IMPLEMENTING CHOOSING WISELY PRINCIPLES IN A SERVICE

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This guide covers

This guide is intended to provide basic information and tools to help you to start implementing your Choosing Wisely campaign. You can then tailor your campaign to your local circumstances and creative vision while following the core principles of a Choosing Wisely campaign.

1. What is Choosing Wisely

2. The rationale for the campaign

3. Core Principles of a Choosing Wisely Campaign

4. Choosing Wisely in New Zealand

5. Getting started

6. Measuring your performance

7. Changing the culture

8. Involving patients and consumers

9. Contacts and other useful information
1 WHAT IS CHOOSING WISELY?

The prime objective is to encourage conversations between health professionals\(^1\) and consumers\(^2\) / patients, so they:

- Are fully informed by the evidence about their treatment options
- Able to make the right choices for themselves.
- Do not undergo tests, treatments or procedures which are unnecessary.

The focus is on the health professional and consumer working together to improve the quality of care that is delivered.

The Council of Medical Colleges (CMC) is working on the international Choosing Wisely campaign as part of its commitment to improving the quality of care for consumers/patients.

The programme will encourage health professionals to hold conversations with consumers/patients to ensure they understand the evidence relating to the care being proposed so they can make wise choices. Overseas research has shown that effective Choosing Wisely programmes are clinician led\(^3\) and that effective consumer/patient engagement\(^4\)\(^5\) is necessary if the programme is to be successful.

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\(^1\) Health professionals are individuals who provide preventive, curative, promotional or rehabilitative health care services, in a systematic way, to people, families or communities. This includes doctors and all others regulated under the Health Practitioner Competence Assurance Act 2003

\(^2\) Health consumer includes any person on or in respect of whom any health care procedure is carried out

\(^3\) Hurley R, Can doctors reduce harmful medical over use worldwide. BMJ 2014

\(^4\) Ibid

\(^5\) Choosing Wisely is currently working with Te ORA on how Choosing Wisely can be incorporated in Aotearoa to serve the interests of Māori, and how shared decision-making between health professionals and Māori consumers and their whānau can be improved, ultimately leading to more equitable health outcomes for Māori.
2 THE RATIONALE FOR THE CAMPAIGN

Evidence shows that some clinical interventions are used inappropriately in Australia and New Zealand. This is shown by the recommendations about tests, treatments and procedures that have been developed by medical colleges, societies, and health professional associations working in New Zealand.

In 2016 the Council of Medical Colleges surveyed New Zealand doctors regarding their attitudes towards unnecessary care. Of those who completed the survey;

- 49.7% of doctors expressed that unnecessary care “was either a ‘serious’ or ‘very serious’ issue in their current area of practice.”
- 61.6% felt this was a problem for the health sector in general\(^1\).

International literature has identified some factors that may contribute to health professionals ordering unnecessary services;

- patient expectations
- fear of missing a diagnosis or complaints
- reimbursement incentives
- the way health professionals are taught
- avoiding the challenge of telling consumers/patients they do not need specific tests\(^2\).

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\(^1\)The full report *Survey of doctors’ practice regarding unnecessary tests treatment and procedures in NZ 2017* is available on the Choosing Wisely website [www.choosingwisely.org.nz](http://www.choosingwisely.org.nz). This report was updated following a further survey in 2019 and is available on the Choosing Wisely website.

The result can be sub-optimal care for consumers/patients which, at best, adds little or no value and, at worst, may cause harm\(^1\).

Frequently, health professionals and managers are concerned about the lack of health resources. Choosing Wisely centres on decreasing low value care and overtreatment. This has been recognised as one of the “wedges of waste” as can be seen from the graph below, where overtreatment is a significant contributor\(^2\).

Choosing Wisely is about improving the quality of care - rationalising care not rationing.

