

Principles practice

INTO

2020 report

anzocns
THE AUSTRALIAN AND NEW ZEALAND ONCOLOGY SOCIETY

5THINGS
CLINICIANS AND CONSUMERS SHOULD QUESTION

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

Choosing Wisely
Australia
An initiative of NPS MedicineWise

5THINGS
CLINICIANS AND CONSUMERS SHOULD QUESTION

Developed by the Haematology Society of Australia and New Zealand

5 QUESTIONS
Do I really need this test, treatment or procedure?
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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.

NPS MedicineWise receives funding from the Australian Government Department of Health to support Choosing Wisely Australia.

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CEO message

A strong focus for NPS MedicineWise during 2020 has been collaborating to create impact, and the Choosing Wisely Australia initiative certainly exemplifies this.

A flagship initiative of NPS MedicineWise in partnership with Australia's health professional colleges, societies and associations, Choosing Wisely Australia provides a framework for consumers, health professionals and organisations across the health sector to create impact together through encouraging better conversations between healthcare providers and consumers about appropriate health care.

On its five-year anniversary, I'd like to extend my thanks to the members and supporters of Choosing Wisely Australia for facilitating health profession-led change in putting the Choosing Wisely principles into practice to reduce unnecessary tests, treatments and procedures where evidence shows they provide no benefit, or in some cases, lead to harm.

We are proud to have such high engagement from health professionals, with 94% of Australian health professional colleges on board as members and the engagement of an ever-increasing number of Champion Health Services from around Australia. The network of Champion Health

Services, currently at 42 services and growing, is an integral part of driving reductions in unnecessary care across Australia.

“Be inspired by the successful initiatives undertaken by a number of health services highlighted in this report. I encourage you to consider how you could facilitate and contribute towards implementing these or similar initiatives into practice in your own health setting or situation.”

Significant progress has been made during the first five years of this initiative to build the Choosing Wisely Australia network, generate evidence-based recommendations, and then move beyond these recommendations to support implementation across hospitals and other health settings.

This last year and the implications of COVID-19 have presented significant challenges to health provision, health care professionals and consumers. Never before has it been more relevant to ensure that health care is necessary, relevant and based on current evidence, and Choosing Wisely principles have been at the centre of these discussions about necessary health care.

Throughout 2020, NPS MedicineWise national education programs have continued to support the integration of Choosing Wisely recommendations into practice.

The growing number of examples of successful Choosing Wisely projects serve as demonstration projects to support other clinicians and health services around the country to bring the Choosing Wisely principles and recommendations to life in their own practice or setting, and to support consumers to make informed decisions in partnership with their healthcare providers. It was excellent to see many of these projects sustained throughout the pandemic, and particularly to see the strong

consumer focus of projects like the Australasian College of Dermatologists' new *Your dermatology telehealth appointment – A five step guide* and Sir Charles Gairdner Hospital's Opioid Wisely project, as well as the enduring popularity of Choosing Wisely resources for consumers such as the '*5 questions to ask your doctor*'.

Be inspired by the successful initiatives undertaken by a number of health services highlighted in this report. I encourage you to consider how you could facilitate and contribute towards implementing these or similar initiatives into practice in your own health setting or situation.



Adj A/Prof Steve Morris

CEO, NPS MedicineWise

Leaders' messages

“There is an inherent simplicity and accessibility to Choosing Wisely that has been proven in the last 5 years to appeal to consumers and health professionals alike.

In seeking to reduce unnecessary treatments that may be harmful, Choosing Wisely aligns with the values of both health professionals and consumers. The messages are intentionally simple and plain language and, the implementation model encourages locally driven and contextualised programs that target local issues.

These factors have been key to the growth of Choosing Wisely Australia from an initial 6 health professional colleges and societies to a membership today of 97 organisations that includes health professional colleges, health services and consumer organisations.”



Dr Robyn Lindner

Partnerships and Stakeholder Relationship Manager,
NPS MedicineWise

“While many propose that we don’t do ‘change’ very well in healthcare, we have in fact seen enormous change in the last 5 years.

The criticality of value as a core contributor to sustainability of healthcare is recognised unquestionably, as is the need to co-design care in partnership with those that depend on it.

Improving value, avoiding waste and reducing harm is common conversation in the clinical space and the opportunities to empower patients to be confident to join in the conversation are limitless. Choosing Wisely may mean something different to everyone but everyone knows what it means to them. The change is subtle but it is real.”



David Rosengren

Executive Director and Senior Staff Specialist
Emergency Physician at Royal Brisbane and
Women’s Hospital

“Equipping consumers with the knowledge and confidence to ask questions and have informed discussions with their health care providers about the right treatment choices for them, their preferences and personal circumstances leads to better health care delivery that ensures quality, safety and, importantly, positive patient experiences.”

“Choosing Wisely Australia is building genuine collaborations throughout the healthcare system, reflecting the ongoing change in the relationship between consumers and healthcare providers. The real-world implications of the strategy are about behaviour change for everyone involved in consumer healthcare.

A clear and positive way of strengthening the way healthcare is delivered is to support patients as partners in their health and care. Equipping consumers with the knowledge and confidence to ask questions and have informed discussions with their health care providers about the right treatment choices for them, their preferences and personal circumstances leads to better health care delivery that ensures quality, safety and, importantly, positive patient experiences.

Health literacy measures such as the ‘5 questions to ask your doctor’ are simple and effective ways to implement the goals of Choosing Wisely.

The key to ongoing success will be to sustain these messages, promoting them to consumers through multiple channels and settings, and ensuring that variation in health literacy in the community is taken into account”.



Leanne Wells

CEO of Consumers Health Forum of Australia

Our network over five years

[Choosing Wisely Australia](#) is an initiative of NPS MedicineWise in partnership with Australia's health professional colleges, societies and associations.

In five years, since the campaign launched in 2015, it has grown from just 6 health professional colleges publishing 26 recommendations to a network of 97 health organisations with 207 recommendations and range of implementation activities to put recommendations into practice.

The Choosing Wisely community now includes 46 health professional colleges, 42 Champion

Health Services and 9 health consumer and information organisations.

Choosing Wisely 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.

These conversations start between health professional colleagues in the development of recommendations, and as the initiative has grown conversations about unnecessary care are happening within and between health services as they work to implement the recommendations into clinical practice.

[Locally led projects](#) across our Champion Health Services network are driving reductions in unnecessary care, and the resulting network of engaged clinicians and consumers has

been supported through regular communication and networking forums and resource sharing over the past five years.

