



**Choosing Wisely
Australia**

An initiative of NPS MedicineWise

Choosing Wisely in Australia

2016 Report

**Promoting better conversations
about the appropriate use of medical
tests, treatments and procedures**

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**We achieved
so much
together in
our first
year. Let's
continue the
conversation...**

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| Introduction | Choosing Wisely Australia Report 2016 | An initiative of NPS MedicineWise |
| | 28 colleges, societies & associations are members | |
| | 123 recommendations highlighting healthcare approaches that should be questioned | |

Introduction

Dr Lynn Weekes AM, Chief Executive, NPS MedicineWise

I am pleased to present our first Choosing Wisely Australia report, which details our achievements since launching last year. It is evident from our work there is a strong appetite in the community for better conversations about the appropriate use of tests, treatments and procedures. More and more people are engaging in the concept of ‘more is not always better’ when it comes to healthcare.

Choosing Wisely is a global social movement aimed at supporting conversations between health professionals and consumers about the appropriate use of healthcare tests, treatments and procedures. Employing a ground-up approach driven by Australia’s health professionals and their specialist colleges, societies and associations, Choosing Wisely puts consumers firmly at the centre by identifying and reducing practices that are not evidence-based and potentially could cause them harm.

Key activities and outcomes achieved by Choosing Wisely Australia include:

- strong engagement by health professionals with 28 colleges, societies and associations becoming members
- cross-disciplinary conversations and collaboration on recommendations
- broad health professional representation including GPs, specialists, nurses, surgeons, hospital pharmacists, physiotherapists, radiologists and pathologists
- development and promotion of resources to support communication
- strong interest from consumer advocacy groups and support from the Consumers Health Forum of Australia
- key ‘5 Questions’ consumer resource translated into 10 languages
- 123 recommendations highlighting healthcare approaches that should be questioned
- strong media coverage across all major media channels - TV, radio, press and online – reaching an audience of more than 18 million Australians
- multidisciplinary agreement on need to improve management of end-of-life care, appropriate use of antibiotics and imaging
- recommendations incorporated into guidelines, education modules and hospital quality and safety improvement systems
- locally led implementation through professional and community partnerships.

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| Introduction | Choosing Wisely Australia Report 2016 | An initiative of NPS MedicineWise |
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Our surveys with health professionals and consumers identify some of the drivers contributing to unnecessary care. The results highlight a potential gap between the aspirations and actual behaviours of both consumers and health professionals regarding appropriate healthcare.

There are also contrasting opinions between health professionals and patients as to why unnecessary care happens, highlighting the need for better understanding through improved communication.

Promisingly, consumers who reported knowing about Choosing Wisely were more aware of the risks and harms associated with unnecessary care. Also, as a result of participating in Choosing Wisely Australia, 73% of participating medical colleges and societies have indicated they will consider how they can work with consumers to reduce unnecessary care.

Thank you to the Choosing Wisely Australia Advisory Group for your support and commitment to successfully delivering the initiative. Thank you also to all the Choosing Wisely Australia colleges, societies, associations, chapters, hospitals, practices, local health districts, consumer organisations and consumers who have shown such enthusiasm in leading the effort.

The initiative has come a long way but there is plenty of work ahead. If you haven’t already, we invite you to join the Choosing Wisely Australia conversation.



Dr Lynn Weekes AM
 Chief Executive Officer
 NPS MedicineWise

About NPS MedicineWise

NPS MedicineWise, an independent, not-for-profit and evidence-based organisation for quality use of medicines and medical tests, facilitates Choosing Wisely Australia. We identify and resolve challenges around the way medicines, medical tests and health technologies are prescribed and used. Our aim is to enable people to make the best decisions about medicines and related technologies. We receive funding from the Australian Government Department of Health.

Key achievements

Since it began in April 2015, interest and participation in Choosing Wisely Australia has reinforced the urgent need for a national conversation on the appropriate, safe and effective use of the country's health resources.

The initiative is exerting influence on health decision making in different settings by:

- helping promote further discussions about unnecessary and low-value treatments and tests among health professionals and consumers
- informing tangible healthcare policy changes, structures and recommendations.

5
QUESTIONS

4000
SOCIAL
MEDIA
FOLLOWERS



3350
MEDIA MENTIONS



28
COMMITTED
COLLEGES,
SOCIETIES AND
ASSOCIATIONS



123
RECOMMENDATIONS



100,000
WEBSITE
SESSIONS



A global movement

Choosing Wisely is gaining traction across the world and is playing an important role in empowering health professionals and consumers to take an active role in reducing unnecessary healthcare.

Underpinning Choosing Wisely, and integral to its success worldwide, are two key guiding principles:

1. health professionals lead the initiative, independently of government and/or payers
2. to improve the quality of healthcare for consumers by reducing unnecessary tests and treatments.

In the US more than 70 specialty societies have collectively published more than 450 Choosing Wisely recommendations. The initiative has been the focus of more than 400 journal articles, and has well and truly entered mainstream conversation.

Canada launched Choosing Wisely in 2014 and similar initiatives now exist, or are being developed, in over 15 countries. Choosing Wisely Australia launched in April 2015.

Choosing Wisely was launched in the United States in 2012 by the American Board of Internal Medicine Foundation, Consumer Reports and nine specialty medical societies. The initiative was developed in direct response to the lack of attention given to the overuse of tests, treatments and procedures and potential negative impacts for consumers. It has been estimated that 30% of all medical spending in the US is unnecessary and does not add value in care.¹

Each specialty society published lists of five recommendations for its specific discipline where there was strong scientific evidence of overuse and significant potential harm or waste. In publishing these lists, Choosing Wisely sought to ‘encourage physicians and patients to have conversations about what care is truly needed, and debunk the notion that more is better’.²

‘The aim of the initiative is to both help identify and reduce investigations and treatments that are of proven low value, with the outcome of improving healthcare provided to Australians.’

