



A COUNCIL OF MEDICAL COLLEGES
IN NEW ZEALAND CAMPAIGN
and part of Choosing Wisely work internationally.

Choosing Wisely: Better Evidence Based Conversations



*Nurse Practitioners
New Zealand*

NPNZ
@EVOLUTION

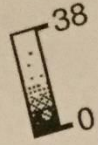


Dr Derek Sherwood

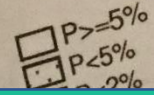
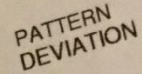


GRAY SCALE

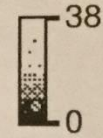
GRAY SCALE



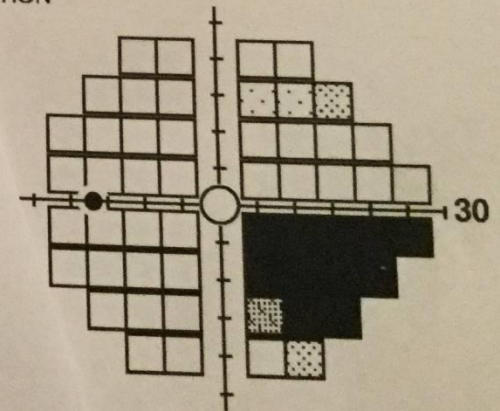
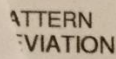
MD: -5.71 dB P<5%
PSD: +3.25 dB