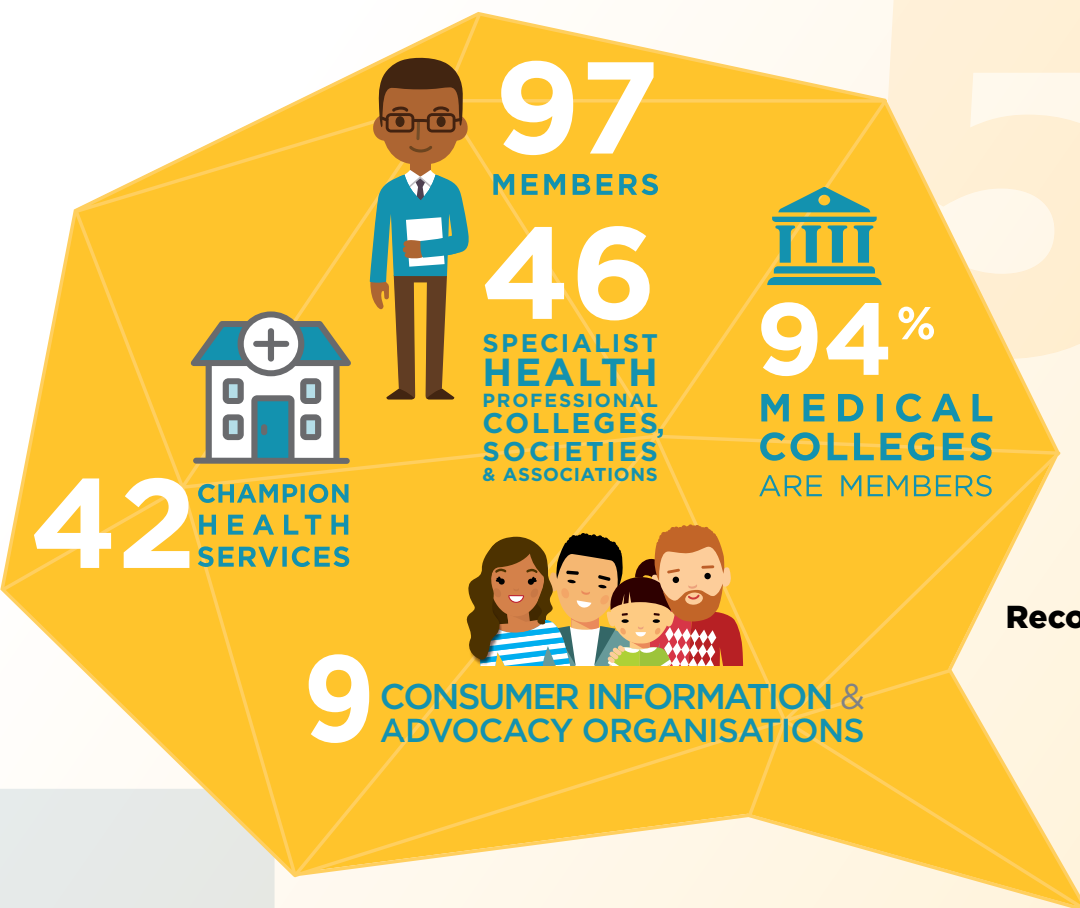
Resources such as the Choosing Wisely '[5 questions to ask your doctor](#)' are enabling conversations between health consumers and their health care providers, in [different languages](#) and through adaptations for specific conditions and treatments, such as the patient guide on [Managing pain and opioid medicines](#) which is helping address gaps in patient knowledge and expectations when leaving hospital with opioids.

Networking forums, face-to-face meetings and national meetings are also key in enabling conversations. While face-to-face meetings weren't possible in 2020 due to the COVID-19 pandemic, Choosing Wisely networks embraced new videoconferencing technologies through regular [Champion Health Services](#) webinars and quarterly meetings of health professional college, societies and associations.

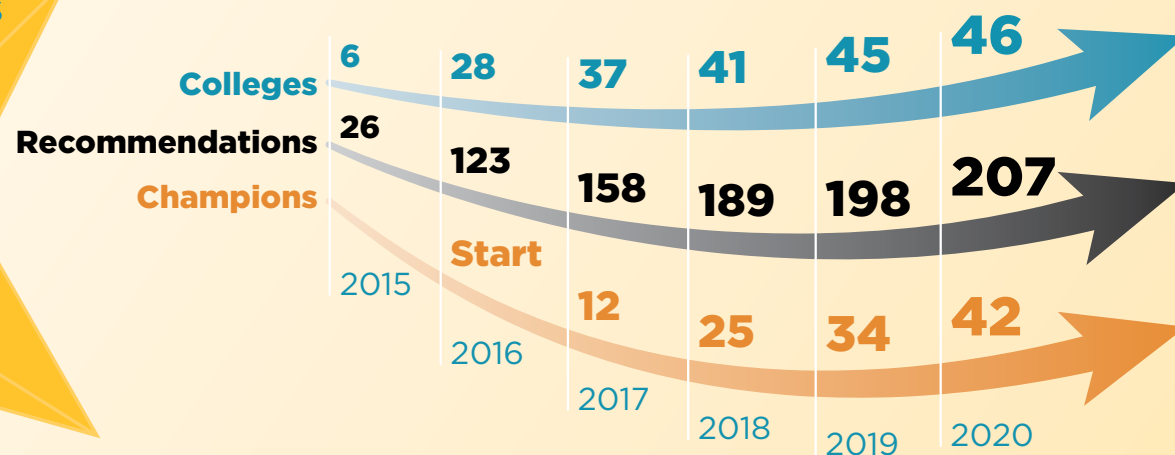
Become a Champion Health Service

www.choosingwisely.org.au/health-services





Growth of Choosing Wisely Australia since 2015



Governing principles

- 1 Health profession-led** to build and sustain trust
- 2 Emphasise quality of care** and harm prevention, rather than cost reduction
- 3 Patient-focused** efforts to engage them in conversations about their healthcare
- 4 Evidence-based** with ongoing review to ensure credibility
- 5 Multidisciplinary** including a range of health professionals
- 6 Transparency** in processes and supporting evidence

Choosing Wisely during COVID-19

Are you 'Choosing Wisely' during the pandemic?

The Australian health system came together during 2020 for a common goal and purpose to manage the COVID-19 pandemic, and the principles of the Choosing Wisely initiative were never more relevant than at this time.

Health professionals have had to be stewards of our finite health resources. Multidisciplinary teams united to adopt an evidence-based, patient-centred approach. As a result, our health system adapted in ways and with urgency unseen before.

For consumers, 'choosing wisely' and asking questions about medical treatments and tests is still important during a pandemic.

In response to this identified need, and in order to support and enable clinicians and consumers, and

assist them in accessing reliable information about and during the pandemic, Choosing Wisely Australia developed specific pandemic guidance for both [health professionals](#) and [consumers](#) based on current evidence.

Taking the format of five messages for consumers about their healthcare during a pandemic, and

five messages for doctors and other health professionals to provide guidance for appropriate tests, treatments and procedures during a pandemic, the messages are accompanied by links to supporting resources from other trusted, evidence-based sources such as state and federal governments and peak bodies.