**Associate Professor Richard King AM,
Chair, Choosing Wisely Australia
Advisory Group**

1. Levinson W, et al. BMJ Qual Saf 2014;0:1-9.
2. Wolfson D, et al. Acad Med 2014;89:7.

How Choosing Wisely works

Choosing Wisely is governed by the following principles:

- health profession-led to build and sustain the trust of both clinicians and patients
- clear emphasis on improving quality of care and on harm prevention
- patient-focused communication between clinicians and patients is a central tenet
- evidence-based and reviewed on an ongoing basis
- multidisciplinary – encouraging physicians, nurses, pharmacists and other healthcare professionals to participate
- transparency – processes used to create the recommendations, as well as supporting evidence, are published.

The development of lists of recommendations by health professional organisations plays a critical role in starting important conversations about the problem of unnecessary care. The lists create a platform for change.

All the recommendations are available at www.choosingwisely.org.au/recommendations.

RECOMMENDATION

CONTEXT

provides consideration
that recommendations
are not things that
should never be done
but rather things that
should be considered
and questioned

SUPPORTING EVIDENCE

RELATED RESOURCES

Australasian College for Emergency Medicine: tests, treatments and procedures clinicians and consumers should question

Expand all | Collapse all

1. Avoid requesting computed tomography (CT) imaging of kidneys, ureters and bladder (KUB) in otherwise healthy emergency department patients, age <60 years, with a known history of kidney stones, presenting with symptoms and signs consistent with uncomplicated renal colic.

Acute flank pain due to suspected renal colic is a common clinical presentation in the emergency department. While a CT-KUB allows a rapid, contrast free diagnosis of kidney stones, it is a high ionizing radiation technique. Younger patients with typical renal colic pain that resolves spontaneously, or with analgesia, and have no features on history, examination or laboratory investigations that suggest complicated renal stones or a serious, alternate diagnosis can be managed without repeated imaging. Concerning features include fever, features of urinary tract infection, lack of haematuria, ongoing high analgesic requirements, or palpable abdominal mass.

Supporting evidence

- Moore CL, Bonner S, Daniels B, Lutz S, Molinaro A, Singh D, Gross CP. Derivation and validation of a clinical prediction rule for uncomplicated unilateral stone—the NICE score: retrospective and prospective observational cohort studies. *NMJ* 2014;345:p2191.
- Katz SI, Saluja B, Birk JA, Forman HP. Radiation dose associated with unenhanced CT for suspected renal colic: impact of repetitive studies. *Am J Roentgenol* 2006;186(4):1120-4.
- Padalino R, Pandiaratne N, Wain TM, Weston MJ, Irving JC. 2012. Emergency department imaging protocol for suspected acute renal colic – evaluating two services. *Emergmed* 2014 16(2016).
- Broder J, Keown J, Lohr J, Babcock A, Yoon J. Cumulative CT exposures in emergency department patients evaluated for suspected renal colic. *J Emerg Med* 2013;33(2):161-8.
- Smith-Bindman R, Austin C, Baltz J, Bengtson R, Camargo CA Jr, Corto J, Dean AJ, Goldstein RB, Getty RT, Jay GD, Kang TL, Kivler DR, Ma CJ, Mallin M, Manson W, Meinkoth J, Mifflord DL, Miller SK, Mills LD, Miner JR, Moriguchi M, Nalae VC, Press GM, Stoller ML, Valencia VE, Wang J, Wang KC, Cummings SR. Ultrasonography versus computed tomography for suspected nephrolithiasis. *N Engl J Med* 2014 371:12.

Clinician resources

- Guidelines on diagnostic imaging in the Emergency Department

Consumer resources

- 5 questions to ask your doctor or other healthcare provider
- Communicating with your healthcare provider

ELEMENTS OF A CHOOSING WISELY AUSTRALIA RECOMMENDATION

Our roadmap for implementation

It is widely acknowledged that lasting behaviour change requires multifaceted implementation strategies and in Australia implementation is being informed by the Choosing Wisely International Working Group framework.

Key elements of Choosing Wisely Australia (adapted from Levinson et al¹)

| Objective | Activities/outputs | Evaluation |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Change clinician attitudes to practice | <div><div>Engaging healthcare providers in list development and implementation</div><div>Incorporation into continuing professional development, curriculum and education</div><div>Integration into existing programs</div><div>Medical and mainstream media campaigns, journal articles, conferences, partner newsletters</div><div>Local health network pilots</div></div> | <div>Multifaceted approaches including: process indicators, short- and intermediate-term impacts and longer-term outcomes</div> <div>Short-term measures:<div><div>Participation</div><div>Reach</div><div>Baseline surveys of attitudes and awareness</div></div></div> <div>Medium to long term:<div><div>Changes to attitudes and awareness</div><div>Curriculum changes</div><div>Rates of use of low value services</div><div>Influence on policy and systems</div></div></div> |
| Foster consumer engagement and acceptance | <div><div>Mainstream and social media</div><div>Partnerships with consumer organisations</div><div>Consumer resources</div><div>Features in partner newsletters</div></div> | |
| Change key clinical practices | <div><div>Promotion of the ‘conversation’ and improved shared decision making</div><div>Local pilots</div></div> | |
| Promote alignment with the healthcare system | <div><div>Recruit partners among clinics, hospitals, local and State health regions</div><div>Advocate for incorporation into systems and policy</div></div> | |

1. Levinson W, et al. BMJ Qual Saf 2014;0:1-9.

KEY THEMES OF MEDICAL RECOMMENDATIONS:

21% imaging

20% medicine use

11% pathology

8% antibiotic use

6% end-of-life & palliative care

A clinician-led approach

Choosing Wisely employs a clinician-led process that engages with Australia’s peak medical colleges, societies and associations. In consultation with members, participating organisations develop lists of recommendations for tests, treatments and procedures that evidence shows are low value and should be questioned.

