

**Choosing Wisely
Australia**

An initiative of NPS MedicineWise

Partnering for change

2019 report





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 nationwide, changing attitudes and behaviours, and empowering all Australians to make the best possible healthcare decisions when they count.

Contents

CEO message

Our network

ACRRM focused on safe and high-quality care

The Quick-Wee way

Choosing Wisely in primary care

Partnering to evolve clinical practice

Reducing opioid-related harm in the community

Striving for meaningful change

Clinical case studies to promote recommendations

MD students explore being 'diligent doctors'

Physios promoting the Choosing Wisely concept

Champion Health Services

Hospital partnerships

Townsville doctor welcomes conversation about low-benefit care

4

6

8

9

11

11

12

15

16

17

18

19

19

22

Consumers at the centre

A tool to empower

Geelong GP helps patients to ask questions

Choose wisely – choose co-design

Partners in research

Collaborating with consumers is key for shared decision-making

5 questions and health literacy levels

Appendix

Recommendations in NPS MedicineWise programs

Choosing Wisely Australia Advisory Group

Our members and supporters

23

23

24

25

28

28

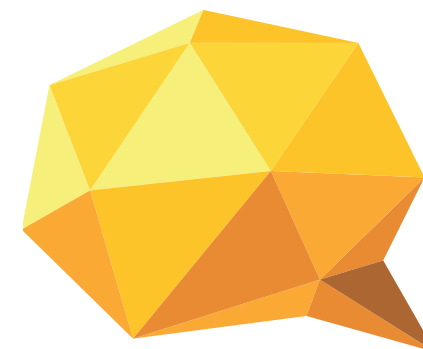
30

32

32

34

35



CEO message



Strong partnerships are integral to growing and sustaining a movement like Choosing Wisely Australia – to effectively influence a widespread

behaviour change towards best practice healthcare. The underlying premise of Choosing Wisely is quite simple: encouraging better conversations between healthcare providers and consumers about appropriate health management. As we know, the execution is a little more complex.

Since joining NPS MedicineWise as CEO in September last year, I have had the opportunity to engage with many

individuals and organisations working to improve the quality and safety of our healthcare system as members and supporters in the Choosing Wisely network. Engagement levels are high, which was evident at this year's National Meeting.

As convenor of Choosing Wisely in Australia, NPS MedicineWise actively supports and champions the initiative across primary care, in our hospitals and to consumers.

This includes promoting members' recommendations of healthcare to question, co-designing consumer resources and guiding implementation and evaluation activities. However, it is our partnerships with individuals, within organisations and between organisations that are really helping drive the initiative.

“The core focus of the Choosing Wisely movement is to encourage health professionals and patients to have candid conversations about available and appropriate health management options, with the long-term goal of ensuring fewer people undergo healthcare they don't need.”

This year we reached some important milestones which include:

- increasing our network from 69 to 88 members and supporters
- engaging nine consumer information and advocacy organisations
- hosting our largest National Meeting with more than 230 delegates
- member recommendations being included in seven NPS MedicineWise education programs for health professionals
- delivery of a new consumer resource for people prescribed opioids in hospital and through primary care
- supporting Safer Care Victoria to deliver a scale-up of Choosing Wisely in 11 health services
- local case studies being featured in an international Choosing Wisely resource on patient and public engagement.

I'm very pleased to present this year's Choosing Wisely Australia report, which offers a series of key insights from representatives across our network – on the impetus for joining the initiative, implementation projects, research, and future opportunities.

Adj A/Prof Steve Morris
CEO NPS MedicineWise

**Choosing Wisely
network increased to
88
members and
supporters**



Our network

Encouraging healthcare providers and consumers to have frank discussions about the appropriateness of tests, treatments and procedures is at the heart of the international Choosing Wisely movement, operating in more than 20 countries. The aim is to support consumers in choosing healthcare – to engage in shared decisions about their care – that is evidence-based, truly necessary, doesn't duplicate care and avoids harm.

As a movement to drive behavioural change around the use of unnecessary healthcare practices, Choosing Wisely Australia is only as strong as the commitment of its implementation partners.

Since NPS MedicineWise launched the Choosing Wisely initiative in Australia in 2015 with six of Australia's peak health professional colleges and societies and the Consumers Health Forum of Australia, the network has grown to 88 members and supporters – all playing an important role in addressing unnecessary and low-value healthcare practices.

NPS MedicineWise is a national implementation organisation with a mission to promote high-quality use of

medicines, tests and health technologies and to help people make better healthcare choices.

<http://features.commonwealthfund.org/choosing-wisely>

Choosing Wisely's success, as it has spread to 22 countries, has been attributed to six core governing principles, as well as a focus on professional values and the role of clinicians in resource stewardship, and on improving conversations to reduce unnecessary care.

“We have experience in looking at where there are evidence-practice gaps, identifying potential drivers behind why people are doing things that aren't evidence-based, and providing tools that might assist in changing behaviour.”

Dr Robyn Lindner – Client Relations Manager and Choosing Wisely Program Sponsor, NPS MedicineWise

Choosing Wisely Framework



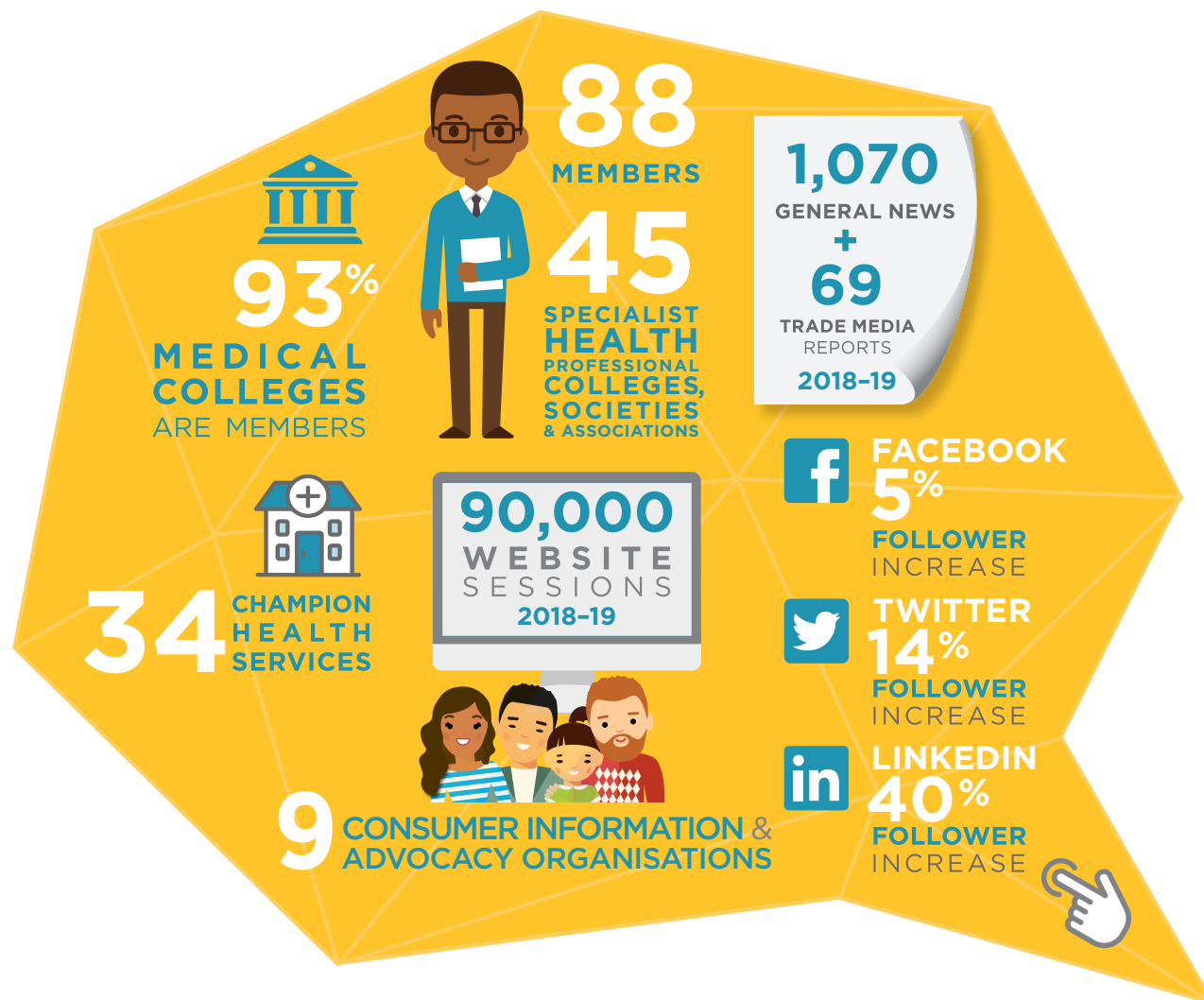
Choosing Wisely Australia operates under an agreed international framework with four key objectives:

- 1 Change clinician attitudes to practice
- 2 Foster consumer engagement and acceptance
- 3 Change key clinical practices
- 4 Promote alignment with the healthcare system

Governing principles



- 1 Health profession-led
- 2 Clear emphasis on improving quality of care and on harm prevention
- 3 Multidisciplinary
- 4 Patient-focused communication between health professionals and consumers
- 5 Evidence-based
- 6 Transparency in processes and supporting evidence



Read about the key elements of Choosing Wisely Australia adapted from Levinson W, et al. BMJ Qual Saf 2014;0:1-9.
<https://qualitysafety.bmj.com/content/qhc/early/2014/12/31/bmjqs-2014-003821.full.pdf?bmjqs-2014-003821v1>

ACRRM focused on safe and high-quality care



Dr Tony Lembke

Dr Tony Lembke is a GP in Alstonville, northern NSW, and a member of the Australian College of Rural and Remote Medicine (ACRRM). The college joined Choosing Wisely

Australia as an official member in July this year.