Choosing Wisely Australia pandemic guidance for consumers

- 1 DO** keep talking to your doctor and other healthcare providers about how you can look after your own health.
- 2 DO** remember it's OK to ask questions.
- 3 DO** ask your doctor and other health workers if a test, treatment or procedure is necessary and if it can wait.
- 4 DO** keep a safe distance between yourself and others and DO wash your hands many times a day.
- 5 DO** look for safe facts that come from experts on your health problems and COVID-19.

Choosing Wisely Australia pandemic guidance for clinicians

- 1 **DO** encourage patients to seek usual care for new or existing medical conditions.
- 2 **DO** use health resources judiciously in accordance with guidelines.
- 3 **DO** test and manage patients with COVID-19 according to evidence-based guidelines.
- 4 **DO** consider telehealth as an option, where appropriate, to reduce risk of exposure to COVID-19 and to increase accessibility.
- 5 **DO** discuss goals of care with patients, especially those with limited life expectancy, in accordance with relevant Choosing Wisely recommendations.

Resource stewardship during a pandemic

Dr Simon Judkins, an emergency physician working in Victoria at Austin Hospital – part of the Choosing Wisely Australia Champion Health Service network – appeared as a guest on the NPS MedicineWise podcast series for health professionals, and spoke about ‘choosing wisely’ during the COVID-19 pandemic.



is necessary, have been relevant during the COVID-19 pandemic. Listen to the Choosing Wisely podcast episode or read the full transcript at www.nps.org.au/podcast or search ‘NPS MedicineWise’ via your favourite podcast app.

National COVID-19 Clinical Evidence Taskforce webinar

In June 2020 A/Prof Julian Elliott, executive director of the National COVID-19 Clinical Evidence Taskforce, presented to the Choosing Wisely Champion Health Services network about its living guidelines model and the recommendations and guidance available to support Australian health services.

The webinar contributed to building a dialogue between the Taskforce and the Choosing Wisely community of health professionals, consumers and carers, and health professional colleges to raise awareness of the living guidelines and to ensure insights from the ground are helping to identify gaps in current guidelines and their implementation.

**Australian
National COVID-19
Clinical Evidence
Taskforce**

NATIONAL
COVID-19
CLINICAL
EVIDENCE
TASKFORCE

Putting Choosing Wisely into practice

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.

In 2020 we supported and showcased implementation activities from health professional colleges, societies and associations, Champion Health Services and consumer organisations across the Choosing Wisely Australia network, while providing a one-stop-shop on the Choosing Wisely Australia website for toolkits and resources.

Visit us at www.choosingwisely.org.au to join the national conversation about reducing unnecessary tests, treatments and procedures.

Choosing Wisely recommendations

Australia's peak health professional colleges, societies and associations have developed lists of

[recommendations](#) of the tests, treatments, and procedures that healthcare providers and consumers should question. Based on the latest available evidence, these recommendations are available on our website, and can be grouped or searched in

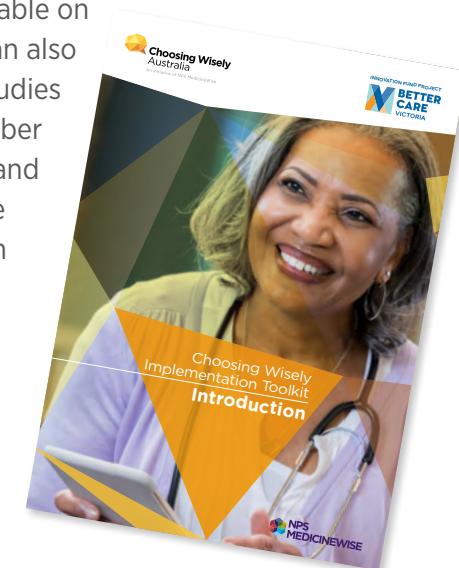


various ways including by organisation, branch of medicine, or condition or symptom. In a new feature introduced in 2020, the recommendations can now be downloaded all at once in a single spreadsheet format, suitable for anyone looking to implement Choosing Wisely broadly in their health service.

Tools and resources

Choosing Wisely Australia has a strong focus on supporting implementation, and one way we do this is through providing toolkits and relevant resources.

[Implementation resources](#) including our Hospital Implementation Toolkit and the Choosing Wisely in General Practice and Stewardship Toolkit for Clinical Educators are available on our website. You can also find clinical case studies developed by member colleges, societies and associations for use in clinical education programs.



The [‘5 Questions to ask your doctor’](#) resource helps guide consumers and carers towards useful questions they can ask their healthcare providers. This is available in multiple formats, including digital and printed formats, and as a downloadable poster in English and 12 additional languages. The [Conversation Starter Toolkit](#) is available to support consumer advocates in promoting Choosing Wisely and the ‘5 Questions to ask your doctor’ resources.



The website also includes [Consumer resources](#) and [Health Professional resources](#) sections which can be filtered by conditions, medications, treatments, tests, or medical branches.

Featured stories

Regular [‘Featured stories’](#) showcase how Choosing Wisely members are improving the safety and quality of healthcare for Australians. These

stories provide real world examples of how members and supporters are implementing Choosing Wisely projects and programs in local services, and sharing insights and lessons learned that can be enablers for others planning similar activities or new services looking for inspiration to join in.

Sharing our content

The Choosing Wisely digital network continues to grow with more followers to our social media channels and subscribing to our quarterly electronic newsletter. These channels are an effective means of getting Choosing Wisely tools, resources and

case studies to health professionals and consumers. [Facebook](#) has been the primary channel to promote consumer content, such as ‘5 Questions to ask your doctor’. [Twitter](#) and [LinkedIn](#) have been used to reach health professionals with updates about new recommendations, Featured Stories showcasing the implementation activities of Choosing Wisely members, and tools and resources to put Choosing Wisely recommendations into practice. Subscribe to our electronic newsletter at www.choosingwisely.org.au/register and follow us on Facebook [@ChoosingWiselyAustralia](#), on Twitter [@ChooseWiselyAU](#), on [LinkedIn](#) and help share our content.

Most popular Facebook post



Find the right questions to ask your doctor

Estimated reach:

39,000

<https://fb.watch/2TFimaFIZN/>

Implementing Choosing Wisely in Champion Health Services

Reducing low-value care in bronchiolitis at the Royal Children's Hospital

In its first Choosing Wisely project, the Royal Children's Hospital (RCH) in Melbourne aimed to reduce low-value care in bronchiolitis, a viral chest infection which leads to the highest number of hospital admissions in infants during winter.

Worldwide, guidelines advise against the routine use of chest X-ray (CXR) and bronchodilators in the management of bronchiolitis. CXR discriminates poorly between viral and bacterial chest infections and leads to much higher rates of antibiotic prescription, and the harms associated with bronchodilators outweigh the benefits in large systematic reviews.