These recommendations are then promoted through organisational channels including member conferences, workshops, and newsletters. The ultimate goal is for incorporation into curriculum, guidelines and professional development programs.

Choosing Wisely Australia membership triples

Six colleges and societies participated in the inaugural Choosing Wisely Australia launch on 29 April 2015, releasing 26 recommendations.

As at the end of November 2016, 28 colleges, societies and associations were participating, with a total of 123 recommendations released. The recommendations are diverse and include key themes such as imaging (21% of recommendations), medicine use (20%), pathology (11%), antibiotic use (8%) and end-of-life and palliative care (6%).

‘In some areas, much of our time and our work is put toward imaging that we would regard as low value, low return. The whole thing can put the patient on a bit of a treadmill of further investigation and time when, really, that was not appropriate at the start.’

Dr Gregory Slater, The Royal Australian and New Zealand College of Radiologists

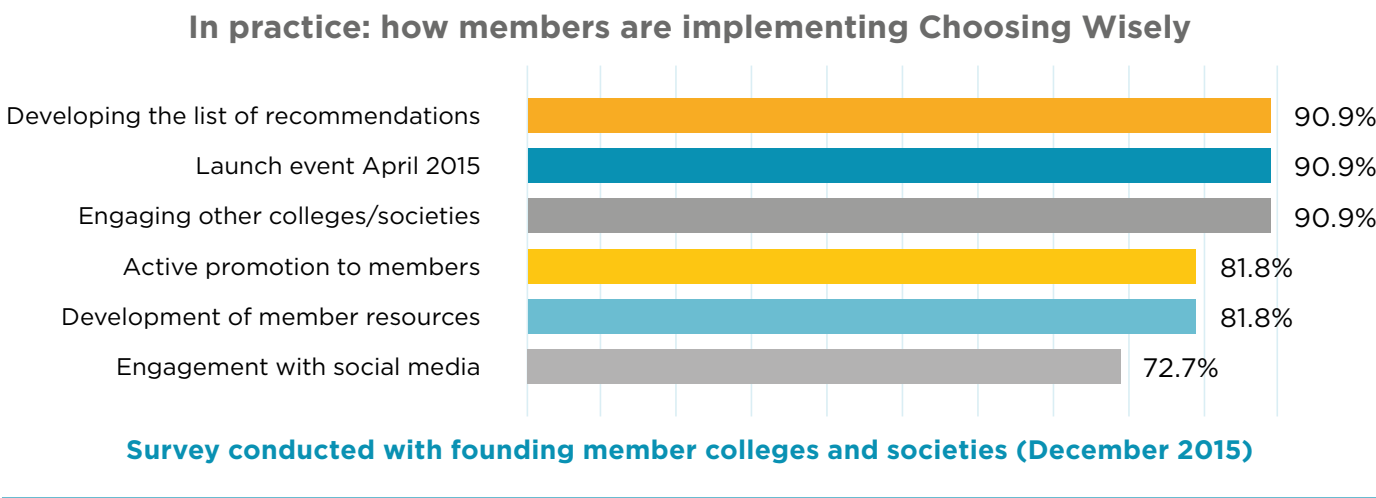
Promoting evidence-based care

Most colleges and societies have participated in Choosing Wisely Australia to promote evidence-based care to members and reduce unnecessary tests, treatments and procedures. As a result of their involvement in the Choosing Wisely Australia initiative, 73% of participating colleges and societies are considering how they will work with consumers in the future.

Development, promotion and incorporation of recommendations

Choosing Wisely Australia member organisations and NPS MedicineWise have implemented a range of initiatives to raise awareness of new healthcare recommendations. College and society representatives have anticipated their level of involvement in Choosing Wisely will continue to grow, with over half

(63.6%) indicating an anticipated ‘high’ level of involvement within the subsequent 12 months.



CHOOSING WISELY MAKING INROADS WITH HEALTH SERVICES

The Royal Australian and New Zealand College of Radiologists (RANZCR), in support of its six Choosing Wisely Australia recommendations, has developed clinical decision rules to help clinicians, patients, parents and carers come to a shared decision about when imaging may or may not be needed.



Dr Gabriel Bletcher and Prof Stacy Goergen
MONASH HEALTH

Tools to implement these clinical decision rules include a booklet, an app, posters and web-based learning modules, which have now been embedded into education programs and routine clinical practice at 15 healthcare services.

‘This will improve the safety, appropriateness and efficiency of patient care across our health service. We plan to research the effect of this approach to appropriate imaging education on imaging utilisation and test positivity rates in 2016,’ says Professor Stacy Goergen, Director of Research, Monash Imaging, and Adjunct Clinical Professor, Departments of Medical Imaging and Surgery.

‘Completion of the web-based education modules will be a prerequisite for our interns and advanced trainees from 2016, to ensure they have the knowledge base to enable them to make wise decisions about imaging referrals. The app will reinforce this training at the bedside.’