Dr Lembke said: *“For people living in rural and remote communities, access to clinical services comes at increased cost – in time and money and effort. This ‘burden of disease’ is higher. Therefore it is even more important that rural clinicians have the information they need to ensure that their care is effective and efficient.*

“When the evidence changes, it can take a long time for medicine to change its practice. ACRRM supports its members to deliver the highest quality and safest care in often challenging circumstances. We need rural clinicians to be confident that the care they provide ‘is right’.

“The Choosing Wisely campaign shares our aim of promoting evidence-based practice. We are very pleased to partner with our colleagues in other professional colleges and bring a rural perspective to assist our members to choose wisely.”

2019 National Meeting

Each year NPS MedicineWise hosts a Choosing Wisely Australia National Meeting which, this year, attracted more than 230 delegates from the health

profession, consumer information and advocacy organisations, researchers, medical students and policy makers from state and federal government. The event showcases implementation outcomes and offers a platform for stakeholders to share insights and ideas to take back to their organisations for future activities.

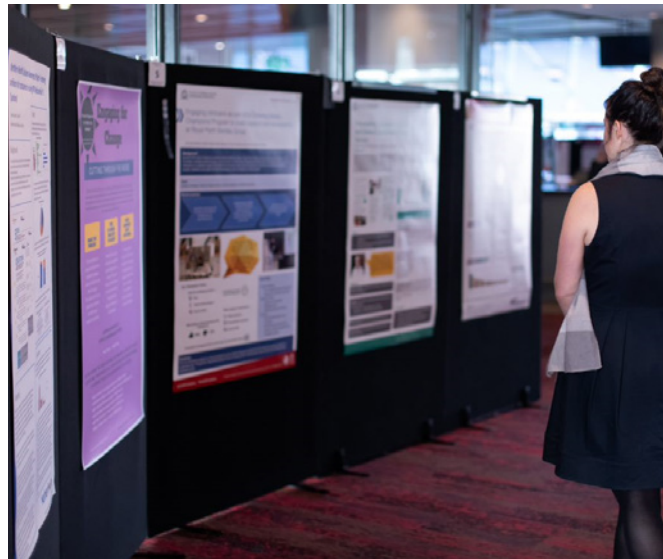
The 2019 National Meeting was held at the Melbourne Cricket Ground on 20 May, with keynote speaker Professor Trish Greenhalgh – Professor of Primary Care Health Sciences and Fellow of Green Templeton College at the University of Oxford – presenting on the challenges of behavioural change from the perspectives of implementation science, complexity science and social science.

“Half of what we are going to teach you is wrong, and half of it is right. Our problem is that we don’t know which half is which.”

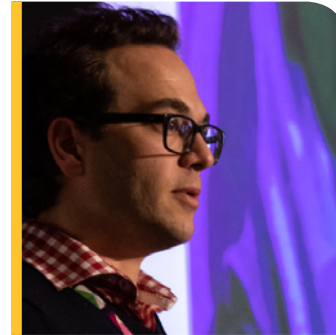
Charles Sidney Burwell, Dean of Harvard Medical School 1935–49

Craig Reucassel, comedian and writer/presenter of *War on Waste*, joined the event as Master of Ceremonies. He facilitated an informative and interactive day, while sharing his insights on behaviour change and how they might be applied to Choosing Wisely.

The full conference report, abstracts and key presentations are available at: <http://www.choosingwisely.org.au/members/2019-national-meeting>



The Quick-Wee way



Dr Jonathan Kaufman,
University of Melbourne,
Department of General
Practice

The outcomes of studies on the most practical and cost-effective methods of collecting urine samples from pre-continent infants suspected of urinary tract infections (UTIs) was presented to the

2019 National Meeting by Dr Jonathan Kaufman – a paediatric doctor and PhD student at the University of Melbourne’s Department of General Practice.

Dr Kaufman was awarded the event’s annual Best Student Abstract prize, which recognises an outstanding contribution to Choosing Wisely by a student in a health profession.

UTIs are among the most common bacterial infections in young children.

“UTIs can cause serious complications if they are not identified and treated properly, but the signs of UTI in young children are often very non-specific.”

Dr Jonathan Kaufman, University of Melbourne, Department of General Practice

Dr Kaufman's presentation – *Yes wee can: better urine sample collection for young pre-continent children* – outlined the challenges of gaining useful samples and the limitations of existing methods, particularly in a primary care setting.

Dr Kaufman said: *“UTIs can cause serious complications if they are not identified and treated properly, but the signs of UTI in young children are often very non-specific. You can't diagnose a UTI without a urine sample, but the problem is it's very difficult to collect a urine sample from young children who aren't yet toilet trained.”*

To combat conflicting advice on the best methods of sample collection and to avoid the time-consuming approaches of using clean catch and urine bags, and invasive

methods of catheter and needle collection, Dr Kaufman developed a simple, non-invasive technique known as Quick-Wee.

“The process involves using cold, wet gauze to gently rub the lower abdomen, which triggers reflex urination,” he said. *“It works quickly, so it's called Quick-Wee.”*

In a randomised trial involving 354 infants at Melbourne's Royal Children's Hospital, 31% of infants urinated within five minutes using Quick-Wee compared to 12% with the standard practice of just watching and waiting for a clean catch. A health economic analysis showed Quick-Wee was more cost-effective than other non-invasive methods, and a qualitative study identified barriers and enablers to best practice in primary care.

These findings have been incorporated into local and international guidelines and research translation is ongoing.



Dr Jonathan Kaufman receiving Best Student Abstract prize from Professor Trish Greenhalgh

Dr Kaufman said: *“Quick-Wee was more effective and more cost-effective compared to other non-invasive methods and is gentle for the child. So now when people ask when ‘can we Choose Wisely when we collect urine samples from young children,’ I can tell them ‘Yes Wee Can!’”*

[See the full presentation](#)

Choosing Wisely in primary care

Our partnerships with Australia's health professional colleges, societies and associations are delivering the latest evidence-based approaches to certain tests, treatments and procedures. Choosing Wisely is encouraging health professionals and consumers to discuss during consultations.

The advice, published in lists of *5 things clinicians and consumers should question*, is promoted through member networks and across Choosing Wisely Australia and NPS MedicineWise channels. The questions offer healthcare providers and consumers an important reference for conversations during consultations – to guide a conversation about appropriate healthcare management.

To date, 193 recommendations have been released, with the latest list developed by the Medical Oncology Group of Australia in May 2019 and released jointly under the Royal Australasian College of Physicians Evolve initiative and Choosing Wisely Australia. The new advice warns against the overuse of chemotherapy for patients with advanced cancer, urging doctors to instead prioritise symptom relief and palliative care.

Partnering to evolve clinical practice

Partnerships are at the core of the Royal Australasian College of Physicians (RACP) flagship initiative – Evolve. Evolve aims to support physicians to safely and responsibly phase out low-value tests, treatments and procedures where appropriate, provide high-value care to patients based on evidence and expertise, and influence the best use of health resources, reducing wasted expenditure.

By working in partnership with physicians, specialties, and Choosing Wisely, Evolve identifies a list of recommendations to reduce the 'Top Five' low-value practices

within a specialty. To date, Evolve has created 23 lists, and through its partnerships continues to raise awareness and support the implementation of these recommendations. In 2019, Evolve has also partnered with physicians to shape its strategic direction over the next three years, and to ensure that it continues to enable physicians to reduce low-value care.



RACP trainee Dr Gaurav Ghosh and Dr Lydia Scott FRACP, Broome hospital

Throughout 2019, RACP Fellows have shared insights from their research and implementation experiences to inspire and support more physicians to reduce low-value care. A/Prof Ian Scott spoke at the Internal Medicine Society of Australia and New Zealand (IMSANZ) Conference on the progress and prospects for Evolve and IMSANZ. At the RACP Congress 2019 there were several presentations relating to Evolve including Dr Suzi Riess's presentation on *Non-indicated acid suppression prescribing in a tertiary paediatric hospital: an audit and costing study*, Dr Rebecca Grainger's on *The evolution of Evolve*, and Matthew Kelly's on *Reducing inappropriate urine testing*. evolve.edu.au

Reducing opioid-related harm in the community

The harm caused by opioids is well-known in Australia and internationally; the misuse

of pharmaceuticals is now the greatest cause of drug-related death in Australia.