Professor Wendy Levinson, Professor of Medicine at Toronto University and Chair of Choosing Wisely International, has commented that “overuse, waste and harm in the healthcare sector is a far larger and far more common problem than most realise. Publicity around healthcare delivery gives the impression that under-performance and under-delivery are the core issues in health these days. But actually, in America, Canada and most other health systems up to 30% of health care delivered adds no further value.”


THE CORE PRINCIPLES OF A CHOOSING WISELY CAMPAIGN

The campaign must be health professional-led (as opposed to payer/government-led). This is important to building and sustaining the trust of health professionals and patients. It emphasises that campaigns are focused on quality of care and harm reduction, rather than cost reduction³.

The campaign must be patient-focused and involve efforts to engage patients in the development and implementation process. The Council of Medical Colleges has been working with consumer groups and Consumer NZ to implement this principle. Communication between health professionals and patients is central to Choosing Wisely.

The recommendations issued by the campaign must be evidence-based, and must be reviewed on an ongoing basis to ensure credibility.

Where possible, the campaign should include doctors, nurses, pharmacists and other health care professionals. In New Zealand, the Council of Medical Colleges has the support of the New Zealand College of Midwives, the Pharmaceutical Society of New Zealand, and is currently working with allied health, nursing groups and physiotherapists.

Processes used to create the recommendations must be public and any conflicts of interest must be declared.

All groups working under the Choosing Wisely banner and using the Choosing Wisely logo in New Zealand must sign up to these principles. Please contact Choosing Wisely for more information at: enquiries@cmc.org.nz

4 CHOOSING WISELY INTERNATIONALLY

CHOOSING WISELY IS A GLOBAL INITIATIVE

Australia, Austria, Brazil, Canada, Denmark, England, France, Germany, India, Israel, Italy, Japan, Netherlands, South Korea, Switzerland, United States and Wales are currently all involved in this campaign.

FOR MORE INFORMATION ON WHAT’S HAPPENING IN OTHER COUNTRIES:

- Australia - choosingwisely.org.au
- Canada - choosingwiselycanada.org
- USA - choosingwisely.org
- UK - choosingwisely.co.uk/i-am-a-patient-carer
5 **CHOOSING WISELY IN NEW ZEALAND**

**COLLEGES**
Many New Zealand Medical Colleges, specialty societies and health professional groups who are engaged in Choosing Wisely have developed a list of recommendations and several more are in various stages of development.

These recommendations are things which:
• are within the specialty’s scope of practice
• are frequently used
• may expose patients to harm and stress
• are supported by evidence
• have potential to reduce, and will not increase, health inequity.

These have been developed with health professional input and consultation after review of the evidence. Each recommendation is supported by evidence and has resources to assist health professionals and patients.

**DHBs**
In New Zealand, several DHBs have set up Choosing Wisely steering groups and appointed Choosing Wisely “champions” to drive change within their hospitals.

For example – early data suggests that using a Choosing Wisely approach has had a significant impact on tests performed within the emergency department at Waikato Hospital with:
• 20% reduction in urine tests
• 50% reduction in blood cultures
• 75% reduction in blood gasses

At Capital Coast DHB ward 5 and Kenepuru inpatient wards, the team implemented a project to remove urine dipsticks from most wards as there is no evidence that shows routine dipstick testing of urine for all inpatients is not necessary.

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1 Research shows Māori currently experience large inequities in accessing necessary care in New Zealand. Pacific people, and groups of low socioeconomic status are less likely to receive the health care they need.
CMC has now set up a Community of Practice across DHBs working on Choosing Wisely – to enable those involved in Choosing Wisely to assist and learn from each other, give and gain advice on implementation issues and overcome challenges and look at evaluation. The group meets by telelink every two months.

**GENERAL PRACTITIONERS**

The RNZCGP is now highlighting Choosing Wisely recommendations relevant to primary care, each week in e-Pulse. If you would like to be part of this work contact enquiries@cmc.org.nz.