MORE THAN A RECOMMENDATION

As the facilitator of Choosing Wisely Australia, NPS MedicineWise actively supports awareness and implementation of Choosing Wisely principles. One of the Choosing Wisely Australia recommendations from the Royal Australian College of General Practitioners (RACGP) is:

DON'T USE PROTON PUMP INHIBITORS (PPIS) LONG TERM IN PATIENTS WITH UNCOMPLICATED DISEASE WITHOUT REGULAR ATTEMPTS AT REDUCING DOSE OR CEASING TREATMENT.

In 2015, NPS MedicineWise implemented a general practitioner-focused, multifaceted program that aligned with the goal of this recommendation. The program encouraged stepping down of PPI therapy for maintenance of symptoms in patients with reflux and heartburn.

- Key components of the program were:**
- an up-to-date, evidence-based summary on the issue sent to GPs
 - an online learning module of a clinical case scenario

- a website knowledge hub on related medicines and conditions
- a patient resource to support conversations between GPs and patients
- an online clinical e-audit for GPs to reflect on their practice
- Pharmaceutical Benefits Scheme feedback distributed to GPs to also reflect on their practice and prescribing patterns.

The Royal Australasian College of Physicians (RACP) is a founding member of Choosing Wisely Australia. RACP has also initiated the EVOLVE program with its affiliated specialty societies, producing lists of recommendations, that are being incorporated into Choosing Wisely Australia.

By the end of November 2016, 13 specialties have published lists on the EVOLVE website (<http://evolve.edu.au/>) with a further 13 underway. RACP has conducted forums involving 22 specialties on the implications, common themes and learnings arising from developing lists, and strategies to support their translation into clinical practice.

RACP Congress also included sessions on recommendations that have cross-specialty relevance and an interactive workshop to provide input to the development of a general paediatrics list. Podcasts on low-value care have also been produced by the RACP.



A community conversation

Effective communication between patients and their health professionals is essential to ensure each individual receives the care most appropriate for them. Choosing Wisely encourages consumers to be active participants in the management of their own care.

Key actions in engaging with consumers include:

- raising awareness through media and social media
- partnering with consumer-related organisations
- development of consumer information and resources.

Strong media interest in Choosing Wisely Australia

Engagement in Choosing Wisely by Australia’s media is one measure of success as we work to promote a national conversation on appropriate care.

Promotional activities generated more than 3,350 news stories featuring Choosing Wisely Australia. This coverage had an estimated reach of over 18 million Australians.

Mainstream media accounted for 92% of coverage. Most coverage was on radio, followed by the internet, television and press. Coverage of the initiative’s recommendations featured on all major radio stations, and in all major newspapers, and the issue of inappropriate healthcare was a subject on such television programs as *Catalyst*, *Four Corners*, and *Today*.

Of the coverage, 86.1% was favourable and 9.6% neutral towards the campaign, with the prominent message that ‘Choosing Wisely Australia could/will result in a reduction of unnecessary health treatments’.

How would you feel if your doctor said ‘it’s best to do nothing’?



“Receiving the right answers”

Play now
Read transcript

VOX POPS
The word on the street

A video project was commissioned to gather community perceptions of health professional and consumer interactions and the opportunities and challenges around having effective conversations. The ‘word on the street’ videos have attracted more than 50,000 views.

If a doctor recommends a test or procedure, would you ask them about risk?



“Expecting explanations for peace of mind”

Play now
Read transcript

Consumers as partners

In September 2015, NPS MedicineWise and the Consumers Health Forum of Australia (CHF) jointly hosted the inaugural Choosing Wisely Australia Consumer Roundtable. Thirty representatives from key consumer organisations, community organisations and health professional groups attended. The aim was to raise awareness of the Choosing Wisely initiative and create an opportunity for key stakeholders to provide input to inform our consumer engagement strategy.

In addition we have undertaken focus groups with consumers to ensure our messages are resonating with Australian audiences. Choosing Wisely Australia resources and creative are also tested with consumers.

The Consumers Health Forum and Healthdirect Australia have been supporters of Choosing Wisely Australia since our inaugural launch and have worked closely with NPS MedicineWise to ensure patient interests and communication between clinicians and patients remains central to Choosing Wisely.

Resources to support improved conversations



5 QUESTIONS

The ‘5 Questions’ resource was developed by Consumer Reports in the United States, and widely adopted internationally, and Choosing Wisely Australia has promoted it to support conversations between clinicians and consumers. It highlights the key questions for consumers to ask their healthcare providers before they get any test, treatment or procedure.

- Do I really need this test or procedure?
- What are the risks?
- Are there simpler, safer options?
- What happens if I don’t do anything?
- What are the costs?

This resource has been translated into 10 community languages to support broader uptake within the community.

‘Often consumers don’t have control over their healthcare decisions even though we fund the system and the system is there to serve us. It can be difficult to speak up – Choosing Wisely Australia can help us do that.’

Darlene Cox, presenter at Consumer Roundtable, consumer advocate, Choosing Wisely Australia Advisory Group

CONSUMER FACT SHEETS

A consumer portal on the Choosing Wisely Australia website provides links to a range of relevant consumer resources.

WITHOUT THE ‘FIVE QUESTIONS’,
IT COULD HAVE BEEN A DISASTER

Hunter New England Local Health District in NSW is a keen supporter of Choosing Wisely Australia. At a community meeting, local resident Johnette described how Choosing Wisely had helped her family.