In 2016 the Society of Hospital Pharmacists of Australia (SHPA) proudly became the first pharmacy organisation to collaborate with Choosing Wisely Australia, releasing its recommendation against the use of low-dose codeine.

In the same year, SHPA was the only pharmacy organisation which unequivocally supported the proposal for the Therapeutic Goods Administration to upschedule medicines containing codeine so they would be available only by prescription, vocally supporting Pain Australia's 'Real Relief' campaign to inform Australians about the new access arrangements for codeine, why they are necessary, and alternative ways to manage pain. SHPA's Choosing Wisely recommendation against use of low-dose codeine was a part of its broad strategy to achieve better medicines safety and regulation.

The following year, as part of SHPA's

ongoing consultation with government, medical and consumer stakeholders, it held its inaugural Medicines Leadership Forum (MLF) to explore the broader issues of opioid-related harm stemming from hospitals. These discussions helped inform 33 key recommendations, outlined in SHPA's landmark *Reducing opioid-related harm* report.



SHPA Past President Prof Michael Dooley launched the landmark report *Reducing opioid-related harm* at Medicines Management 2018, the 44th SHPA National Conference.

In August this year, while opening SHPA's 2019 MLF, federal Health Minister the Hon Greg Hunt MP confirmed three important new medication safety policy measures, which correlate with these recommendations:

- 1 Mandating smaller pack sizes for opioids from 1 January 2020
- 2 Requiring better labelling, warnings and consumer information for opioid medicines
- 3 Placing restrictions on the use of fentanyl patches.

GP visiting programs highlight recommendations

Every year, NPS MedicineWise offers health professionals the opportunity to engage in national educational programs dedicated to particular areas of medicine use or medical testing. Increasingly, Choosing Wisely Australia recommendations from our member colleges, societies and associations are used to inform the programs – including this year in programs on thyroid disorders and opioids for chronic non-cancer pain.

These programs provide a valuable channel for NPS MedicineWise to grow awareness of Choosing Wisely principles and recommendations within primary care by integrating relevant advice into GP and consumer resources. In 2018–19, NPS MedicineWise conducted 30,777 educational visits with health professionals working in primary care.

Following the conclusion of each program, an evaluation is undertaken to determine the impact of behaviour change within a general practice.

Opioids and chronic non-cancer pain

On 1 October, educational visits began as part of a new national program about the use of opioids for chronic non-cancer pain (CNCP).



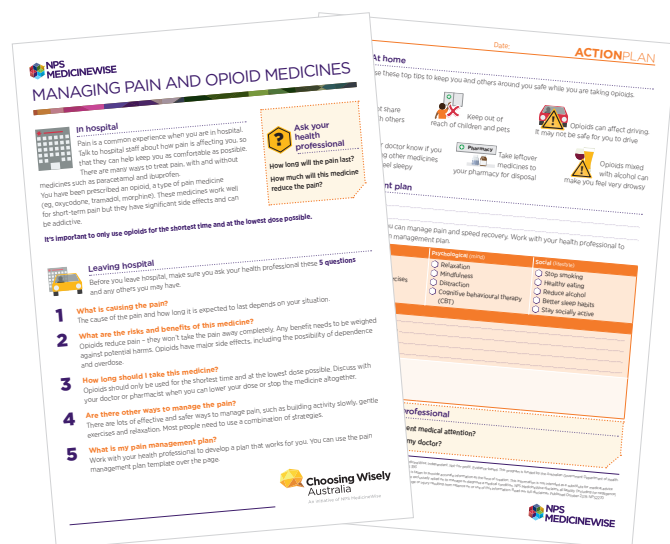
Titled *Opioids and the bigger picture when treating chronic pain*, the program incorporates a Choosing Wisely recommendation from the Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists, which advises not to continue opioid prescription for CNCP without ongoing demonstration of functional benefit, periodic attempts at dose reduction and screening for long-term harms.

The aim is to equip health professionals with tools and resources to reduce the harms of opioids while ensuring adequate pain management and quality of life for patients. It also aims to empower consumers to make more informed decisions about opioids through a suite of consumer-oriented resources.

New resource for people prescribed opioids

For the first time in Australia, the concept of the Choosing Wisely Australia *5 questions to ask your doctor* resource for consumers and carers has been used

as a conversation starter to specifically address quality use of opioids wherever they are prescribed – from hospitals to primary care. The goal is to support consumers to have the necessary conversations about opioids irrespective of where they are prescribed.



Hospital staff are being encouraged to provide a copy of *Managing pain and opioid medicines* to people prescribed opioids either as inpatients or on discharge to raise awareness about opioids use for short-term pain, their side effects and the risks of addiction.

The resources will also be promoted in primary care as part of the new NPS MedicineWise opioid education program.

The resource offers five questions people can ask about their pain medication, tips for taking opioids at home and a pain management plan.

The questions people are advised to ask their health professional before leaving hospital with opioids are:

- 1 What is causing the pain?
- 2 What are the risks and benefits of this medicine?
- 3 How long should I be taking this medicine?
- 4 Are there other ways to manage the pain?
- 5 What is my pain management plan?

NPS MedicineWise consulted with the Queensland Clinical Senate to develop this new resource. Testing, facilitated by the Queensland Opioid Stewardship Program and the Society of Hospital Pharmacists, was undertaken in the surgical wards and emergency departments of four

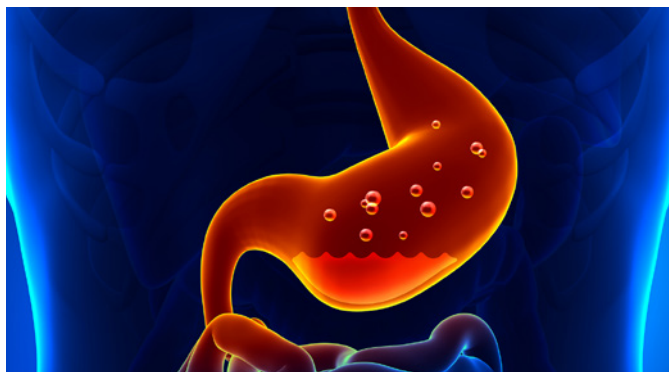
hospitals in Victoria and Queensland, by hospital staff and inpatients. It was also reviewed by the NSW Agency for Clinical Innovation, PainAustralia and GPs.

Visit choosingwisely.org.au or nps.org.au for a copy.

Choosing thyroid testing wisely

NPS MedicineWise has launched an educational program for GPs focusing on thyroid disorders in primary care. The program, which began in September, emphasises thyroid testing should only be requested after a detailed clinical history and targeted physical examination have suggested thyroid problems. Choosing Wisely Australia recommendations from the Royal Australian College of General Practitioners and the Endocrine Society of Australia have been incorporated.

Program grows GP awareness of PPI advice



An evaluation of a 2018 NPS MedicineWise educational program on the management of gastro-oesophageal reflux disease (GORD) with proton pump inhibitors (PPIs) in primary care found that the program has increased GP awareness of recommendations developed by the RACGP and published under the Choosing Wisely Australia initiative.

The *Starting, stepping down and stopping medicines* program included recommendations from the RACGP and the Gastroenterological Society of Australia.

One of the program's aims was to grow GP awareness of the RACGP recommendation

and GPs were encouraged to regularly review patients with GORD on PPIs, with the aim of reducing or ceasing altogether.

A GP survey conducted in February 2019 asked GPs to rate their agreement with the RACGP statement before and after participating in the NPS MedicineWise program. The result was a significant 13% increase in GP awareness of the RACGP recommendation after participating.



13% increase in GP awareness of RACGP recommendation

Striving for meaningful change

The Pharmaceutical Society of Australia (PSA) joined Choosing Wisely with six recommendations in December 2018. These recommendations focused on rational deprescribing, antimicrobial resistance and the evidence base for complementary medicines and homeopathic products.



Associate Professor Chris Freeman, PSA National President

PSA National President Associate Professor Chris Freeman led the working group that developed the recommendations.

"The Choosing Wisely recommendations provided an opportunity for PSA to lead on evidence-based improvements to practice through an initiative which helps amplify reach and impact," he said.

"We wanted our recommendations to result in meaningful change. This has meant integrating the recommendations into our advocacy work, our continuing professional development courses for pharmacists, and our conference programs.

“For example, on homeopathic products; it is clear there is no reliable evidence of efficacy. All health professionals should take the time to discuss with health consumers the lack of efficacy and the risks in rejecting or delaying other treatments known to be safe and effective. They don’t belong on pharmacy shelves and it’s time they were removed.

“We wanted to lead this change in pharmacy. After the recommendation was released and attracted mainstream media attention, we wrote to banner groups – the organisations who support community pharmacies in their business operations such as product range – to encourage the removal of these products from planograms and promotional material.

“The response of banner groups has been generally positive. A number of groups indicated they have ceased promotion and stocking of these products, while others have indicated they are in the process of doing so.