This project looked to reduce both CXR and bronchodilator use for infants diagnosed with bronchiolitis in the hospital. The team at RCH examined large datasets from their Electronic Medical Record over a two-and-a-half-year period from April 2016 to October 2018, extracting data on all infants (aged 1–12 months) diagnosed with bronchiolitis in the Emergency Department. More than 3,500 patients with bronchiolitis were cared for at RCH hospital during this time. From this data, they were able to measure existing rates of CXR use of 11.2 per cent and bronchodilator use of 9.8 per cent. International best practice suggests that rates of 4 per cent and below are achievable. A local target rate of 5 per cent was set, aiming to reduce current rates by over 50 per cent.

For CXR, regular education sessions were introduced for staff who manage bronchiolitis. An audit and feedback tool was developed

and provided to frontline clinicians on a monthly basis which encouraged some friendly competition between the Emergency Department and General Medicine colleagues.

For bronchodilator use, an intervention was implemented through the hospital's Electronic Medical Record providing clinicians with a best-practice alert advising against the use of bronchodilators in any child under the age of one year. For both practices, rates of less than 5 per cent were achieved by January 2020.



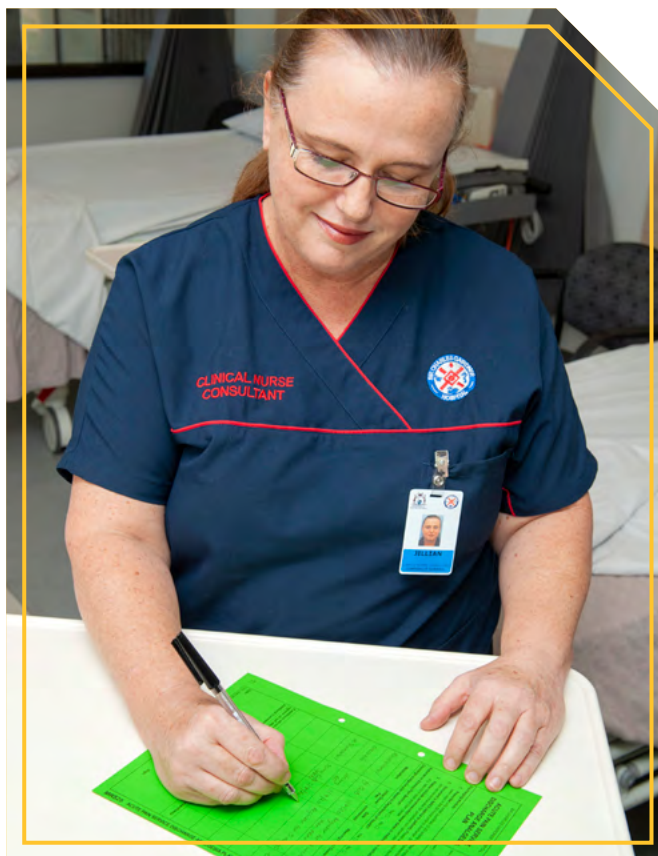
*Dr Joanna Lawrence,
Consultant Paediatrician*

RCH continues to monitor CXR and bronchodilator rates and provide the audit and feedback tool every month to the Heads of Department of both Emergency and General Medicine, while new staff to both units also receive education during their orientation program.

Opioid Wisely: reducing 'over-supply' of opioids at hospital discharge

Prescribing rates of opioids in Australia continue to rise, so to support best practice Choosing Wisely principles in opioid prescribing, the team from the Sir Charles Gairdner Hospital in Western Australia developed a new guideline and discharge form as part of a project titled Opioid Wisely. A baseline audit of three high-opioid prescribing wards (general surgical, orthopaedic and an acute medical ward) identified 86 patients who were prescribed with opioids at discharge, most of whom were administered opioids in the 24 hours prior to discharge (92%) and were also prescribed simple analgesia (94%). Of these patients, 61% of patients were opioid-naïve on admission to the hospital, only 24% had an opioid weaning plan documented on the discharge letter and only 16% of patients were supplied quantities less than a full box of PBS medication.

As most patients were not discharged with the routine input of the hospital's specialised Acute Pain Service (APS), the Discharge Analgesia Prescribing guideline was developed to support junior medical staff and pharmacists when completing or reviewing a patient's discharge script. The guideline is condition-specific and focuses on detailing the dose of medication, quantity supplied and considerations for simple analgesia options.



A bright green APS Discharge Analgesia Plan form was also developed to integrate the discharge medication, dose, quantity supplied and the weaning plan for patients discharged with APS involvement. Hospital-wide education was then delivered explaining the new guideline and form to all relevant prescribers and pharmacists in the hospital.

A re-audit was conducted about two years after the new guideline and form were implemented, which found there were 14% more patients prescribed lower quantities on discharge and 62% of discharge prescriptions reflected the APS form recommendations.

The team plans to continue to promote the APS green form and the guideline and also generate initiatives to promote the inclusion of a weaning plan in discharge documentation for all analgesia, while a second stage of the Opioid Wisely project will target chronic pain.

Jill Kemp, Clinical Nurse Consultant

Reducing risks for patients with intravenous cannulas at Sunshine Coast University Hospital

A nurse- and medical-led quality project to reduce antecubital fossa (ACF) inserted cannulas is improving patient care at the Sunshine Coast University Hospital emergency department (ED).

There is good evidence in the literature to suggest a significantly higher risk of infections with ACF insertions. Baseline data indicated 80 per cent of cannula-related bloodstream infections in the hospital are a result of an ACF cannulation.

Queensland Health guidelines state that cannulas should be inserted in the ACF only if clinically indicated. The preferred site is the forearm or back

of hand. Staff often put cannulas in the ACF because it's 'quick and easy' and insert them 'just in case', for example in case intravenous (IV) antibiotics may be required during the patient's admission.

The ACF project encourages doctors and nurses to assess whether there is a clear need to insert an IV cannula in the ACF. While IV cannulas are often an essential emergency medicine precursor to lifesaving treatment, they are not harmless. They can involve pain for the patients and there's a risk of infection.

Nurse and doctor ACF champions encourage engagement with the project and the guidelines, and the ACF project is part of the ongoing intern orientation and regular teaching of the ED's nurses and doctors.

Infectious Diseases Staff Specialist Dr Shradha Subedi said the ACF project encapsulates how the collaboration of clinical champions across multiple departments can improve patient safety and outcomes.

"It's really simple and makes a huge difference. When the project started in 2019

approximately 50 per cent of all cannulas inserted in the Emergency Department were placed in the ACF. Recent data demonstrates that rate is now 34 per cent," said Dr Subedi.

The Sunshine Coast Hospital and Health Service Vascular Access Surveillance and Education Team continues to audit this data quarterly and will monitor trends over the two year period of the project.

Think before you cannulate.

- Cannulate ACF for:** Resus, Large Fluid Bolus, Adenosine, CT Angiography, Studies
- Cannulate forearm or back of hand:** IV Medications, IV Fluid

For more information contact VASE (Vascular Access Surveillance and Education)
Email: sc.vase@health.qld.gov.au

THE ACF PROJECT
PVC Insertion and Management Procedure 000127

Sunshine Coast Hospital and Health Service
Choosing Wisely Australia
Queensland Government

Choosing Wisely across settings

Promoting ACEM recommendations in Queensland emergency departments

Providing targeted but widespread education and information to public hospital clinicians can be difficult, given the unrelenting stream of emails and multitude of posters in corridors.