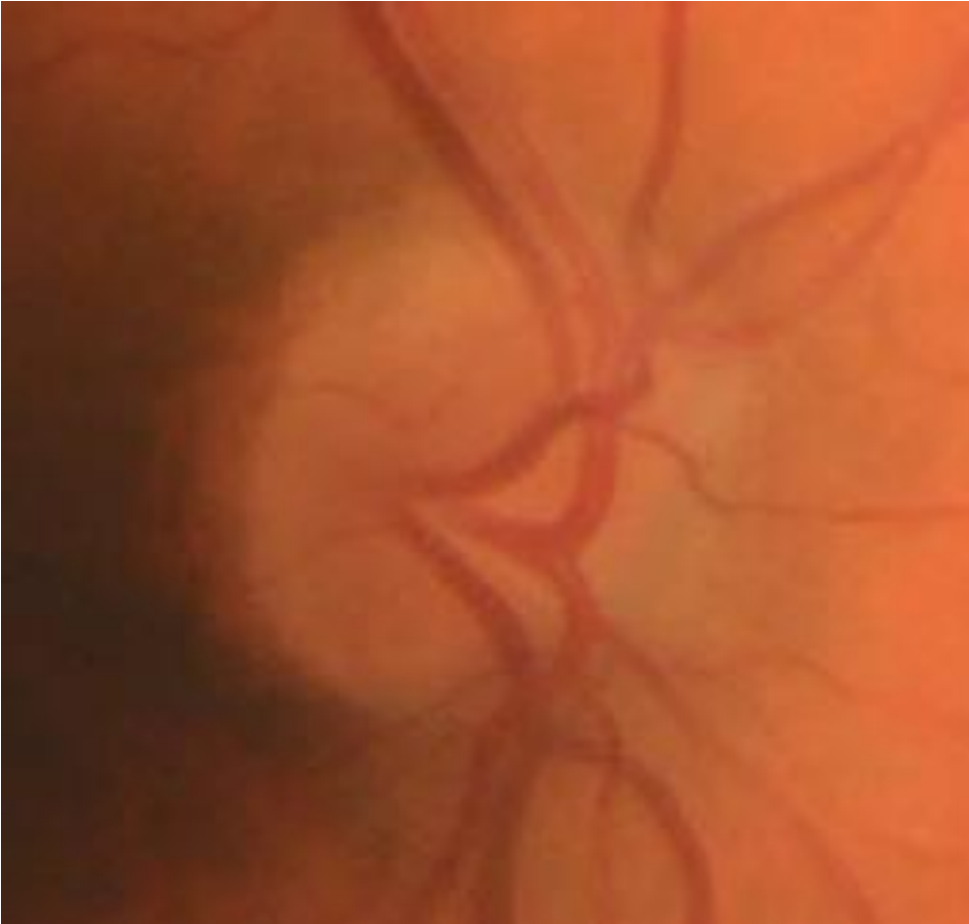


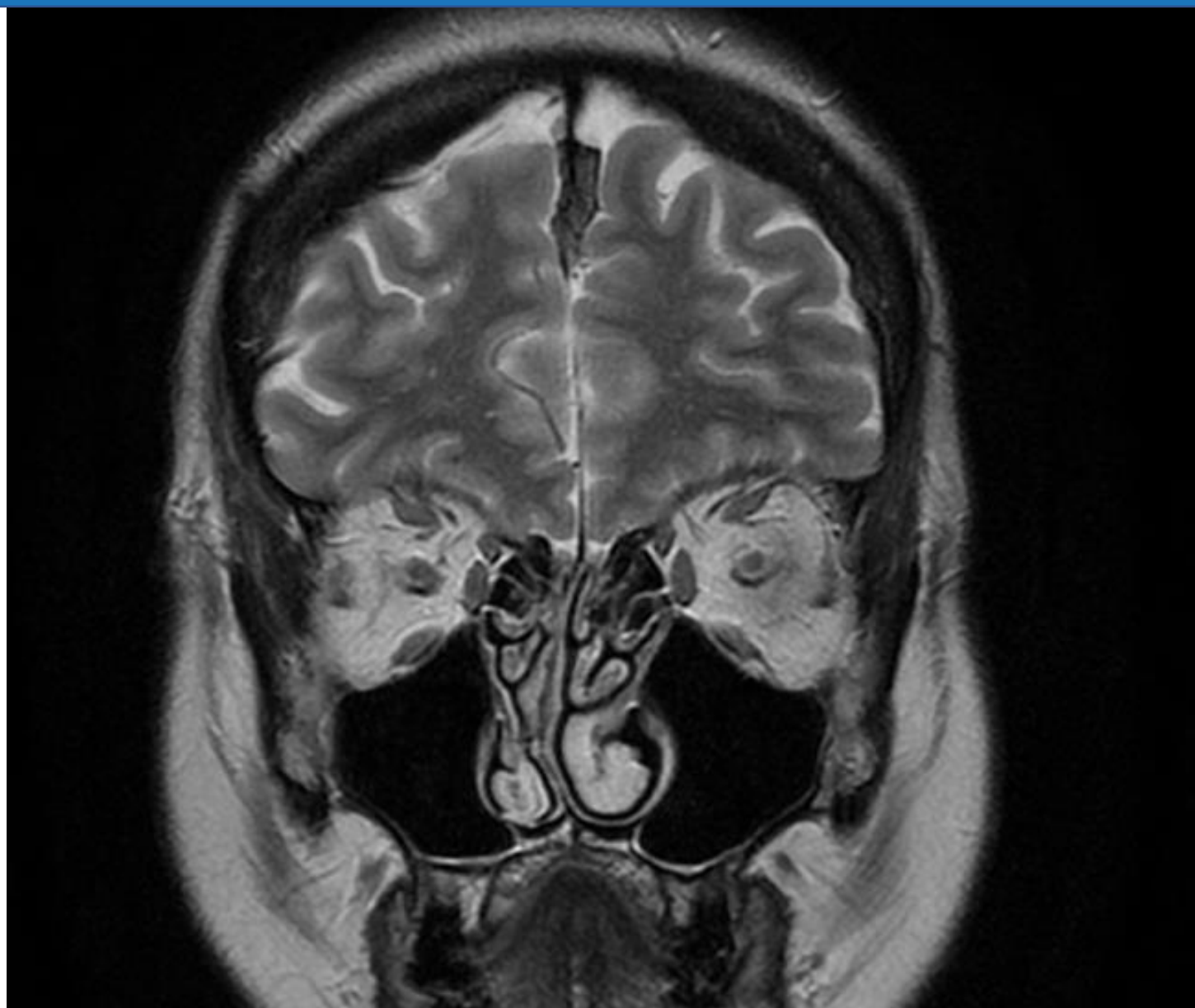
11
13 11
3 18 20
27 27 18
+ + +
11 0 7
2