From the age of 11, Johnette’s partner suffered from blood flow issues to his legs, causing skin conditions for which he had all sorts of treatments over the years. Recently his GP had referred him to a vascular surgeon.

The consultation with the surgeon did not start well with another person’s file being referred to and the surgeon describing in vivid terms the procedure that would occur. This made Johnette and her partner confused and worried. Fortunately, Johnette had taken along with her Choosing Wisely’s ‘5 Questions to ask your doctor’, which she had picked up at a community forum run by her health service.

‘When we asked about the risks of surgery the specialist said that surgery has risk factors but he could not be specific,’ Johnette explained.

‘As to safer options, the specialist recommended surgery but suggested compression stockings as an alternative, however this was contrary to previous advice we had received.



John and Johnette

And when we asked about cost he was not clear. He told us to go away and think about it and make another appointment in six weeks if we wanted to proceed. The surgeon was clearly annoyed by my questions. We never went back to him. We discussed our situation with our GP and asked for a referral to another surgeon who advised against any surgical intervention due to the severity of scarring to John’s blood vessels. He is under the treatment of a skin specialist, and doing well.

‘Thank God for those five questions, or John’s outcome could have been disastrous.’

SUPPORTER RESOURCE KIT

A supporter resources kit has been developed for consumer organisations and local health services to help communicate with consumers about the Choosing Wisely Australia initiative. The kit includes the ‘5 Questions’ resource in a number of formats, presentation slides and videos. Resources are suitable for a range of contexts, including use in patient waiting rooms and community health forums.

Alignment of clinical and healthcare systems

Adopted actions in aligning clinical practice and healthcare systems include:

- promoting the conversation among clinicians and with consumers
- engaging with hospitals and state and local health areas in implementation
- incorporating into systems and health policy.

Choosing Wisely Australia is a catalyst for change and is influencing decision making at a number of levels. This is happening as a result of Choosing Wisely promoting discussions about unnecessary and low-value treatments and tests among health professionals and consumers. Choosing Wisely is also informing tangible policy changes, structures and recommendations through initiatives such as the Department of Health MBS Review and The Australian Atlas of Healthcare Variation.

Choosing Wisely Australia is also supporting concrete changes in processes, policies and structures at the clinical coalface that reflect evidence-based recommendations to improve the quality of healthcare for Australians.

These initiatives are helping to build a common vocabulary, ownership by health professionals and a societal-level conversation about appropriate care.

While health services have always undertaken quality improvement and patient safety activities, Choosing Wisely Australia has proven an attractive initiative by grouping a number of these activities in a concerted effort to support change.



Dr Simon Judkins

‘Choosing Wisely has been a very powerful vehicle to bring all those disciplines in under one big umbrella.’

Dr Simon Judkins, AUSTIN HEALTH

A STATE OF CHOOSING WISELY

Choosing Wisely partnered with the Queensland Clinical Senate in March 2016 to deliver a senate meeting on value-based healthcare. Senior clinicians and consumers came together from around the state to showcase high-value, innovative models of care and to identify opportunities to reduce delivery of low-value health services.

‘The future sustainability of the healthcare system is one of the most significant challenges facing health administrators and us as clinicians and consumers,’ said Senate Chair, Dr David Rosengren. ‘We must challenge ourselves continuously around the value of the service being provided to the community for the investment of resources used.’

Senate members identified some key ‘do not do’ priorities for Queensland. Unnecessary imaging for non-specific acute low back pain was identified as a medical priority, while routine non-targeted risk screening by nurses and improved utilisation of primary contact allied health clinics were also flagged as state-wide strategic opportunities. Case studies such as the Sunshine Coast Hospital and Health Service’s initiative to reduce unnecessary screening radiology for breast cancer patients highlighted the benefits that can be delivered by adopting an evidence-based approach to medical care.

Following the meeting the Senate will continue to promote the importance of Choosing Wisely and encourage Queensland hospital and health services to maintain a strong focus on value-based healthcare.



Dr David Rosengren and Dr Robyn Lindner

Gold Coast University Hospital



GOLD COAST HEALTH: A CHOOSING WISELY CHAMPION

Gold Coast Health is among the first of Australia’s health services to bring together key quality initiatives under the Choosing Wisely banner.

Among a number of tests, treatments and procedures, Gold Coast Health has begun looking at their use of pathology testing across the health service. They have undertaken to assess the current state of pathology utilisation across specialties and service areas, and determine its clinical appropriateness based on current evidence.

They are developing demand-management strategies to improve pathology ordering patterns via guidelines and pathways for activation through education and training. An online dashboard is being developed to support clinical monitoring and auditing of pathology ordering practices. The ultimate goal is to improve patient safety and experience, while providing high-quality care using the most appropriate pathology tests.

‘We are very excited about our partnership with Choosing Wisely Australia,’ says Jane Hancock, Executive Director Operations at Gold Coast Health.

‘It creates a fabulous opportunity for us to learn and to make an active contribution to a very important national program.

‘Within Gold Coast Health our project is being led by clinicians and is strongly patient/consumer focused. By adopting Choosing Wisely principles, Gold Coast Health is focusing on care that is providing better value for our patients – that is, doing the right test, for the right patient, at the right time, in the right location.’

Learnings and challenges

Choosing Wisely Australia has sought to bring awareness to the issue of the inappropriate use of tests, treatments and procedures.