Emergency departments (EDs) are particularly challenging environments, due to the diversity of care provided and the often fast-paced nature of the work. Clinicians on the floor rarely have time to trawl through emails to extract pertinent information, and posters soon become 'part of the furniture'. Global recognition of the need to practice value-based healthcare, particularly reducing low-value care, has made it more

important than ever to ensure that messaging reaches the coal face – where frontline clinicians can effect change. An approach encouraging a shared vision of responsible resource custodianship to contribute to sustainability of the health system is welcomed by clinicians and policy-makers.

The PROV-ED (PROmoting Value-based care in EDs) Project, a statewide project by Clinical Excellence Queensland, disseminates value-based ED initiatives to public hospital clinicians using display monitors in clinical areas of EDs across Queensland.

In 2020, the PROV-ED team developed slides with information on six Choosing Wisely [recommendations from the Australasian College for Emergency Medicine](#) (ACEM) and promoted this material using the PROV-ED display monitor infrastructure across the state.

The team used an online design tool to create new slides based on the existing templates. They also decided to include some general wellness and

mindfulness messaging to avoid sensory overload and attempted to sparingly integrate humour or quirkiness as a means of engaging clinicians and starting conversations. The onset of COVID-19 also presented a need to promote further relevant clinical and wellness messaging.

The screens are being very well received. The suite of slides is now extensive, and the team ensures slideshows are updated regularly at each site to ensure ongoing interest.

Jessica Carl, Acting Clinical Nurse Consultant, Royal Brisbane and Women's Hospital Emergency and Trauma Centre



Choosing Wisely in primary care through HealthPathways

HealthPathways, an online clinical and referral information portal, is one tool to help put Choosing Wisely into practice in primary care. Unlike traditional guidelines, HealthPathways is

“an agreement between primary and specialist services on how patients with particular conditions will be managed in the local context”.

This fits well with Choosing Wisely because recommendations, while written with action focused language like “Do not...”, are rarely absolutes. Choosing Wisely recommendations need to be implemented in a contextually relevant

way, considering the setting, target audience and applicable patients. HealthPathways is an opportunity to capture that context at a local level.

HealthPathways across Australia have begun linking to Choosing Wisely recommendations. Dr Jon Harper from the Central Queensland, Wide Bay, Sunshine Coast Primary Health Network is leading the way with integrating Choosing Wisely into HealthPathways. In 2020 he worked with Choosing Wisely to map recommendations to their local HealthPathways clinical topics. To help promote Choosing Wisely through HealthPathways he also developed a dedicated Choosing Wisely page which can include information about national, state and local initiatives and Choosing Wisely

resources such as the ‘5 Questions to ask your doctor’ resource.

With more HealthPathways teams expressing interest in collaborating with Choosing Wisely, we will be working to understand what is good practice and showcasing those initiatives throughout the HealthPathways Australia community in 2021.



Dr Jon Harper, General Practice Liaison Officer, Central Queensland, Wide Bay, Sunshine Coast PHN

Consumers at the centre

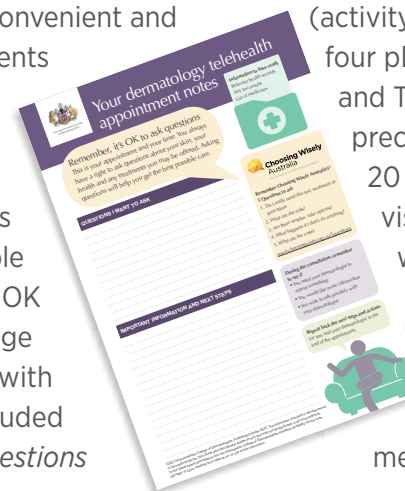
Your dermatology telehealth appointment – A five step guide

The COVID-19 pandemic has demanded new, integrated and innovative approaches to the way healthcare is delivered. Telehealth options have been part of the solution to ensure patients continue to access the care they need in a timely, safe and convenient way. For some areas of medicine, patients may have reservations about if they will get the same level of care. Empowering health consumers to continue to ask questions in the virtual environment is important to ensure they get the right healthcare for them.

The Australasian College of Dermatologists (ACD) seeks to empower Australians to access specialist care when it is needed and is committed to

informing the community about dermatologists and the conditions they treat. On World Skin Health Day in October 2020, the ACD launched a new guide *Your dermatology telehealth appointment – A five step guide*. The resource was designed to reassure patients that dermatology appointments by video or phone are a safe way to receive convenient and ongoing care and to support patients to prepare to get the most out of their appointment.

Enabling patients to ask questions helps them to get the best possible care. Reminding patients that it's OK to ask questions was a key message in the five step guide. Partnering with NPS MedicineWise, the guide included Choosing Wisely Australia's '5 Questions to ask your doctor'. The 5 Questions resource was included next to a section where patients could write down their questions ahead of time as well as take notes during the consultation and document next steps.



The new guide has been promoted via social media by the ACD, Choosing Wisely Australia and ACD's broader network of stakeholders and patient support groups. Social media activity for World Skin Health Day saw a marked and positive increase of up to 60% across social media analytics (activity, reach and engagement) across ACD's four platforms (LinkedIn, Facebook, Instagram and Twitter) compared with the immediately preceding period. Between 23 September and 20 October, there were 250–300 external visitors to the World Skin Health Day webpage, with 99 views/downloads of the telehealth guide via the website. Social media activity was complemented by traditional media outreach with the ACD media release reinforcing the message that it's OK to ask questions.

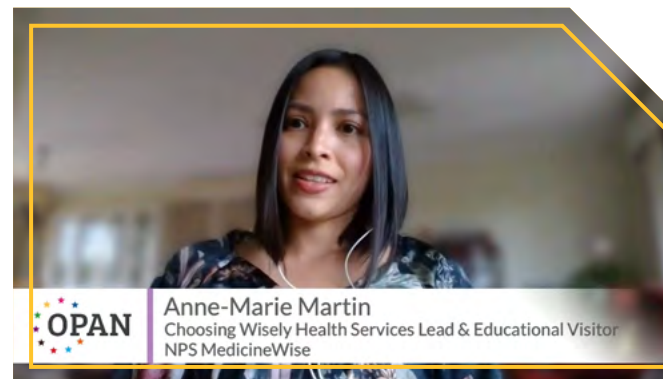


Empowering people with dementia to ask questions

Antipsychotic medicines are often used to treat changed behaviour associated with dementia, but the over-reliance on medicines including antipsychotics and benzodiazepines in the management of dementia is one of the areas of focus of the current Royal Commission into Aged Care Quality and Safety.