“We think this is a positive step and Choosing Wisely helped us achieve this.

“We will continue to follow up with banner groups and our pharmacist members in this area until homeopathic products are no longer on pharmacy shelves.”

Clinical case studies to promote recommendations

As part of Choosing Wisely Australia’s clinical educational activities, members are being encouraged to develop case studies that demonstrate the application of specific recommendations for use in their usual teaching modules.

The Australasian Society for Infectious Diseases (ASID) approached one of its members, Dr Brendan McMullan, a paediatric infectious diseases specialist and microbiologist at Sydney Children’s Hospital Randwick and a senior lecturer in the School of Women’s and Children’s Health at University of New South Wales, to lead the development of a case to promote the appropriate use of antibiotics for children presenting

at emergency departments with upper respiratory tract infections.

Case 1 – Rosie Chan

- 2 ½ year old, normally well child
- PMHx – Born at term in Australia to Chinese parents, immunized, started day-care last week
- No regular medications
- Presents with a 24 hour history of runny nose, cough, ‘off her food’, miserable
- On examination: red throat, left tympanic membrane red but not bulging, no discharge present
- Temperature 38.0, alert, exam otherwise normal





Using his research expertise in antimicrobial stewardship and resistance, perinatal infections and infections in immuno-compromised children and young people, Dr McMullan designed a case study outlining the typical treatment options a resident or registrar might consider. It also provided the rationale for including and excluding each option based on clinical evidence, showcasing ASID’s recommendation *Avoid prescribing antibiotics for upper respiratory tract infections* and incorporated patient education as an important component of management. ASID acknowledges contributions from its Board and its paediatric special interest group.

Choosing Wisely clinical cases studies, such as ASID's, can have wide-ranging applications, such as in the syllabus of medical and allied health professional schools, in health services and in specialty colleges as CPD and accreditation for fellows.

MD students explore being 'diligent doctors'

Hugh Blackie is a third-year medical student at the University of Melbourne and was instrumental in bringing Choosing Wisely Australia to this year's MD Student Conference in June.



Medical student Hugh Blackie

"We wanted to deliver a workshop that would allow students to work through tricky clinical scenarios, with an emphasis on choosing appropriate investigations

and treatments with a strong evidence base," Mr Blackie said.

Dr Christopher Leung – a gastroenterologist and Choosing Wisely Clinical Lead at Austin Hospital – facilitated *The Diligent Doctor* workshop and said the aim was to help students learn about the dangers of over-investigating and misprescribing, as well as understanding the clinical benefits of good decision-making.



Dr Chris Leung facilitates *The Diligent Doctor* Choosing Wisely workshop

"In medical school we often learn what we can order but not always when we should. Yet in order to become safe and effective

doctors, it is important that we understand this distinction," Dr Leung said.

"Medical students are active players in Austin Health's Choosing Wisely Committee, and we encourage them as future clinicians to own the future of our health service. This is not just about saving resources, it's about the right test and right management for the right patient. It's about translating evidence into best patient care," he said.

Mr Blackie said he believes it's incredibly important for medical students to become involved in Choosing Wisely.

"As we learn about conditions – understanding their pathogenesis, symptomatology, clinical presentation, investigation findings and management – I think it's vital we concurrently learn about the importance of being selective in our investigation choices, as well as clinically precise in our management," he said.

Physios promoting the Choosing Wisely concept



Phil Calvert, APA National President

Since joining Choosing Wisely Australia in 2016, the Australian Physiotherapy Association (APA) has been proactively promoting the initiative to its members, the media and on social media channels to its 66,000-plus followers.

“We are promoting the benefits of physiotherapy treatment and tailored exercise programs to combat chronic health conditions, while showing consumers they are at the centre of their health choices.”

Phil Calvert, APA National President

Its [six Choosing Wisely recommendations](#) cover imaging for complaints such as low back pain and acute ankle trauma, as well as manual therapy for frozen shoulders.

APA National President Phil Calvert said: *“We are promoting the benefits of physiotherapy treatment and tailored exercise programs to combat chronic health conditions, while showing consumers they are at the centre of their health choices. We are supporting their ability to make informed choices – or to at least ask further questions – about having surgery, scans or taking medications.”*

As part of this year’s World Physiotherapy Day (8 September) themed around chronic pain, the APA developed a suite of social media assets to debunk common misperceptions about health such as ‘surgery is my only chance of improvement’ and ‘strong pain killers will help manage my pain’ and promoted the benefits of physiotherapy as an effective alternative.

Champion Health Services

Hospital partnerships

An ever-increasing number of health services across Australia are implementing Choosing Wisely projects in their hospitals with teams of health professionals and consumers working together across departments, and entire organisations on local projects addressing unnecessary or low-value healthcare.

Our network of 34 Champion Health Services is supported by NPS MedicineWise to design, deliver and evaluate projects as determined by each individual site – from one project in a single department, to embedding Choosing Wisely principles in the performance framework for a whole organisation.

The flexible nature of the Choosing Wisely initiative is encouraging local innovation and is helping drive engagement among clinical teams and consumers.

To join, health services must be supported by executive and clinical leadership teams, agree to the core principles of the initiative and commit to implementation and evaluation

activities that support the principles.

Monthly webinars are held with project officers and clinical leads to share insights and ideas for further implementation.

A model for change

Following the successful implementation of Choosing Wisely at Austin Health, the Better Care Victoria Innovation Fund supported a Choosing Wisely Scaling Collaboration in 2017–18. In partnership with NPS MedicineWise and Austin Health, the collaboration ran from May 2018 to July 2019 and brought together 11 health services interested in becoming Choosing Wisely champion hospitals.

The primary objectives of the collaboration were to:

- establish a sustainable framework to measure low-value care and impact of interventions designed to reduce low-value care practices
- decrease the proportion of low-value care practices delivered in health services by reducing unnecessary requesting of tests, treatments and procedures.

The following 11 Victorian health services participated in the collaboration and engaged in addressing low-value care practices across pathology and imaging areas:

- 🟡 Albury Wodonga Health
- 🟡 Ballarat Health Services
- 🟡 Goulburn Valley Health
- 🟡 Latrobe Regional Hospital
- 🟡 Monash Health
- 🟡 Northern Health
- 🟡 Peninsula Health
- 🟡 The Royal Children's Hospital
- 🟡 St Vincent's Hospital Melbourne
- 🟡 Swan Hill Health
- 🟡 Western Health

The collaboration included workshops on identifying areas of low-value care, program design, governance, communications and engagement, implementation, sustainability and evaluation. This approach allowed participating health services to share challenges, approaches



Representatives of the Victorian Scaling Collaboration at the 2019 National Meeting

and resources in their implementation of Choosing Wisely.

A program and economic evaluation has been conducted with results due to be published at the end of the year.



“The only way to sustain this process is to embed a low-value care evaluation process within a funded, encouraged and supported framework in your institutions.”

Dr Douglas Travis, Chair Better Care Victoria Board



“We developed a comprehensive communication plan and this communication plan was the key to our success in both implementing Choosing Wisely, and ensuring its sustainability. This plan allows us to use the same principles regardless of whatever the project is going to be, across the organisation.”

Julia Firth, Operations Manager Medical Imaging and Pathology Contract, Western Health. 2019 National Meeting presentation

Toolkit to support implementation

Learnings from the Scaling Collaboration have informed a new [Implementation Toolkit](#), launched by NPS MedicineWise in May, to help guide other hospitals and health services as they adopt Choosing Wisely in their organisations.

State Government engagement

The scale-up of Choosing Wisely in Victoria has demonstrated the value of state governments investing in the initiative to improve resource stewardship and

patient outcomes in Australian hospitals. To date, there has been interest from health departments in Queensland, Western Australia, South Australia and Tasmania about how the initiative can be adopted more broadly in their individual states.

The [Queensland Clinical Senate's August Meeting](#) focused on reducing low-benefit care – identifying it was the responsibility of clinicians to lead a change that provides better patient care and a more efficient and sustainable health system. This includes empowering consumers and their healthcare providers “*to discuss what care is needed, and identify which interventions are helpful and which are not,*” as the Chairs’ report noted. Learnings from the

Choosing Wisely Australia Champion Health Services network were presented as part of a showcase of work on reducing the delivery of low-benefit care and identifying interventions that should be priorities for Queensland.

Creating an environment where people are comfortable to ask questions about tests, treatments and procedures is essential to an effective shared decision-making process. It’s encouraging to see government bodies like Public Health Services (PHS), within the Tasmanian Government’s Department of Health and Human Services, adopt this important messaging.

Since January, PHS has been encouraging healthcare providers to encourage and welcome questions from consumers as part of its [Communication and Health Literacy](#) work.

Townsville doctor welcomes conversation about low-benefit care



Dr Natalie Ly

An informed conversation between patients and clinicians about low-benefit

care is long overdue, according to Townsville Hospital emergency department deputy director Dr Natalie Ly.

The Townsville Hospital and Health Service has signed up to Choosing Wisely Australia which brings together medical colleges, societies and healthcare associations led by clinicians across the country.