Key learnings

- Drivers of inappropriate care are multiple and complex.
 - Healthcare providers believe they have a responsibility to reduce unnecessary tests, treatments and procedures.
 - There is evidence of disconnect between consumer and clinician perceptions of patient expectations. In particular, 41% of GPs felt patients would ask them for unnecessary tests, treatments or procedures several times a week, and 22% said they were asked every day. Only 16% of consumers indicated they ask their healthcare provider for a test.
 - Consumers who have heard of Choosing Wisely are more aware that unnecessary
- tests can be harmful and some tests can produce misleading results that could lead to unnecessary treatment.
 - GPs who were aware of Choosing Wisely were more likely to discourage patients from having unnecessary tests, treatments or procedures than those who were not aware of the initiative.
 - There is increasing interest from colleges, societies and associations involved in Choosing Wisely to engage with consumers.
 - There is a strong appetite from within health services to reduce unnecessary care and reduce risk of harm to patients.

Challenges

- Encouraging member organisations to highlight unnecessary care that is within the control of their specialty.
- Addressing the multiple drivers of unnecessary care and the assumptions that underpin them.
- Measuring the impact of Choosing Wisely.
- Ensuring no consumer groups are disadvantaged by the initiative.

Future directions

We are excited by the opportunities and the challenges that lie ahead for Choosing Wisely Australia.

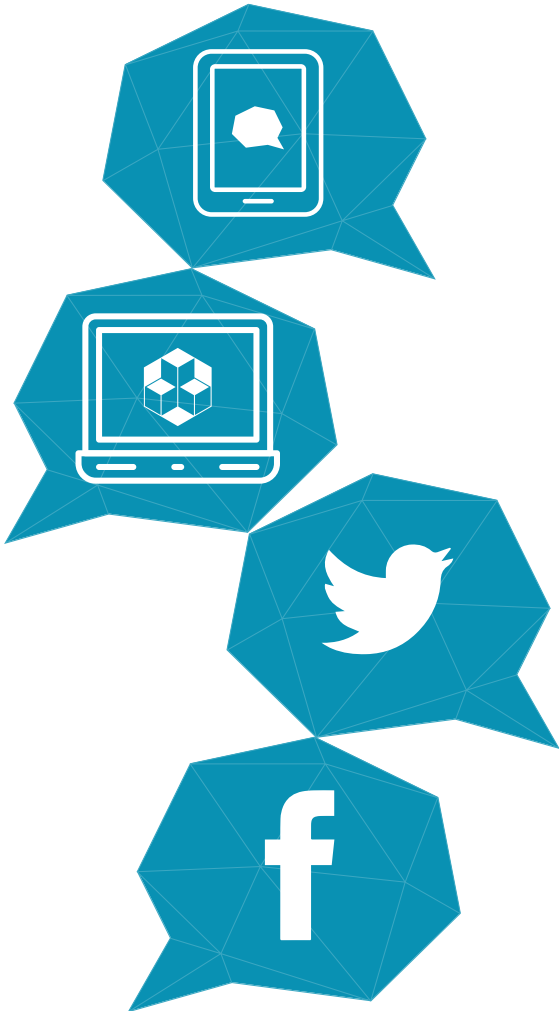
Our priorities include:

- continued focus on partnerships to support conversations about unnecessary care
 - embedding Choosing Wisely principles into ‘business as usual’ activities for colleges, societies and associations
- implementation initiatives at a local health services level with both health professionals and consumers
 - encouraging consumer participation through partnerships, promotion and supporting resources
 - reporting on impact.

Get involved

Choosing Wisely Australia welcomes opportunities to work with interested healthcare organisations to progress the initiative and ensure its success. To find out more or to get involved:

- www.choosingwisely.org.au
- choosingwisely@nps.org.au
- twitter.com/ChooseWiselyAu
- facebook.com/choosingwiselyaustralia



Appendices

Appendix 1 Attitudes and awareness of Choosing Wisely and unnecessary care

Surveys and qualitative research¹ were conducted with general practitioners and specialists in April 2015 (before the launch of Choosing Wisely Australia) and December 2015 (after the launch). Choosing Wisely-related questions were included in a consumer survey in October 2015.² The research was designed to provide baseline data to measure the impact of the initiative over time.

AUSTRALIAN HEALTHCARE PROVIDERS

Awareness of Choosing Wisely has increased

| | GPs | Specialists |
|---------------|-----|-------------|
| April 2015 | 19% | 27% |
| December 2015 | 55% | 37% |

Healthcare providers agree there is a problem with the use of tests, treatments and procedures

| | GPs | Specialists |
|---------------|-----|-------------|
| December 2015 | 79% | 85% |

Healthcare providers feel a responsibility to reduce inappropriate use of tests, treatments and procedures

| | GPs | Specialists |
|---------------|-----|-------------|
| December 2015 | 90% | 95% |

‘We see about 80-85% of the population every year and we have this continuous relationship with our patients, so we have a unique opportunity to change habits.’