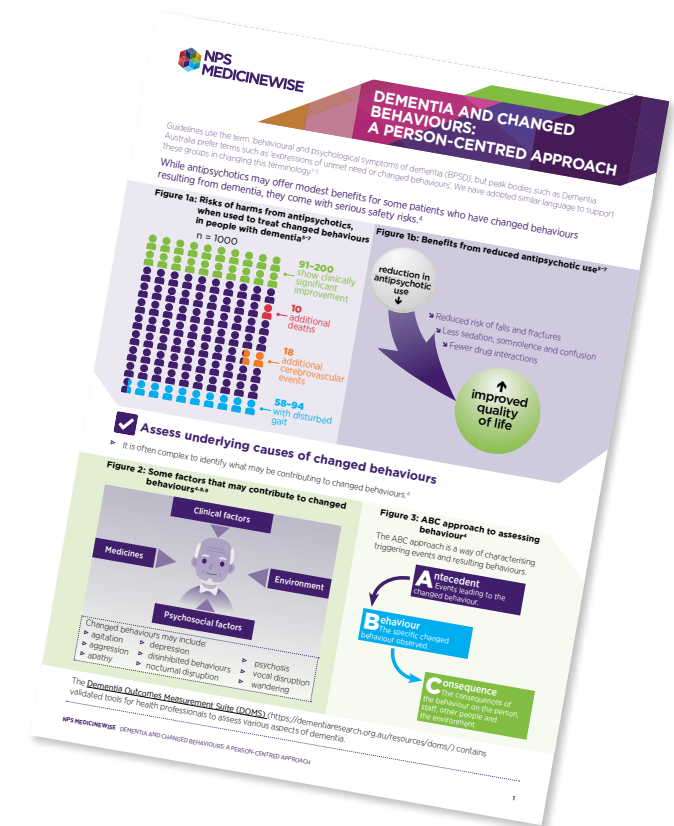
These medicines act on the brain and affects a person's mood, perception, behaviour or thoughts. They have a role in managing certain mental health conditions but for patients with dementia, there can be significant risks such as falls, additional cerebrovascular events and mortality. Using a patient-centred approach of non-pharmacological management strategies can be effective in managing changed behaviours. This is supported by the [Australian and New Zealand Society for Geriatric Medicine \(ANZGM\) recommendation](#) to not use antipsychotics as the first choice to treat behavioural and psychological symptoms of dementia, and this recommendation has been incorporated into the current NPS MedicineWise national educational program on [Dementia and changed behaviours: a person-centred approach](#).

In September 2020, NPS MedicineWise collaborated with the Older Person's Advocacy Network (OPAN) to talk to more than 700 health consumers and carers about medicines used in chemical restraint as part of OPAN's [Medication: It's your choice](#) webinar series. Anne-Marie Martin, a pharmacist and Choosing Wisely Australia Health Services Lead and Educational Visitor at NPS MedicineWise joined Dr Juanita Breen from the University of Tasmania and Dr Eddy Strivens from the Cairns and Hinterland Hospital and Health Service in Far North QLD for this panel discussion.



The panel discussed antipsychotic and other psychotropic medicines, including what they are and some of the common names for these medicines. Dr Breen presented research findings that psychotropics, including antipsychotics, are overused in Australian aged care facilities. Anne-Marie talked to the

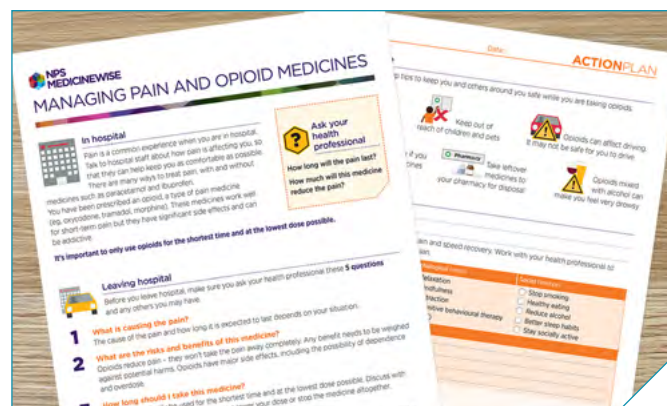
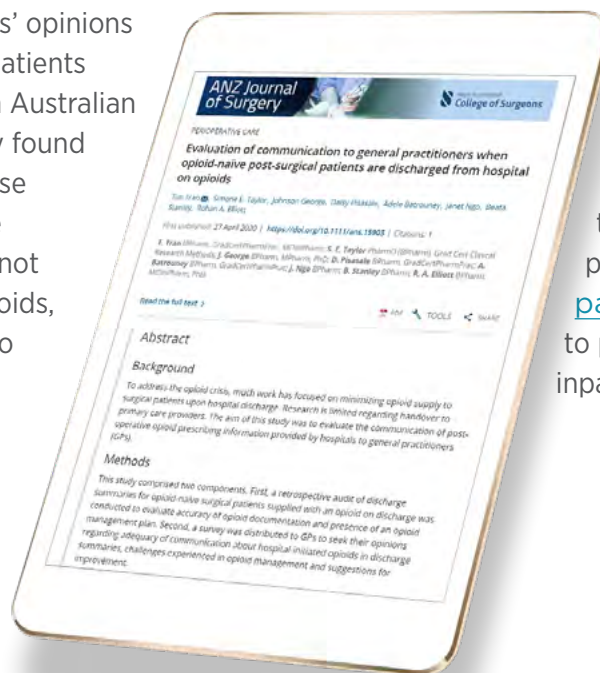
ANZSGM recommendation and how the Choosing Wisely [‘5 Questions to ask your doctor’](#) resource may be used in conversations with health professionals when a medication is started. The ANZSGM recommendation has been incorporated into the current NPS MedicineWise national educational program on antipsychotics.



Choosing Wisely resource addresses patient opioid knowledge gap

A [scientific paper](#) published in the Australia New Zealand Journal of Surgery in 2020 found that patients are not provided with sufficient information when discharged from a hospital with opioids – but a Choosing Wisely resource for use in hospitals is helping address this patient knowledge gap.

The research paper explored GPs' opinions about information provided to patients discharged with opioids from an Australian metropolitan hospital. The study found that these patients often had false expectations that they would be pain-free with opioids, they did not understand the risks around opioids, and they expected to continue to use opioids indefinitely.



A [survey](#) released by NPS MedicineWise in June supported the paper's findings, with, for example, only 37% of respondents knowing that using an opioid in the long term can actually make the pain worse.

Hospital staff are encouraged to provide the two-page Choosing Wisely patient guide on [Managing pain and opioid medicines](#) to people prescribed opioids as inpatients, or on discharge.

The guide aims to raise awareness about opioids use for short-term pain, their side effects and the risks of dependence.

The patient guide includes:

- Five questions people are encouraged to ask their health professional before leaving hospital with opioids. This has been modelled on Choosing Wisely Australia's '5 questions to ask your doctor' resource to guide better conversations with health professionals about tests, treatments and procedures
- Tips for taking and storing opioids at home
- A personal pain management plan that should be developed in conjunction with a health professional.

