tr>
<tr>
<td>Patient expectations</td>
<td>37%</td>
<td>42%</td>
<td>34%</td>
</tr>
<tr>
<td>Potential for medical litigation</td>
<td>24%</td>
<td>43%</td>
<td>25%</td>
</tr>
</tbody>
</table>

### Common barriers to implementing Choosing Wisely Australia recommendations

<table>
<thead>
<tr>
<th>Reason</th>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficult to change existing routines or ways of working</td>
<td>50%</td>
<td>66%</td>
<td>39%</td>
</tr>
<tr>
<td>Lack of education or orientation about recommendations</td>
<td>42%</td>
<td>37%</td>
<td>50%</td>
</tr>
<tr>
<td>Lack of knowledge of recommendations</td>
<td>38%</td>
<td>38%</td>
<td>50%</td>
</tr>
</tbody>
</table>
35

Consumer awareness of Choosing Wisely Australia and the 5 Questions
Consumer survey data have been provided by three health services. Baseline data are shown below:
Health Service 1 = 64 respondents
Health Service 2 = 92 respondents
Health Service 3 = 58 respondents.

For Health Service 2, consumer awareness of Choosing Wisely Australia increased by 6% after implementation of their Choosing Wisely intervention.

<table>
<thead>
<tr>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline awareness of Choosing Wisely Australia</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>Baseline awareness of the 5 Questions resource</td>
<td>9%</td>
<td>16%</td>
</tr>
</tbody>
</table>

Approximately 9 in 10 consumers surveyed had a medical test in the last 3 months, which was commonly recommended by the hospital or healthcare professional.

<table>
<thead>
<tr>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had a medical test in the last 3 months</td>
<td>92%</td>
<td>85%</td>
</tr>
<tr>
<td>Hospital recommended having the test</td>
<td>40%</td>
<td>-</td>
</tr>
<tr>
<td>Doctor recommended having the test</td>
<td>13%</td>
<td>80%</td>
</tr>
<tr>
<td>Specialist recommended having the test</td>
<td>38%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Consumer attitudes towards medical tests

<table>
<thead>
<tr>
<th>Health Service 1</th>
<th>Health Service 2</th>
<th>Health Service 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felt confident asking their doctor or other health professional questions about medical tests</td>
<td>92%</td>
<td>90%</td>
</tr>
<tr>
<td>Agree that having a medical test when they don’t really need it may be harmful for their health</td>
<td>52%</td>
<td>21%</td>
</tr>
<tr>
<td>Agree that some tests can produce misleading results that can lead to unnecessary treatment</td>
<td>25%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Note
Health Service 1, 2 and 3 is used to maintain anonymity for survey participants. The health services represented in the clinician surveys differ from those in the consumer surveys.
Appendix 2

CHOOSING WISELY AUSTRALIA ADVISORY GROUP

Dr Matthew Anstey, Chair
Intensivist and Co-director of Research
Sir Charles Gairdner Hospital

Helen Belcher
Community Representative
(Hunter New England Local Health District Board)

Darlene Cox
Executive Director Health Care Consumers’ Association
(to March 2018)

Professor Adam Elshaug
Health Care Policy Menzies School of Public Health, Australian National University
(to March 2018)

Melissa Fox
Chief Executive Officer Health Consumers Queensland

Dr Frank Jones
Senior Partner Murray Medical Centre Mandurah

Professor Erwin Loh
National Chief Medical Officer and Group General Manager Clinical Governance
St Vincent’s Health Australia

Dr David Rosengren
Executive Director Operations
Metro North Hospital and Health Service

Professor Nicholas Talley
Pro Vice-Chancellor (Global Research) and Laureate Professor
Office – DVC (Research and Innovation), University of Newcastle

Jessica Toleman
A/Executive Director, Women’s and Newborn Services at Royal Brisbane and Women’s Hospital, Metro North Hospital and Health Service

Dr Jeremy Wellwood
Director of Haematology Oncology
Gold Coast University Hospital
### Appendix 3

**CHOOSING WISELY AUSTRALIA MEMBERS AND SUPPORTERS**

<table>
<thead>
<tr>
<th>Australasian Chapter of Sexual Health Medicine</th>
<th>ANZICS</th>
<th>eastern health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Faculty of Occupational and Environmental Medicine</td>
<td>Australian College of Nursing</td>
<td>GESA - Geriatric Medicine of Australia</td>
</tr>
<tr>
<td>Australian Faculty of Rehabilitation Medicine</td>
<td>Australian Rheumatology Association</td>
<td>Gold Coast Health</td>
</tr>
<tr>
<td>APPEG</td>
<td>Government of Western Australia Child and Adolescent Health Service</td>
<td>GVHealth</td>
</tr>
<tr>
<td>ASTD</td>
<td>College of Intensive Care Medicine of Australia and New Zealand</td>
<td>HSANZ</td>
</tr>
<tr>
<td>ASCIA</td>
<td>Consumers Health Forum of Australia</td>
<td>HCASA - Health Consumer Action of SA Inc.</td>
</tr>
<tr>
<td>Australian and New Zealand Association of Cancer Nurses</td>
<td>Government of Western Australia East Metropolitan Health Service</td>
<td>healthdirect Australia</td>
</tr>
<tr>
<td>Australian Society for Rehabilitation Medicine</td>
<td>Joondalup Health Campus</td>
<td>Part of Ramsey Health Care</td>
</tr>
<tr>
<td>The Royal Australian and New Zealand College of Obstetricians and Gynaecologists</td>
<td>RACP Specialists Together</td>
<td></td>
</tr>
<tr>
<td>Monash Health</td>
<td>The Royal Australian and New Zealand College of Obstetricians and Gynaecologists</td>
<td></td>
</tr>
<tr>
<td>Northern Health</td>
<td>RANZCOC</td>
<td></td>
</tr>
<tr>
<td>Peninsula Health</td>
<td>RACGP</td>
<td></td>
</tr>
<tr>
<td>Pharmaceutical Society of Australia</td>
<td>RCPA</td>
<td></td>
</tr>
<tr>
<td>RACP Paediatrics and Child Health Division</td>
<td>shpa</td>
<td></td>
</tr>
<tr>
<td>RBWH</td>
<td>Australian College of Sport and Exercise Physician</td>
<td></td>
</tr>
<tr>
<td>The Royal Children’s Hospital Melbourne</td>
<td>West Gippsland Healthcare Group</td>
<td></td>
</tr>
<tr>
<td>Government of Western Australia WA Country Health Service</td>
<td>Government of South Australia</td>
<td></td>
</tr>
</tbody>
</table>
Join the conversation for change

choosingwisely.org.au

twitter.com/ChooseWiselyAU
facebook.com/choosingwiselyaustralia