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**CHOOSING WISELY WORK IN NZ as at December 2019**
GETTING STARTED

DEVELOPING A LIST OF RECOMMENDATIONS IS NOT ENOUGH!

If you are considering starting a project to reduce inappropriate use of tests and treatments in your service setting, review the list of recommendations already developed or if you have a specific area of overuse you want to tackle, start there!

If you’re still deciding on a focus, we’ve compiled all current New Zealand Choosing Wisely recommendations into one list or recommendations at choosingwisley.org.nz. You can use this list to sort, rank order and prioritise based on what’s important to you and your organisation. Getting support and buy-in from your colleagues and stakeholders early will help make your project go smoothly; involve them in this process.

Because local context, culture and capabilities vary widely from one setting to another, there is no single recipe book for you to follow. Once you have a specific area of focus, you’re ready for the hard part. Implementing and getting buy in to change is not easy.

As in the Choosing Wisely programme in Canada, in New Zealand we are encouraging and supporting local ingenuity in the implementation of the recommendations, this is called Choosing Wisely DIY (do-it-yourself)!

If you are going to design your own interventions, the figure below gives a sense of the types of interventions you might want to consider.

<table>
<thead>
<tr>
<th>EDUCATION</th>
<th>MEASUREMENT &amp; IMPROVEMENT</th>
<th>HARD CODING</th>
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<tbody>
<tr>
<td>Health professional education</td>
<td>Performance measurement</td>
<td>Medical directive changes</td>
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<tr>
<td>Patient education</td>
<td>Quality improvement projects</td>
<td>Order set changes</td>
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<tr>
<td>Awareness campaigns</td>
<td>Audit and feedback</td>
<td>EMR integration</td>
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A robust implementation project tends to involve a combination of interventions.

**Low Leverage Interventions**
Low leverage interventions, on the other hand, focus on change at the individual rather than organisational level, tend to be easier to implement, but are generally less sustainable (e.g. people move on).

**High Leverage Interventions**
High leverage interventions are those that require organisational level changes; these changes are typically “hard coded” into the systems and policies of the organisation and tend to be more difficult to implement, but the results are more likely to be sustained.

**PROCESS TO IMPLEMENT CHOOSING WISELY**¹:

IMPLEMENTATION

Now in NZ we are now developing more information on implementation of projects and will be writing these up, in Canada¹ there are several examples of how services have made changes, for example:

- A toolkit for appropriate use of urinary catheters in hospitals.
- A toolkit to reduce inappropriate use of benzodiazepines and sedative-hypnotics among older adults in hospitals.
- A toolkit to reduce unnecessary red blood cell transfusions in hospitals.
- A toolkit for de-prescribing proton pump inhibitors in EMR-enabled primary care settings.
- A toolkit for reducing unnecessary visits and investigations in pre-operative.
- A toolkit for reducing inappropriate use of antipsychotics in long term care.

These toolkits all give information on: key ingredients of intervention; measuring your performance; sustaining early successes; additional resources and patient aids.

Also read the Choosing Wisely guide on measuring the impact of Choosing Wisely interventions - at choosingwisely.org.nz/health-professionals

¹ Note: To review the tool kits developed by services in Canada go to choosingwiselycanada.org/perspectives/how-tos. Each tool kit also details what has been achieved by the service in terms of reduce use. And there are also informational videos and YouTube resources
MEASURING YOUR PERFORMANCE

We need to be able to show if the campaign does reduce the number of tests, treatments and procedures - without reducing the quality of care, or harming the patient. Therefore, first collect baseline data:

- You need to measure so you know where to focus efforts.
- Where possible embed the concepts into existing quality improvement programmes and culture instead of creating a new programme.
- Look for short- and long-term gains.
- Identify recommendations that are most easily measurable.

CHOOSE A FAMILY OF MEASURES

- **Outcome measures**
  These are the main improvements that you are trying to achieve.
  In this case, make sure these measures are consumer/patient relevant.