Helping medical practitioners and consumers to develop pain management plans that work is essential to achieve changes in attitudes and behaviours that will lead to safe and appropriate prescribing and use of opioids.

Integration into education and training

Choosing Wisely a key resource in RACGP online learning

Choosing Wisely aims to change attitudes and cultures within clinical practice about unnecessary tests, treatments and procedures. Integrating Choosing Wisely principles and recommendations into education programs is an opportunity to raise awareness, to influence practice and to build communication skills in discussing unnecessary care with patients.

The Royal Australian College of General Practitioners (RACGP) provides training for doctors practicing in Australia. Choosing Wisely principles and the quality use of medicines are critical, and the Choosing Wisely Australia resources are integrated throughout their online learning system 'gplearning'. Relevant Choosing Wisely Australia recommendations are

referenced throughout their modules on particular therapeutic areas, and Choosing Wisely Australia is referenced as a key resource for the general quality use of medicines modules 'Clinical Skills in General Practice' and 'Rational Use of Medicines'.

"The quality use of medicines is a critical skill that every GP needs to have," says Dr Ronald McCoy, Education Strategy Senior Advisor at RACGP.

"Our job is to direct doctors to reliable, best-practice resources. Choosing Wisely Australia resources support rational prescribing and testing and are used extensively in the RACGP online training program," he says.

Internationally trained medical professionals are required to complete these general quality use of medicines modules before they can practice in Australia. An important objective of this training is to ensure doctors who have trained or practised in other health systems, many of whom subsequently work in regional

or remote areas, have an understanding of the Australian system and how medicine is practised here.

Since the RACGP general quality use of medicines modules were introduced in January 2020, nearly 1,000 students have been directed to general Choosing Wisely Australia resources. People also access specific Choosing Wisely Australia recommendations while studying specific therapeutic topics – for example, low back pain and the place of diagnostic X-rays.



National Prescribing Curriculum

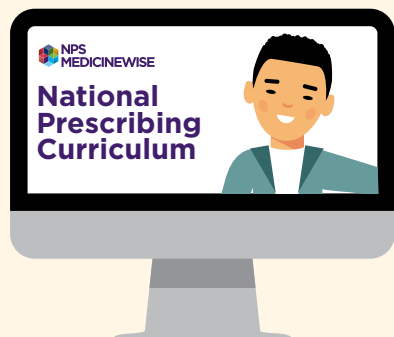
The National Prescribing Curriculum, facilitated by NPS MedicineWise, is a series of interactive case-based modules for students that encourage confident and rational prescribing. The modules are used by 94% of pharmacy schools and 95% of medical schools across Australia.

In 2017 NPS MedicineWise set out to include Choosing Wisely recommendations in relevant modules, as well as to incorporate broader Choosing Wisely principles, other relevant recommendations, and promote the Choosing Wisely '5 Questions to ask your doctor' resource for patients.

Now the [National Prescribing Curriculum](#) is playing a key role in raising awareness of Choosing Wisely principles, recommendations and resources and helping to shape the next generation of health care providers to be good resource stewards. Since 2018, 30 Choosing Wisely recommendations and the Choosing Wisely '5 Questions to ask your doctor' resource have been implemented in 27 National Prescribing Curriculum modules.

Between 2018 and June 2020, 15,165 students completed 132,967 National Prescribing Curriculum modules.

Students complete these modules early in their career so including the Choosing Wisely '5 Questions to ask your doctor' in every module has been a way to influence the attitudes of the next generation of health care providers' and to develop their communication skills to discuss health care decisions with their patients.



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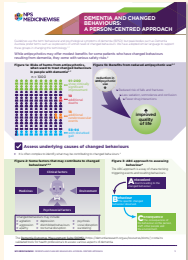
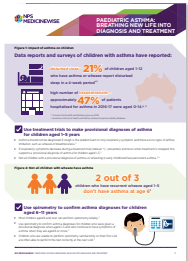


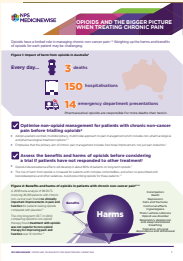
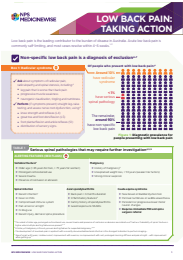
Education in primary care

Every year health professionals are offered the opportunity to engage in NPS MedicineWise's national educational programs dedicated to particular areas of medicine use or medical testing. Choosing Wisely Australia recommendations from our member colleges, societies and associations are used to inform the program development and integrated into the program resources. Evaluations of these programs have consistently found improvements in awareness of the relevant Choosing Wisely recommendations by 10% or more as well as reported changes to behaviours in early programs. Analyses of Pharmaceutical Benefits

Scheme (PBS) / Medicare Benefits Schedule (MBS) data to assess changes to dispensing or service volumes and associated cost savings have demonstrated the impact of previous programs.

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

Year	Program	Recommendations	College, Society, Association	Key findings
2020	 <p>Dementia and psychotropic medicines</p>	On not prescribing antipsychotics in behavioural and psychological symptoms of dementia	<ul style="list-style-type: none"> Australian and New Zealand Society of Geriatric Medicine The Society of Hospital Pharmacists of Australia 	Program in field
2020	 <p>Asthma and children: diagnosis and treatment</p>	On not prescribing combination therapy initially in mild to moderate asthma	<ul style="list-style-type: none"> Thoracic Society of Australia and New Zealand 	Program in field

Year	Program	Recommendations	College, Society, Association	Key findings
2019	 <p><u>Opioids and the bigger picture when treating chronic pain</u></p>	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) 	<p>14% increase in GP agreement with the recommendation on opioid prescribing for chronic non-cancer pain after participating in an NPS MedicineWise educational visit.</p> <p>PBS analysis pending.</p>
2018	 <p><u>Low back pain: Taking action</u></p>	<p>On not requesting imaging if there are no indicators of a serious cause for low back pain</p> <p>On medicine use in low back pain and early return to normal activity</p>	<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) 	<p>10% increase in GP agreement with the recommendation on imaging after participating in an NPS MedicineWise educational visit.</p> <p>25% increase in GPs who would rarely or never order imaging to confirm a diagnosis when managing a patient with low back pain.</p> <p>MBS analysis pending.</p>

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 Sarah Dalton

Paediatric Emergency Physician, The Children's Hospital at Westmead



Dr Simon Morgan

General Practitioner and Medical Educator GP Synergy, Newcastle



Dr Helen Belcher

Community Representative (Hunter New England Local Health District Board)



Deb Letica

Consumer Representative



Jessica Toleman

A/Executive Director, Critical Care and Clinical Support Services, Royal Brisbane and Women's Hospital Metro North Hospital and Health Service