Dr Ly said the ultimate vision of a meaningful discussion about low-benefit care would be in the best interests of patients.

“I see a real benefit in having a genuine conversation that just because a test is available it doesn’t necessarily mean it is beneficial and, in some cases, it can be harmful,” she said.

“We have 250 patients present to the emergency department every day and most people in our community expect that when they come to hospital, they will receive a test, procedure, or medication.

“The reality is that in busy emergency departments it can be a challenge to have this conversation with every patient and, at times, it may be easier to provide the

requested treatment, even though you know it is of little to no benefit to the patient.”

Choosing Wisely Australia provides community awareness and education about low-benefit care, which informs patients and arms them with the right questions to ask their care providers.

Dr Ly said everyday examples of low-benefit care included prescribing antibiotics for viral infections and requesting X-rays for ankle sprains.

“There are clinical diagnostic tools available to our clinicians to assess if any ankle has a sprain or fracture,” she said.

“By using these tools, we can avoid unnecessary imaging, unnecessary radiation exposure and unnecessary time spent in the department.”

Dr Ly said another benefit of Choosing Wisely Australia is that it gives a name to low-benefit care and she hopes it will make the community think about their care choices, including no test and/or treatment being a legitimate care option.

Consumers at the centre

A best practice healthcare system is one that places consumers at the centre of their own healthcare – a system that encourages and empowers people to obtain the information and advice they need to make an informed decision about any tests, treatments or procedures available to them. Patient-focused communication between health professionals and consumers is a key principle of Choosing Wisely and NPS MedicineWise is working to support its members and supporters with information and resources they can use in their conversations with consumers and consumer advocates.

A tool to empower


A key objective of the Choosing Wisely initiative is empowering consumers to ask questions about the tests, treatments and procedures available to them through their healthcare providers.

At the same time, the health profession is being encouraged to support, even drive, conversations that explore options, necessity and risks. This process is central to ensuring consumers are better informed about healthcare options and to facilitating a shared decision-making process.

To help guide consumers and carers in knowing what to ask healthcare providers, Choosing Wisely Australia has a list of [*5 questions to ask your doctor*](#), which has been translated into 12 other languages, including Chinese, Turkish, Spanish and Korean and promoted during this year's 2019 Be Medicinewise Week campaign by NPS MedicineWise.

5 questions to ask

- 1 **Do I really need this test, treatment or procedure?**
- 2 **What are the risks?**
- 3 **Are there simpler, safer options?**
- 4 **What happens if I don't do anything?**
- 5 **What are the costs?**



11,400+ visits to
the **5 QUESTIONS**



Geelong GP helps patients to ask questions



Dr Deb Harley

Dr Deb Harley is a general practitioner in a large Geelong practice and has been a keen supporter of the Choosing Wisely initiative over the past few years.

On referring her patients to specialist appointments, Dr Harley provides them with a wallet-sized copy of the Choosing Wisely 5 questions to ask your doctor resource which was developed

to encourage people to be more active participants in their own health management.

Dr Harley said: *"I encourage patients to familiarise themselves with the questions and pick out what might be important for them to ask their specialist – to provide guidance in what might be a time of stress."*

"It can also open people to the possibility that maybe an operation is not the only thing that will help their knee or shoulder."

Dr Harley has the 5 questions displayed in her consultation room. She explains to patients that Choosing Wisely is an international movement, led by medical colleges, and said her patients are receptive to the idea that there is an evidence-based philosophy behind the initiative.

"It's so much easier to say colleges support this approach and agree with the philosophy that patients should ask questions – that this is legit and acceptable," she said.

A greater uptake of Choosing Wisely in the local community is something Dr Harley is keen to see, and she advocates for the initiative through her roles with the local Primary Health Network and a hospital outpatient clinic.

"In our area it's almost imperative we have the local public health service on board, as we have such a close relationship with them and it would be so much easier for our patients if there was consistency across all sectors of healthcare," she said.

The 5 questions resource is available in a range of formats – posters, wallet cards and a digital format for television screens at <http://bit.ly/5toask>

Choose wisely – choose co-design



Choosing Wisely consumers receiving a tour of the ED at the kick-off of the Shared Decision-Making in the ED project by the Clinical Director of Nambour ED, Dr Dan Bitmead

Sunshine Coast Hospital and Health Service (SCHHS) recognises that for many people hospital is just one part of their healthcare journey, so helping consumers ask questions about their care and promoting broader collaboration with consumers is vital.

SCHHS established a Choosing Wisely Faculty in January 2019 with consumers, clinicians, their Primary Health Network

partner, clinical schools and other key support organisations for the Sunshine Coast. A number of senior executives, including the Chief Executive, who is an enthusiastic Faculty member, proactively participated in the development and implementation of initiatives which ensure that all levels of the organisation are Choosing Wisely.

Consumer representation is central to SCHHS's approach and it was thrilled five consumer representatives joined the Faculty from the kick-off meeting.

As a regular consumer of health services since his early twenties, consumer representative Matty Hempstalk chose to participate to help educate other patients. He said: *"They can take control of their own health and be part of the decision-making, not just take what the nurse or the doctor says needs to happen."*

Choosing Wisely Faculty Chair, Dr Morne Terblanche is excited by how consumers have helped shape the Sunshine Coast program.

"Our consumers have been a vital part of our Choosing Wisely team." Dr Terblanche said. "Their perspectives challenge our thinking as clinicians. Our consumers highlight the importance of getting the messaging right, inform our marketing material development, and identify areas for focus. The consumer voice has also been central in specific projects."

Shared decision-making is a national healthcare priority, clearly articulated in the National Safety and Quality Health Service Standards. In recognition of this and in response to an organisation-wide patient experience survey, the Shared Decision-Making in the Emergency Department project was born. A co-design approach to improvement was chosen, with consumers at the forefront of driving this initiative.

The project team adopted and worked through elements of the Health Service Co-Design methodology developed by its New Zealand colleagues at the Auckland District Health Board, to identify improvement opportunities. This included an extensive tour of Sunshine Coast

Emergency Departments, visioning and goal setting, idea development and touchpoint analysis.

Through this process, the team was able to filter 29 ideas across the patient journey into the following four key consumer-focused sub-projects:

- 🟡 Alternatives to Emergency Department
- 🟡 Understanding Emergency Department processes
- 🟡 Communication about options
- 🟡 Discharge and after.

Through the co-design approach, the team discovered that what it had assumed were the key issues weren't necessarily what consumers expected. These projects are continuing to develop, supported by consumer representatives and the project team is looking to roll out the methodology with other services.



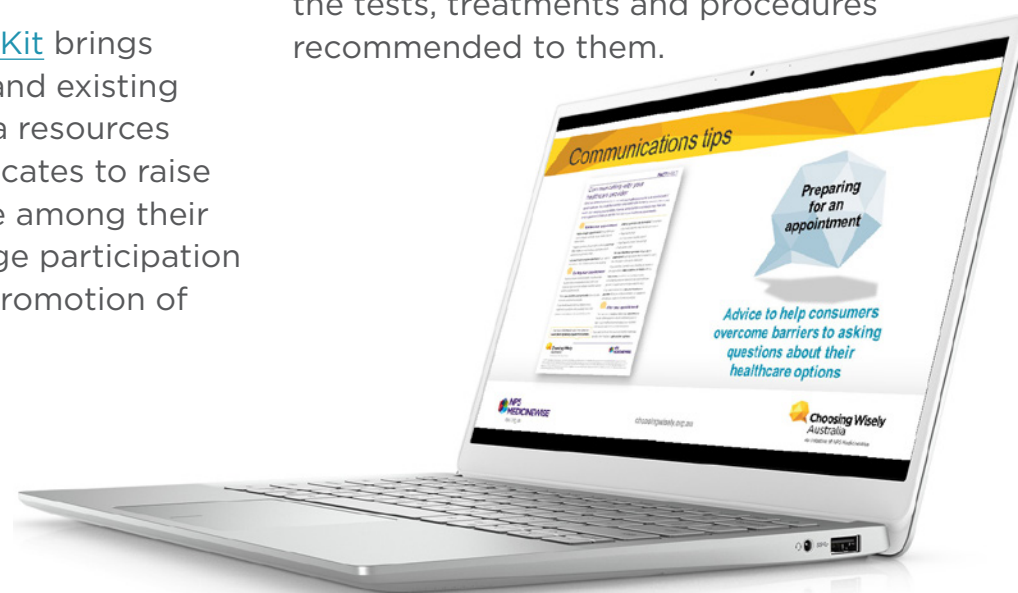
Conversation Starter Kit

This year NPS MedicineWise and the Consumers Health Forum of Australia delivered a new resource for individuals and organisations promoting better health outcomes for consumers.

The [Conversation Starter Kit](#) brings together a range of new and existing Choosing Wisely Australia resources for consumer health advocates to raise awareness of the initiative among their networks and to encourage participation – a new offering in their promotion of patient-centred care.