MD: -10.52 dB $P < 0.5\%$
PSD: +6.29 dB $P < 0.5\%$



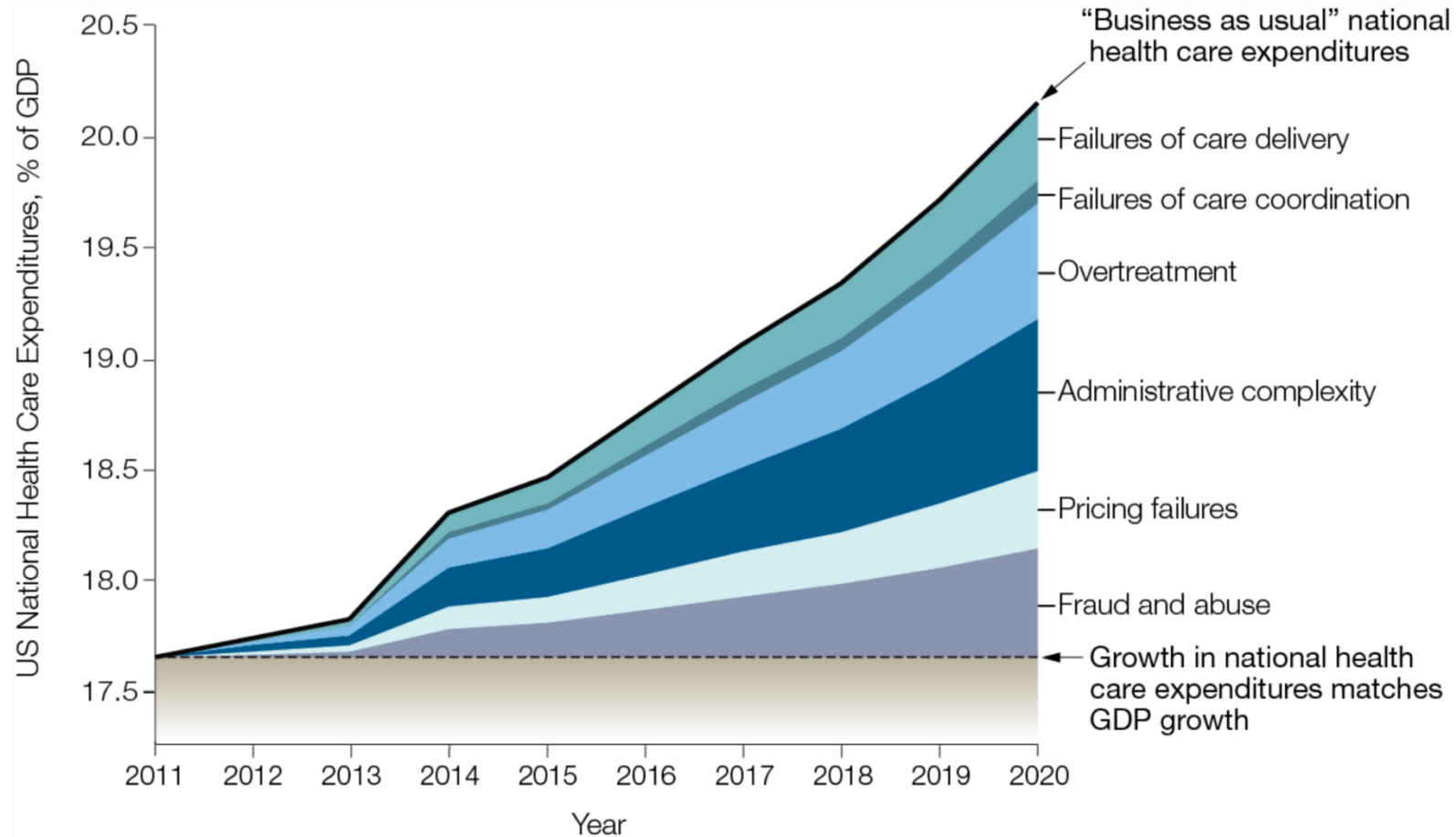




WHAT CARE ARE WE TALKING ABOUT?