Professor Erwin Loh

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



Dr Jeremy Wellwood


Director of Haematology Oncology, Gold Coast University Hospital

Our members and supporters

Hospitals and health services

 Armada Kalamunda Group East Metropolitan Health Service Armada Kalamunda Group (Western Australia)	 Austin HEALTH Austin Health (Victoria)	 BENDIGO HEALTH Bendigo Health (Victoria)	Caboolture Hospital (Queensland)	 Cabrini Cabrini Health (Victoria)
 Calvary Public Hospital Bruce Calvary Public Hospital Bruce (Australian Capital Territory)	 ACT Government Canberra Health Services Canberra Health Services	 Government of Western Australia Child and Adolescent Health Service Child and Adolescent Health Service (Western Australia)	 Darling Downs Health Darling Downs Hospital and Health Service (Queensland)	 Government of Western Australia East Metropolitan Health Service East Metropolitan Health Service (Western Australia)
 easternhealth Eastern Health (Victoria)	 Gold Coast Health Queensland Government Gold Coast Health (Queensland)	 GVHealth Goulburn Valley Health (Victoria)	 Health Illawarra Shoalhaven Local Health District Illawarra Shoalhaven Local Health District (New South Wales)	 Joondalup Health Campus Part of Ramsay Health Care Joondalup Health Campus (Western Australia)
 TASMANIAN HEALTH SERVICE Tasmanian Government Launceston General Hospital (Tasmania)	 Mackay Hospital and Health Service Queensland Government Mackay Hospital and Health Service (Queensland)	 Mercy Health Mercy Health (Australian Capital Territory)	 Metro South Health Queensland Government Metro South Health (Queensland)	MonashHealth Monash Health (Victoria)

Hospitals and health services

 <p>Northern Health (Victoria)</p>	 <p>Northern Sydney Local Health District (New South Wales)</p>	 <p>Peninsula Health (Victoria)</p>	 <p>Royal Children's Hospital (Victoria)</p>	 <p>Royal Hobart Hospital (Tasmania)</p>
 <p>Royal Perth Bentley Group (Western Australia)</p>	 <p>Royal Brisbane and Women's Hospital (Queensland)</p>	 <p>Sir Charles Gairdner Osborne Park Health Care Group (Western Australia)</p>	 <p>South Eastern Sydney Local Health District (New South Wales)</p>	 <p>South Metropolitan Health Service (Victoria)</p>
 <p>St John of God Midland Public and Private Hospitals (Western Australia)</p>	 <p>St Vincent's Hospital Melbourne (Victoria)</p>	 <p>Sunshine Coast Hospital and Health Service (Queensland)</p>	 <p>Swan Hill District Health (Victoria)</p>	 <p>The Prince Charles Hospital (Queensland)</p>
 <p>Townsville Hospital and Health Service (Queensland)</p>	 <p>West Gippsland Healthcare Group (Victoria)</p>	 <p>West Moreton Health (Queensland)</p>	 <p>Western Australia Country Health Service – Wheatbelt</p>	 <p>Western Health (Victoria)</p>
 <p>Wide Bay Hospital and Health Service (Queensland)</p>	 <p>Women's and Children's Health Network (South Australia)</p>			

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>
 <p>Australasian Chapter of Palliative Medicine</p>	 <p>Chiropractic Australia</p>	 <p>College of Intensive Care Medicine of Australia and New Zealand</p>	 <p>Endocrine Society of Australia</p>	 <p>Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists</p>

Colleges, societies and associations

 <p>GESA Gastroenterological Society of Australia</p> <p>Gastroenterological Society of Australia</p>	 <p>HSANZ Haematology Society of Australia and New Zealand</p> <p>Haematology Society of Australia and New Zealand</p>	 <p>HUMAN GENETICS SOCIETY OF AUSTRALASIA</p> <p>Human Genetics Society of Australasia</p>	 <p>Internal Medicine Society of Australia & New Zealand</p> <p>Internal Medicine Society of Australia and New Zealand</p>	 <p>MOGA</p> <p>Medical Oncology Group of Australia</p>
 <p>RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE</p> <p>Paediatrics & Child Health Division of The Royal Australasian College of Physicians</p>	 <p>Pharmaceutical Society of Australia</p> <p>Pharmaceutical Society of Australia</p>	 <p>RACGP</p> <p>Royal Australian College of General Practitioners</p>	 <p>RACMA ROYAL AUSTRALASIAN COLLEGE of Medical Administrators</p> <p>Royal Australasian College of Medical Administrators</p>	 <p>RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE</p> <p>Royal Australasian College of Physicians</p>
 <p>ROYAL AUSTRALASIAN COLLEGE OF SURGEONS</p> <p>Royal Australasian College of Surgeons</p>	 <p>SOMANZ</p> <p>Society of Obstetric Medicine of Australia and New Zealand</p>	 <p>shpa</p> <p>Society of Hospital Pharmacists of Australia</p>	 <p>THE AUSTRALIAN SOCIETY OF OTOLARYNGOLOGY HEAD AND NECK SURGERY</p> <p>The Australian Society of Otolaryngology Head and Neck Surgery</p>	 <p>THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS</p> <p>The Australasian College of Dermatologists</p>
 <p>The Royal Australian and New Zealand College of Obstetricians and Gynaecologists</p> <p>The Royal and Australian and New Zealand College of Obstetricians and Gynaecologists</p>	 <p>The Royal Australian and New Zealand College of Radiologists</p> <p>The Royal Australian and New Zealand College of Radiologists</p>	 <p>RANZCO THE LEADERS IN EYE CARE</p> <p>The Royal Australian and New Zealand College of Ophthalmologists</p>	 <p>RCPA The Royal College of Pathologists of Australasia</p> <p>The Royal College of Pathologists of Australasia</p>	 <p>The Thoracic Society of Australia & New Zealand LEADERS IN LUNG HEALTH</p> <p>Thoracic Society of Australia and New Zealand</p>
 <p>RACP Specialists. Together EDUCATE. ADVOCATE. INNOVATE</p> <p>The Australasian Chapter of Addiction Medicine</p>				

Consumer information and advocacy organisations

 <p>Consumers Health Forum of Australia</p>	 <p>Healthdirect Australia</p>	 <p>Health Care Consumers Association ACT</p>	 <p>Health Consumers Alliance of South Australia (dissolved as of 30 September 2020)</p>	 <p>Health Consumers NSW</p>
 <p>Health Consumers Queensland</p>	 <p>Health Consumers TAS</p>	 <p>Health Consumers WA</p>	 <p>Public Health Services, Department of Health Tasmania</p>	

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Choosing Wisely Australia

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Level 7/418A Elizabeth Street Surry Hills NSW 2010
PO Box 1147 Strawberry Hills NSW 2012
☎ 02 8217 8700 ✉ 02 9211 7578 @info@nps.org.au

Independent, not-for-profit and evidence-based, NPS MedicineWise enables better decisions about medicines, medical tests and other health technologies. NPS MedicineWise receives funding from the Australian Government Department of Health to support Choosing Wisely Australia.
National Prescribing Service Limited ABN 61 082 034 393 CW2355



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