The kit was an outcome of collaborations between representatives from Primary Health Networks, consumers and health professionals as part of a Consumer Expert Working Group convened to develop new consumer-facing resources.

It is available as an online PDF with introductory guide and links to a short presentation, key messages, social media guide and an evaluation form. It also includes a new video encouraging consumers to ask their healthcare providers questions about the tests, treatments and procedures recommended to them.



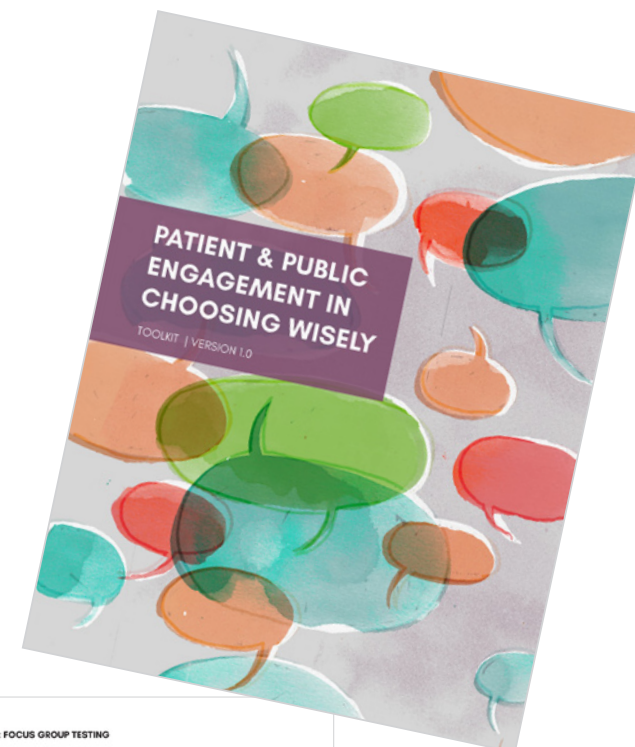
Engaging patients and the public

A toolkit focused on engaging patients and the public with Choosing Wisely was released by Choosing Wisely International this year.

[Patient & Public Engagement in Choosing Wisely](#) features 28 case studies from 12 countries describing ways individual initiatives have partnered, engaged, empowered and informed patients, consumers and the public.

Four case studies from Australia are included and cover:

- 1 Consumer stakeholder roundtables
- 2 A consumer working group to co-produce content for use in primary care settings
- 3 A national film competition to raise awareness of antibiotic overuse
- 4 Focus group testing of messaging for consumer-facing resources.



CASE 3.6 | AUSTRALIA: "SAVE THE SCRIPT" FILM COMPETITION

NPSMedicineWise, the organization that facilitates Australia's Choosing Wisely campaign, partnered with Tropfest, an Australian short film competition and the largest short film competition in the world. Together, they invited filmmakers to create a 45-second short film on the topic of antibiotic overuse. There was no specification on genre or style of film, and contestants were provided "need to know" facts and key messages on antibiotic overuse. The winner would receive over \$10,000 and the opportunity to receive global exposure via Tropfest's film festival and platforms. For NPS MedicineWise, the \$10,000 dollar prize was a small price to pay relative to what it would have cost to commission a video campaign. Likewise for contestants, the promotional increase was considerable given that Tropfest has kickstarted many filmmaking careers.

The campaign ran a complementary social media outreach effort "Every Day in May" to link to the Australian cold and flu season. Not only were film entries accepted "every day in May" but a fact on antibiotic overuse was shared daily via social media. To enter the campaign, contestants were asked to produce their video on social media (either via Vimeo, YouTube, Facebook, Twitter Video, and Instagram Video) and tag @npsmedicinewise and #savethescript in the description. Over 100 videos were submitted and a panel of judges helped select the 10 finalists and winner. The winning film, "The Pick Up," was played at Tropfest's outdoor film festival event that attracted around 100,000 attendees.

ENTER THE SHORT FILM COMP
WINTER IS COMING. NPS.ORG.AU
MAY 1st - 31st 2015

A video released by NPS MedicineWise to promote the competition

www.youtube.com/watch?v=9n0dM6rLm0Q

NPS MedicineWise had rights to use the top 10 films in its campaigns and events for two years. The winning video was used in the annual Antibiotic Awareness Week campaign and was even picked up by some TV channels. Since these films were used in a number of ways, the campaign couldn't directly measure their impact, but they were able to evaluate the antibiotics program as a whole. Overall, they are confident that this film competition had an impact on the success of its antibiotic overuse awareness work, and they hope to continue to leverage similar opportunities with future film festivals.

VIDEO
The winner of the competition, "The Pick Up."
The plot focused on a man "picking up" a woman at the bar named Gormyhea. After stating how glad he was to be able to take antibiotics, the woman informed him of resistance. This left the man visibly started and hesitant to pursue the encounter.

www.youtube.com/watch?v=9n0dM6rLm0Q

QUESTIONS FROM OTHER CAMPAIGNS:

FOUR QUESTIONS TO ASK YOUR DOCTOR BEFORE YOU GET ANY TEST, TREATMENT, OR PRESCRIPTION.

1) Do I really need this test, treatment or prescription?
2) What are the downsides?
3) Are there simpler, safer options?
4) What happens if I do nothing?

5 QUESTIONS TO ASK MY DOCTOR OR NURSE TO MAKE BETTER DECISIONS TOGETHER

1. What are the benefits?
2. What are the risks?
3. What are the alternatives?
4. What if I do nothing?

Wet zijn er mogelijkheden?
Wat zijn de voordelen en nadelen van de mogelijke keuzes?
Wat betekent dat in mijn situatie?

CASE 4.8 | AUSTRALIA: FOCUS GROUP TESTING

Consistent feedback from Australian consumers regarding the Choosing Wisely message is that a barrier to better conversations is that they do not always feel like they have permission to ask questions, with this barrier in mind, Choosing Wisely Australia has focused on developing and testing messaging that encourages patients to feel empowered to ask questions and seek more information from their health care provider.

One area of work has been to assess the challenges of using the 5 questions resource in hospital environments. The hospital environment carries particular challenges:

- Patients are more likely to be uncertain and anxious
- Patients feel less in control of the encounter
- Patients feel less certain as to who to ask questions

Given the complexity of this setting, NPS MedicineWise, the organization that facilitates Choosing Wisely Australia, conducted focus groups with both consumers and hospital health professionals to evaluate the effectiveness of concepts that were created to support an environment where people are encouraged to ask questions.

Two rounds of focus groups were conducted (see Table 1). Groups were asked about the concept formats, the message, and the use of imagery.

GENERAL PUBLIC FOCUS GROUP	HEALTH CARE PROFESSIONAL AND CONSUMER ADVOCATE FOCUS GROUP
Included patients and/or carers for a patient who have used hospital services in the past year	Included junior doctors, senior doctors, nurses, pharmacists, and consumer advocates

Major themes arising from the focus groups:

- Patients preferred concepts that welcomed questions but did not pressure people to ask them.
- Messaging that supported any question (rather than right or good questions) was preferred.
- Respondents wanted to see images of real healthcare professionals (not models or stock photos) that appear friendly.
- The use of wit or metaphor in the concepts was not supported; patients wanted messages that were literal and straight to the point.

POSTERS

Examples of the final images co-developed with hospital staff with feedback from the focus groups:

Got questions? We're listening

Got questions? We're listening

Partners in research

The Choosing Wisely initiative provides plentiful opportunities for researchers to explore new avenues for best practice in addressing unnecessary or low-value healthcare, as well as using existing resources to determine the most appropriate formats for people with differing levels of health literacy.



From left to right: Dr Jeremy Wellwood (Executive Director, Clinical Governance Education and Research | Choosing Wisely Sponsor); Aimee Ballantine (Project Manager, Choosing Wisely Program); Dr Meng Tan (Clinical Director, Diagnostic and Sub-specialty Services | Choosing Wisely Sponsor); Karlene Willcocks (Executive Director, Diagnostic and Subspecialty Services | Choosing Wisely Sponsor); Therese Kelly (PMO manager, Solution Delivery Service | Project Control Group committee member); Professor Margaret Shapiro (Clinical Advisory Group representative | Griffith University); Matthew Brooker (Manager Performance and Reporting Unit | Project Control Group committee member); Dr Adam Brand (Clinical Director, Digital Transformation Service/ Emergency Department SMO | Project Control Group committee member)

Collaborating with consumers is key for shared decision-making

Gold Coast Health is one of the busiest and fastest-growing health services in Australia. It has delivered more care through its emergency departments this year than any other health service in Australia.

The health service delivers a broad range of secondary and tertiary health services from three hospitals, two major allied health precincts and 13 community-located facilities.



Gold Coast Health has extended the scope of Choosing Wisely to include radiology, along with pathology, pharmacy and blood products

Academic partnerships between universities and teaching hospitals are crucial to sustaining and advancing clinical education and research. It's in the name – Gold Coast UNIVERSITY Hospital – it is a place of teaching and learning so that it can continuously deliver sustainable world class healthcare.