- **Process measures**
  These measures are developed to ensure that each aspect of the intervention is being carried out and delivered as intended.

- **Balancing measures**
  Any intervention may create new unintended consequences, harm or adverse events that also needs to be measured.

DETERMINE A COLLECTION METHOD

- Chart audits
- Electronic records entries
- Focused chart reviews
CHANGING THE CULTURE

EDUCATE OTHERS
- By giving presentations on Choosing Wisely.
- Organise talks at staff meetings and grand rounds.
- Publish an article in your organisation’s newsletter on Choosing Wisely.
- Invite a speaker from the Choosing Wisely speakers’ group.
- Print and distribute Choosing Wisely educational resources.
- Have meetings for ideas generation – start small, develop achievable goals.
- Support leaders who have adopted the Choosing Wisely principles.

INOLVE PATIENTS AND CONSUMERS
- Put up the Choosing Wisely poster “4 questions to ask your health professionals” in examination and waiting rooms.
- Share provider and patient stories.
- Hand out educational materials to consumers/patients prior to their appointment based on the symptoms or request. See Choosing Wisely patient and consumer resources.

INSPIRE OTHERS
- Talk to PGY1 and 2 at House officer orientation sessions. The NZ Medical Students Association has developed a list of recommendations to guide students at www.choosingwisley.org.nz.
- Talk at local GP evenings.
- Set process-oriented goals and benchmarks early on and discuss progress regularly.

WORK TO GET CULTURAL CHANGE
- Add Choosing Wisely as an agenda item at regularly scheduled department or clinic meetings.
- Make Choosing Wisely and overuse discussions part of the cultural norm by incorporating recommendations into the workflow in your organisation.
- Provide regular progress reports to the clinical management.
- Empower departments to select recommendation(s) from their specialty’s list on which they will focus their efforts.
- Share data to substantiate short-term wins and celebrate successes.
- Integrate Choosing Wisely recommendations into your organisation’s electronic medical record and clinical decision support tools.
• Work with IT to generate reports specific to your organisation.
• Include case study discussions as a standing agenda item at your staff meetings.
• Present data on changes back to clinicians.
• Provide timely positive feedback to individuals who have engaged with the Choosing Wisely campaign.
• Set up a recognition programme, such as recognising individuals at staff meetings.
• Encourage organisational and department champions.

**USE HUMOUR... AND MAKE IT FUN**

In New Zealand, the Emergency Department at Waikato DHB has been working at the local level under their own initiative to find innovative ways to put recommendations relating to imaging and blood tests into practice with activities ranging from developing information for health professionals, putting up posters to alert staff to the campaign and running a competition to encourage buy-in and thought about the concepts.

**GET NEW STAFF ON BOARD**

• Become known as a Choosing Wisely service.
• Promote Choosing Wisely to all new and existing employees.
• Incorporate the Choosing Wisely programme into your vision, goals and progress.
• Make Choosing Wisely part of new staff orientation and induction.
**FACTORS FOR SUCCESS**

- Get Board, CEO and CMO support in principle.
- Allocate some resources to get the programme embedded into practice - clinical staff need administrative support to ensure changes get put into place.
- Where possible, align with other DHB goals and aims and KPIs in relation to factors such as improving quality of care.
- Encourage organisational and department champions.
- Set up a Steering Group to coordinate efforts, motivate others and encourage cross department and specialty discussions.
- Include a GP and Consumer on the Steering Group.
- Appoint a registrar or other staff member to help coordinate and track work and ensure evaluation.
- Gain support from Business and Planning to help develop business cases and monitor progress.
- Involve Quality and Patient Safety Groups.
- Work with Communications staff to spread the message throughout the DHB.
- Cross-organisational focus
- Audit to monitor changes

**AN EFFECTIVE CHOOSING WISELY PROGRAMME NEEDS:**

- Good multi-disciplinary engagement
- Access to evidence and data
- Marketing and communications
INVOVING PATIENTS AND CONSUMERS

Choosing Wisely supports the important role of patient education and engagement and to this end CMC is working with Consumer New Zealand and other organisations to “spread the message” and develop resources for consumers/patients.