Dr Frank Jones, The Royal Australian College of General Practitioners

Most say they often or always discourage patients from unnecessary tests and treatments

| | GPs | Specialists |
|---------------|-----|-------------|
| April 2015 | 69% | 57% |
| December 2015 | 73% | 59% |

Drivers of unnecessary care

| Reasons | GPs | Specialists |
|-----------------------------------------------------------------------------------------|-----|-------------|
| Patient expectations | 60% | 44% |
| Potential for medical litigation | 58% | 41% |
| Uncertainty regarding the diagnosis | 54% | 46% |
| Difficulties in accessing information from doctors in other settings, including results | 50% | 55% |
| Patient referred specifically for the test, treatment or procedure | 32% | 34% |
| The need to keep patients engaged | 20% | 11% |
| Taking the approach that it is better to test than not to test | 14% | 8% |
| The recommended test, treatment or procedure is unavailable | 10% | 7% |

Healthcare providers say patients regularly ask for unnecessary tests

| | GPs | Specialists |
|----------------------|-----|-------------|
| Several times a week | 41% | 21% |
| Every day | 22% | 17% |

Healthcare providers welcome consumer questions using the Choosing Wisely ‘5 Questions to ask your doctor or other healthcare provider’ but time can be a key barrier

| | GPs | Specialists |
|-------------------------|-----|-------------|
| Welcome and no barriers | 40% | 50% |
| Time as a barrier | 44% | 36% |

Small numbers of respondents highlighted additional barriers such as:

- 👉 patient inability to understand reasons for decision and risk/benefit
- 👉 difficulties in answering questions on cost and effectiveness
- 👉 perception of mistrust
- 👉 patient expectations
- 👉 patient health literacy and language barriers
- 👉 cost for the patient (longer consultation)
- 👉 difficulty advising against other health providers who recommended tests.

AUSTRALIAN CONSUMERS

Growing consumer awareness of Choosing Wisely

Efforts to increase consumer awareness of Choosing Wisely Australia have been growing steadily since implementation of the initiative in April. In August 2015, Australian consumers were surveyed for the first time about Choosing Wisely Australia. 5% of consumers surveyed were aware of Choosing Wisely Australia.

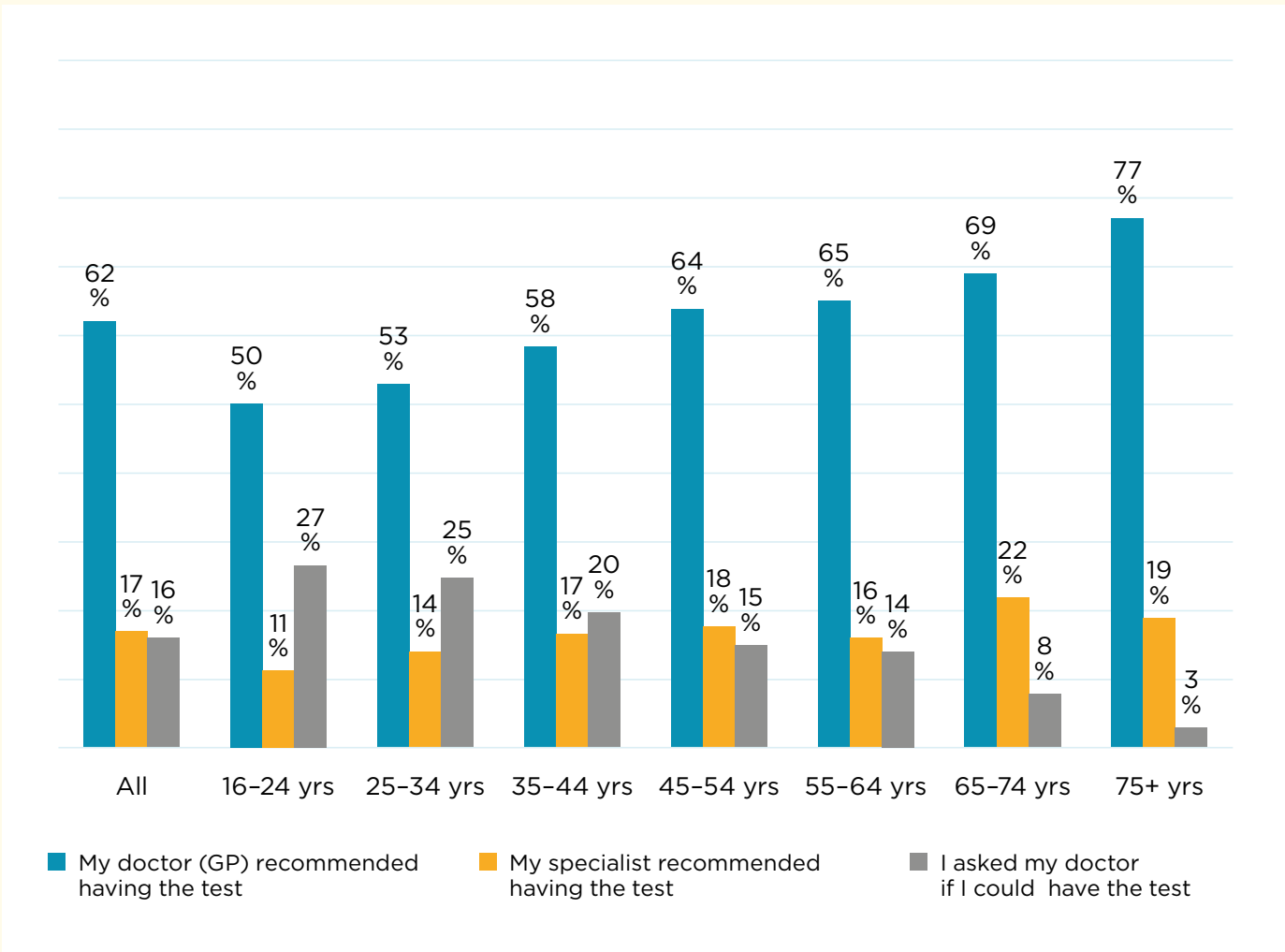
Those consumers aware of Choosing Wisely were more likely to have had a recent medical test³ and be between 16 and 34 years of age.

| | Aware of Choosing Wisely | General population |
|--------------------|--------------------------|--------------------|
| Had a medical test | 69% | 45% |
| Age 16–34 | 62% | 34% |

Why consumers have tests

| | |
|------------------------------------|-----|
| Healthcare provider recommended it | 79% |
| Consumer asked for it | 16% |

Older consumers were also less likely to ask for medical tests.