Gold Coast Health is working in partnership with other key agencies

to create a cultural shift toward health professionals and consumers engaging in conversations about what tests, treatments or procedures are really necessary – aiming to reduce low-benefit care.

Gold Coast Health has close working relationships with key personnel from Griffith and Bond universities, who play an important part in developing and

supporting the Choosing Wisely Program. Together with its partners, Gold Coast Health has a strong and connected Committee, providing strategic opportunities for collaboration and innovation generation

The Project Control Group collaborates with Professor Margaret Shapiro, who is a representative on the Consumer Advisory Group as well as being affiliated with Griffith University. Professor Paul Glasziou is from the Institute for Evidence-based Healthcare at Bond University. Both these partnerships with Gold Coast Health's Choosing Wisely Program are integral to ensuring that discussions between consumers and clinicians are supported and that patient play an important role in making decisions with their healthcare providers that are based on the best available evidence.

Gold Coast Health is also actively pursuing graduates from the universities to be a part of this culture change where these students will help introduce and evaluate the interventions delivered by the Choosing Wisely program.

5 questions and health literacy levels



Professor Kirsten McCaffery (left) and Dr Danielle Muscat

There's a positive consensus across the healthcare sector that Choosing Wisely Australia's *5 questions to ask your doctor* resource is valuable in guiding consumers

and carers in conversations with healthcare providers. But, what's the best format for people with low levels of health literacy?

Professor Kirsten McCaffery (Director) and Dr Danielle Muscat (Research Fellow and Westmead Lead) from the Sydney Health Literacy Lab at the University of Sydney's School of Public Health, have been examining the most appropriate methods of engaging consumers in a shared decision-making process with their healthcare providers, across differing health literacy levels.

About people's willingness to ask questions and engage in shared decision-making, Dr Muscat said: *"Previous research has shown adults with lower health literacy are less likely to ask questions and less likely to be involved in decisions about their health, so we wanted to explore whether health literacy plays a role in determining the effects of interventions such as these."*

The online pilot study involving 164 adults compared the Choosing Wisely Australia's *5 questions to ask your doctor* resource with a shared decision-making

"Previous research has shown adults with lower health literacy are less likely to ask questions and less likely to be involved in decisions about their health..."

Dr Danielle Muscat, Research Fellow and Westmead Lead from the Sydney Health Literacy Lab, University of Sydney's School of Public Health

preparation video – each alone and together. Participants were presented with a hypothetical low back pain scenario and randomised into one of the three intervention groups, stratified by level of health literacy.

Dr Muscat said: *“Early results suggested there might be an impact of different intervention types on decision-making outcomes and a role of health literacy in determining intervention effects.”*

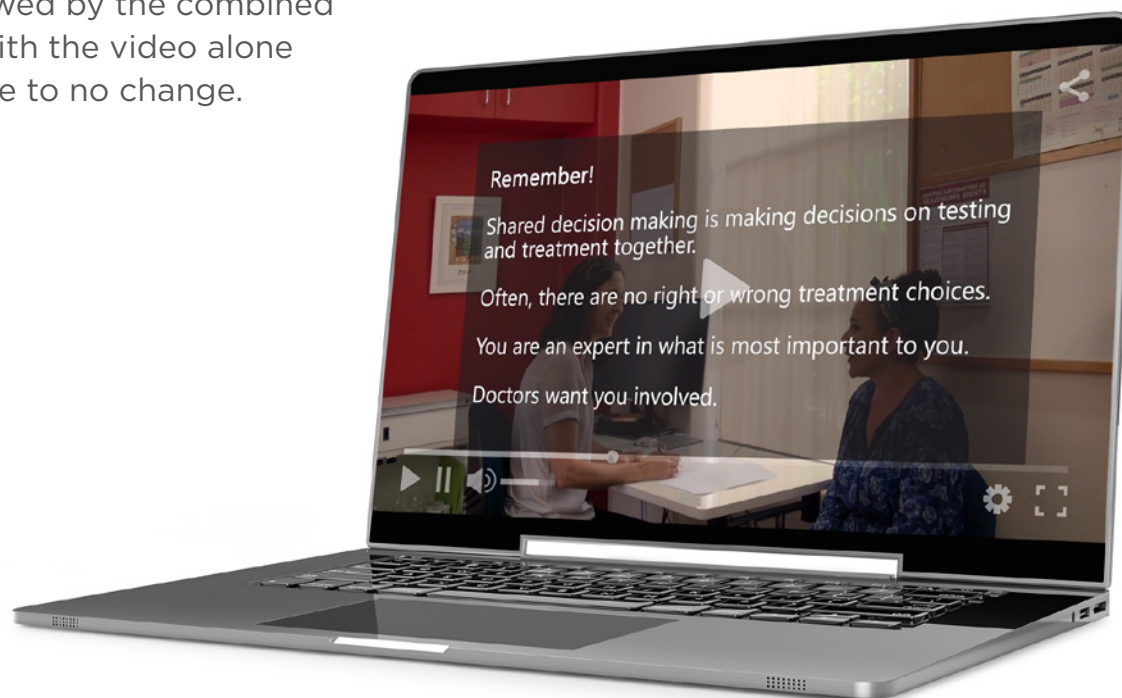
Participants who received the video had higher levels of self-efficacy to participate in shared decision-making compared with those who received the 5 questions resource alone.

For participants with higher health literacy, the combined intervention yielded the greatest change in intention to engage in shared decision-making, followed by the video, while presentation of the 5 questions resource resulted in no meaningful change.

However, for people with lower health literacy the 5 questions alone demonstrated the greatest change in intention, followed by the combined intervention, with the video alone resulting in little to no change.

With this information Professor McCaffery and Dr Muscat are working to develop a larger trial and, ultimately, move beyond online studies into implementation studies with patients in clinics.

“We are really excited to continue to work and further explore how we can tailor and optimise interventions to better support shared decision-making for all,” Dr Muscat said.





Appendix

Recommendations in NPS MedicineWise programs

The following table presents the NPS MedicineWise national education programs that have included Choosing Wisely Australia recommendations and the key findings of GP surveys to questions specifically relating to these recommendations.

Year	Program	Recommendations	College, Society, Association	Key findings
October 2019	Opioids and the bigger picture when treating chronic pain	On the use of opioids for chronic non-cancer pain	<ul style="list-style-type: none"> Faculty of Pain Medicine (FPM) of Australian and New Zealand College of Anaesthetists (ANZCA) 	Program in field
September 2019	Managing thyroid conditions in primary care	On screening and ultrasound	<ul style="list-style-type: none"> Endocrine Society of Australia Royal Australian College of General Practitioners (RACGP) 	Program in field
October 2018	Low back pain: Taking action	On not requesting imaging if there are no indicators of a serious cause for low back pain On medicine use in low back pain and early return to normal activity	<ul style="list-style-type: none"> Australasian Faculty of Occupational & Environmental Medicine (AFOEM) Australasian Faculty of Rehabilitation Medicine Australian Physiotherapy Association Australian Rheumatology Association FPM, ANZCA The Royal Australian and New Zealand College of Radiologists (RANZCR) 	10% increase in GP agreement with the recommendation on imaging after participating in an NPS MedicineWise educational visit

Year	Program	Recommendations	College, Society, Association	Key findings
July 2018	Starting, stepping down and stopping medicines – PPIs for GORD	On reducing long-term use of proton pump inhibitors for gastro-oesophageal reflux disease	 Gastroenterological Society of Australia (GESA)  RACGP	13% increase in GP agreement with the RACGP/GESA recommendation after participating in an NPS MedicineWise educational visit
February 2018	Neuropathic pain: Touchpoints for effective diagnosis and management	On avoiding the use of pregabalin and gabapentin for pain which does not fulfil the criteria for neuropathic pain	FPM, ANZCA	11% increase in GP agreement with the ANZCA recommendation after participating in an NPS MedicineWise educational visit
June 2017	Statins: optimising therapy, addressing intolerance	Assessing of cardiovascular risk before prescribing therapy for hypertension or dyslipidaemia.	RACGP	14% increase in GP agreement with the RACGP recommendation after participating in an NPS MedicineWise educational visit 24% increase in GPs first assessing a patient's absolute CV risk before prescribing
October 2016	Ankle and knee injuries: your imaging choices	Use of imaging to manage acute ankle and knee trauma	RACGP & RANZCR	26% increase in GPs who would 'always' apply the Ottawa Ankle Rules to determine whether an X-ray was required



| Choosing Wisely Australia Advisory Group

Dr David Rosengren, Chair

Executive Director and Senior Staff Specialist Emergency Physician
Royal Brisbane and Women's Hospital
Metro North Hospital and Health Service
(from July 2019)

Dr Matthew Anstey, Chair

Intensivist and Co-director of Research
Sir Charles Gairdner Hospital
(to June 2019)

Helen Belcher

Community Representative
(Hunter New England Local Health District Board)

Melissa Fox

Chief Executive Officer Health Consumers Queensland
(to November 2019)

Dr Frank Jones

Senior Partner Murray Medical Centre Mandurah
(to July 2019)