Choosing Wisely encourages consumers/patients to ask their health professionals these four questions:

- Do I really need to have this test, treatment or procedure?
- What are the risks (of having or not having it)?
- Are there simpler safer options?
- What happens if I do nothing?

Consumer/patient resources on certain common conditions and tests and treatments have been developed and are being promoted by Consumer NZ, Healthpathways and Health Navigator. These are available on our website at choosingwisely.org.nz.

Provide easily accessible educational materials and information for consumers/patients to encourage them to ask questions of their health professional, which will in turn encourage health professionals to know the answers.

Discussion of the resources with the patient is much more effective than just having a stand of resources in the waiting room.

Encourage consumers/patients to access information from unbiased sources such as www.cochranelibrary.com.

Encourage awareness of the role industry plays in sponsorship of information on the internet that may encourage use of low value unnecessary tests, treatments and procedures.

Print and place patient-friendly resources in your waiting rooms, or mail them to consumers/patients in advance of their appointment. Then discuss the information at the appointment.

Write an article in your patient-focused newsletters or website.

Use Choosing Wisely resources on shared decision making and communication risk
CONTACTS AND RESOURCES

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NEW ZEALAND CHOOSING WISELY RESOURCES

- **Starter kit for your Choosing Wisely campaign**: an introduction to the Choosing Wisely concepts.
- **Developing Choosing Wisely Recommendations**: to assist Colleges, societies and other organisations to develop a list of recommendations for the Choosing Wisely campaign.
- **Implementing Choosing Wisely principles in a service**: this guide is aimed at service delivery organisations, wanting to implement a Choosing Wisely programme, including Departments in DHBs and services in primary care.
- **Measuring the impact of Choosing Wisely**: provides basic information and tools to help you develop and measure your Choosing Wisely interventions.
- **How to write up your Choosing Wisely project**: how to record your successful implementation of a Choosing Wisely recommendation.
- **A Starter Kit for implementing Choosing Wisely in hospitals**: which has been prepared to assist smaller hospitals with the implementation of Choosing Wisely.
- **Promoting shared decision making**: for information and resources on shared decision making.
- **Communicating risk, a guide for health professionals**: for information on risk and how to explain risk to consumers.
- **Behaviour change toolkit**: options for the range of tools available to implement Choosing Wisely initiatives to change health professional behaviour.
- **The High-Value Care Culture Survey (HVCCS)** captures specific areas for targeted value-improvement interventions and provides a pathway for health system managers to address the underlying culture within hospital divisions, practices, and training programmes.
- **A synopsis of Choosing Wisely literature**: this is a list of Choosing Wisely references arranged by year and alphabetically by author.
- **A combined list of all choosing wisely recommendations**: this is a list of all New Zealand Choosing Wisely recommendations on tests, treatments, and procedures health professionals should question, in one list for easy reference.

All these resources are on the New Zealand Choosing Wisely website

https://choosingwisely.org.nz/resources/
FOR MORE INFORMATION:

- New Zealand - https://choosingwisely.org.nz/
- Canada - https://choosingwiselycanada.org/
- USA - https://www.choosingwisely.org/
- UK - https://www.choosingwisely.co.uk/about-choosing-wisely-uk/

CHOOSING WISELY SPEAKERS’ GROUP
CMC has a list of leading professionals who can talk to groups about Choosing Wisely – contact the Choosing Wisely team if you need a speaker for your meeting or if you are willing to join our group.

ACKNOWLEDGEMENTS
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- ABIM and the USA Choosing Wisely - choosingwisely.org
- Choosing Wisely Canada - choosingwiselycanada.org
- Choosing Wisely Australia - choosingwisely.org.au

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