Reasons for having a medical test in the last 3 months

AWARENESS OF RISKS OF UNNECESSARY TESTS AND TREATMENTS

Agree with reducing unnecessary care but...

While 71% of consumers agreed with the concept of reducing unnecessary tests, 74% indicated that if they were sick, their doctor should conduct all available medical tests related to their condition.

| | Aware of Choosing Wisely | General population |
|----------------------------------------------------------------------------------------|--------------------------|--------------------|
| Agree that some tests can produce misleading results and lead to unnecessary treatment | 55% | 39% |
| Agree that having a medical test when not needed can be harmful | 53% | 33% |

‘...I think there is a bit of a trend of sometimes over prescribing at times. And the idea that somehow preventative measures might be the best course of action. Sometimes doing nothing could be the best course.’

Consumer vox pop interview participant

Consumers feel confident in asking questions about medical tests and being proactive in their healthcare

| | |
|-------------------------------------|-----|
| Confident in asking questions | 89% |
| Taking an active role in healthcare | 90% |

‘Because I want to know what I’m taking, what I am diagnosed with, what the side effects are.’

Consumer vox pop interview participant

1 - April 2015 surveys were responded to by 554 randomly selected GPs and 435 randomly selected medical specialists. Surveys were also promoted by colleges and societies. December 2015 surveys were responded to by 406 GPs and 337 specialists.

2 - Choosing Wisely related questions were included in the NPS MedicineWise National Consumer Survey which was responded to by 2581 consumers.

3 - Medical test was defined as including laboratory tests (eg blood tests) or imaging tests (eg X-rays and CT scans).

Appendix 2

Choosing Wisely Australia Advisory Group

- Associate Professor Richard King, AM,
Senior Medical Director,
Monash Health

Professor Meera Agar,
Director of Palliative Care,
Braeside Hospital, HammondCare

Dr Matthew Anstey,
Staff Specialist Intensive Care Physician,
Princess Margaret Hospital

Melissa Cadzow,
Consumer Representative

Darlene Cox,
Executive Director,
Health Care Consumers' Association,
Consumer Representative
- Associate Professor Adam Elshaug,
Health Care Policy,
Menzies School of Public Health

Dr Rob Hosking,
General Practitioner,
The Elms Family Medical Centre

Elizabeth Koff,
Secretary,
NSW Health (to June 2016)

Sally Marotti,
Intensive Care Specialist Pharmacist,
The Queen Elizabeth Hospital

Professor John Slavotinek,
Consultant Radiologist,
Repatriation General Hospital,
Flinders Medical Centre

Appendix 3

Choosing Wisely Australia members and supporters (April 2015 – November 2016)

| | |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| FOUNDING MEMBERS: | |
| Australasian College for Emergency Medicine (ACEM) | |
| Australasian Society of Clinical Immunology and Allergy (ASCIA) | |
| The Royal Australian and New Zealand College of Radiologists (RANZCR) | |
| The Royal Australian College of General Practitioners (RACGP) | |
| The Royal Australasian College of Physicians (RACP) | |
| The Royal College of Pathologists of Australasia (RCPA) | |
| 1. Austin Health |  |
| 2. Australasian Chapter of Sexual Health Medicine |  |
| 3. Australasian College for Emergency Medicine |  |
| 4. Australasian Society for Infectious Diseases |  |
| 5. Australasian Society of Clinical Immunology and Allergy |  |
| 6. Australian and New Zealand Association of Neurologists |  |
| 7. Australian and New Zealand College of Anaesthetists |  |
| 8. Australian and New Zealand Intensive Care Society |  |

| | |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| 9. Australian and New Zealand Society for Geriatric Medicine |  |
| 10. Australian and New Zealand Society of Palliative Medicine |  |
| 11. Australasian Chapter of Palliative Medicine |  |
| 12. Australian College of Nursing |  |
| 13. College of Intensive Care Medicine of Australia and New Zealand |  |
| 14. Consumers Health Forum of Australia |  |
| 15. Gastroenterological Society of Australia |  |
| 16. Gold Coast Health |  |
| 17. Haematology Society of Australia and New Zealand |  |
| 18. Healthdirect Australia |  |
| 19. Human Genetics Society of Australasia |  |
| 20. Monash Health |  |
| 21. Royal Adelaide Hospital |  |
| 22. Royal Australasian College of Surgeons |  |
| 23. Royal Brisbane and Women's Hospital |  |

| | |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| 24. Royal Perth Hospital |  |
| 25. Sir Charles Gairdner Osborne Park Health Care Group |  |
| 26. The Australasian College of Dermatologists |  |
| 27. The Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists |  |
| 28. The Australian Physiotherapy Association |  |
| 29. The Endocrine Society of Australia |  |
| 30. The Royal Australasian College of Physicians |  |
| 31. The Royal Australian and New Zealand College of Obstetricians and Gynaecologists |  |
| 32. The Royal Australian and New Zealand College of Ophthalmologists |  |
| 33. The Royal Australian and New Zealand College of Radiologists |  |
| 34. The Royal Australian College of General Practitioners |  |
| 35. The Royal College of Pathologists of Australasia |  |
| 36. The Society of Hospital Pharmacists of Australia |  |



**Choosing Wisely
Australia**

An initiative of NPS MedicineWise

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NPS MedicineWise**

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