Professor Erwin Loh

National Chief Medical Officer and Group General Manager
Clinical Governance
St Vincent's Health Australia

Professor Nicholas Talley

Pro Vice-Chancellor (Global Research) and Laureate Professor
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A/Executive Director, Critical Care and Clinical Support
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Royal Brisbane and Women's Hospital
Metro North Hospital and Health Service

Dr Jeremy Wellwood

Director of Haematology Oncology
Gold Coast University Hospital

Our members and supporters



Colleges, societies and associations

 <p>Australasian Chapter of Sexual Health Medicine</p>	 <p>Australasian College for Emergency Medicine</p>	 <p>Australasian College of Sport and Exercise Physicians</p>	 <p>Australasian Faculty of Occupational and Environmental Medicine</p>	 <p>Australasian Faculty of Rehabilitation Medicine</p>
 <p>Australasian Paediatric Endocrine Group</p>	 <p>Australasian Society for Infectious Diseases</p>	 <p>Australasian Society of Clinical Immunology and Allergy</p>	 <p>Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists</p>	 <p>Australian and New Zealand Association for Neurologists</p>
 <p>Australian and New Zealand College of Anaesthetists</p>	 <p>Australian and New Zealand Society for Geriatric Medicine</p>	 <p>Australian and New Zealand Society of Palliative Medicine</p>	 <p>Australian and New Zealand Intensive Care Society</p>	 <p>Australian College of Nurse Practitioners</p>
 <p>Australian College of Nursing</p>	 <p>Australian College of Rural and Remote Medicine</p>	 <p>Australian Physiotherapy Association</p>	 <p>Australian Rheumatology Association</p>	 <p>Australia and New Zealand Child Neurology Society</p>

Colleges, societies and associations

 RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE	 CHIROPRACTIC AUSTRALIA		 endocrine society of australia	 FPM FACULTY OF PAIN MEDICINE ANZCA
Australasian Chapter of Palliative Medicine	Chiropractic Australia	College of Intensive Care Medicine of Australia and New Zealand	Endocrine Society of Australia	Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists
 Gastroenterological Society of Australia	 Haematology Society of Australia and New Zealand	 Human Genetics Society of Australasia	 Internal Medicine Society of Australia and New Zealand	 Medical Oncology Group of Australia
Gastroenterological Society of Australia	Haematology Society of Australia and New Zealand	Human Genetics Society of Australasia	Internal Medicine Society of Australia and New Zealand	Medical Oncology Group of Australia
 RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE	 Pharmaceutical Society of Australia	 RACGP	 ROYAL AUSTRALASIAN COLLEGE of Medical Administrators	 RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE
Paediatrics & Child Health Division of The Royal Australasian College of Physicians	Pharmaceutical Society of Australia	Royal Australian College of General Practitioners	Royal Australasian College of Medical Administrators	Royal Australasian College of Physicians
 ROYAL AUSTRALASIAN COLLEGE OF SURGEONS	 SOMANZ	 shpa	 THE AUSTRALIAN SOCIETY OF OTOLARYNGOLOGY HEAD AND NECK SURGERY	 THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS
Royal Australasian College of Surgeons	Society of Obstetric Medicine of Australia and New Zealand	Society of Hospital Pharmacists of Australia	The Australian Society of Otolaryngology Head and Neck Surgery	The Australasian College of Dermatologists
 The Royal Australian and New Zealand College of Obstetricians and Gynaecologists	 The Royal Australian and New Zealand College of Radiologists*	 The Royal Australian and New Zealand College of Ophthalmologists	 The Royal College of Pathologists of Australasia	 The Thoracic Society of Australia & New Zealand LEADERS IN LUNG HEALTH
The Royal and Australian and New Zealand College of Obstetricians and Gynaecologists	The Royal Australian and New Zealand College of Radiologists	The Royal Australian and New Zealand College of Ophthalmologists	The Royal College of Pathologists of Australasia	Thoracic Society of Australia and New Zealand

Hospitals and health services

 <p>Armada Kalamunda Group East Metropolitan Health Service</p> <p>Armada Kalamunda Group (Western Australia)</p>	 <p>Austin HEALTH</p> <p>Austin Health (Victoria)</p>	 <p>BENDIGO HEALTH</p> <p>Bendigo Health (Victoria)</p>	 <p>Cabrin</p> <p>Cabrin Health (Victoria)</p>	 <p>Government of Western Australia Child and Adolescent Health Service</p> <p>Child and Adolescent Health Service (Western Australia)</p>
 <p>Darling Downs Health</p> <p>Darling Downs Hospital and Health Service (Queensland)</p>	 <p>Government of Western Australia East Metropolitan Health Service</p> <p>East Metropolitan Health Service (Western Australia)</p>	 <p>easternhealth</p> <p>Eastern Health (Victoria)</p>	 <p>Gold Coast Health</p> <p>Queensland Government</p> <p>Gold Coast Health (Queensland)</p>	 <p>GVHealth</p> <p>Goulburn Valley Health (Victoria)</p>
 <p>Joondalup Health Campus Part of Ramsay Health Care</p> <p>Joondalup Health Campus (Western Australia)</p>	 <p>Mackay Hospital and Health Service</p> <p>Queensland Government</p> <p>Mackay Hospital and Health Service (Queensland)</p>	 <p>Metro South Health</p> <p>Queensland Government</p> <p>Metro South Health (Queensland)</p>	 <p>MonashHealth</p> <p>Monash Health (Victoria)</p>	 <p>Northern Health</p> <p>Northern Health (Victoria)</p>
 <p>Peninsula Health</p> <p>Peninsula Health (Victoria)</p>	 <p>The Royal Children's Hospital Melbourne</p> <p>Royal Children's Hospital (Victoria)</p>	 <p>RHH ROYAL HOBART HOSPITAL</p> <p>Royal Hobart Hospital (Tasmania)</p>	 <p>ROYAL PERTH BENTLEY GROUP</p> <p>Royal Perth Bentley Group (Western Australia)</p>	 <p>RBWH Metro North Hospital and Health Service</p> <p>Queensland Government</p> <p>Royal Brisbane and Women's Hospital (Queensland)</p>
  <p>SIR CHARLES GAIRDNER HOSPITAL</p> <p>OSBORNE PARK HOSPITAL</p> <p>Sir Charles Gairdner Osborne Park Health Care Group (Western Australia)</p>	 <p>NSW GOVERNMENT</p> <p>Health South Eastern Sydney Local Health District</p> <p>South Eastern Sydney Local Health District (New South Wales)</p>	 <p>Government of Western Australia Department of Health South Metropolitan Health Service</p> <p>South Metropolitan Health Service (Victoria)</p>	 <p>ST VINCENT'S HOSPITAL MELBOURNE</p> <p>St Vincent's Hospital Melbourne (Victoria)</p>	 <p>Sunshine Coast Hospital and Health Service</p> <p>Exceptional people. Exceptional healthcare.</p> <p>Sunshine Coast Hospital and Health Service (Queensland)</p>

Hospitals and health services

 <p>Swan Hill District Health <i>my hospital</i></p> <p>Swan Hill District Health (Victoria)</p>	 <p>ST JOHN OF GOD Midland Public & Private Hospitals</p> <p>St John of God Midland Public and Private Hospitals (Western Australia)</p>	 <p>Townsville Hospital and Health Service</p> <p>Townsville Hospital and Health Service (Queensland)</p>	 <p>WEST GIPPSLAND HEALTHCARE GROUP</p> <p>West Gippsland Healthcare Group (Victoria)</p>	 <p>Government of Western Australia WA Country Health Service</p> <p>Western Australia Country Health Service – Wheatbelt</p>
 <p>Western Health</p> <p>Western Health (Victoria)</p>	 <p>Wide Bay Hospital and Health Service</p> <p>Wide Bay Hospital and Health Service (Queensland)</p>	 <p>Government of South Australia SA Health</p> <p>Women's and Children's Health Network (South Australia)</p>	 <p>ACT Government Canberra Health Services</p> <p>Canberra Health Services</p>	

Consumer information and advocacy organisations

 <p>CHF Consumers Health Forum of Australia</p> <p>Consumers Health Forum of Australia</p>	 <p>healthdirect Australia</p> <p>Healthdirect Australia</p>	 <p>HealthCare Consumers</p> <p>Health Care Consumers Association ACT</p>	 <p>HCA SA Health Consumers Alliance of SA Inc</p> <p>Health Consumers Alliance of South Australia</p>	 <p>HEALTH CONSUMERS NSW</p> <p>Health Consumers NSW</p>
 <p>HCQ HEALTH CONSUMERS QUEENSLAND</p> <p>Health Consumers Queensland</p>	 <p>Building a Consumers Health Voice in Tasmania</p> <p>Health Consumers TAS</p>	 <p>HEALTH CONSUMERS COUNCIL YOUR VOICE ON HEALTH</p> <p>Health Consumers WA</p>	 <p>Tasmanian Government</p> <p>Public Health Services, Department of Health Tasmania</p>	

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Choosing Wisely Australia

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