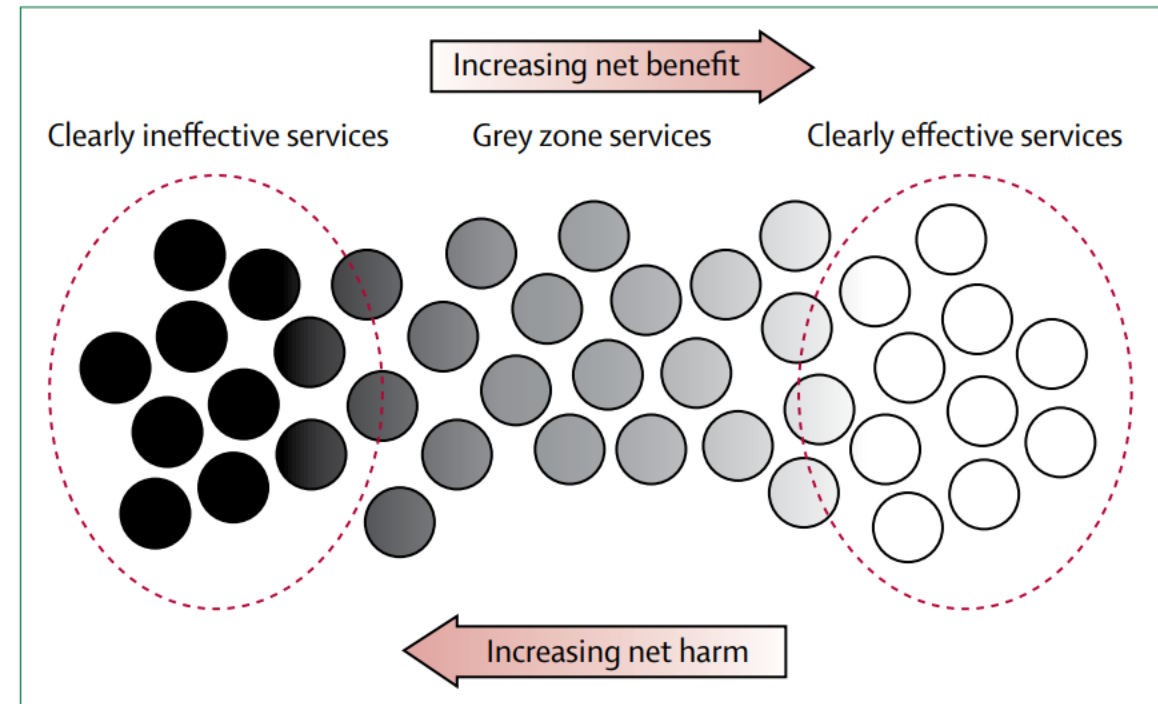
- Care that gives little or no benefit to patients.
- Care where the risk of harm exceeds likely benefit.
- Care where the high cost is disproportionate to the benefit.

WEDGES OF WASTE



Growing evidence on the problem of overuse

- 50% of antibiotic prescriptions in OECD are unnecessary
- USA: Rate of inappropriate total knee replacement 34%
- Europe: 13-33% endoscopies unnecessary
- Italy: 22% of PCI 22% & 30% of coronary angiography inappropriate
- Huge regional variation
- Problems with definition & measurement

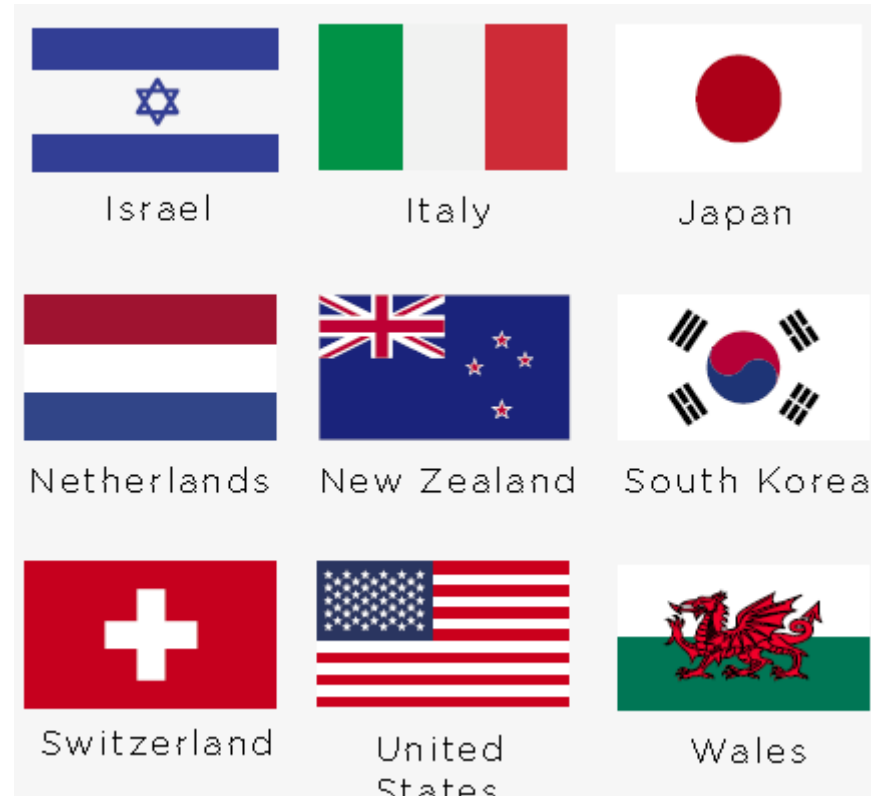
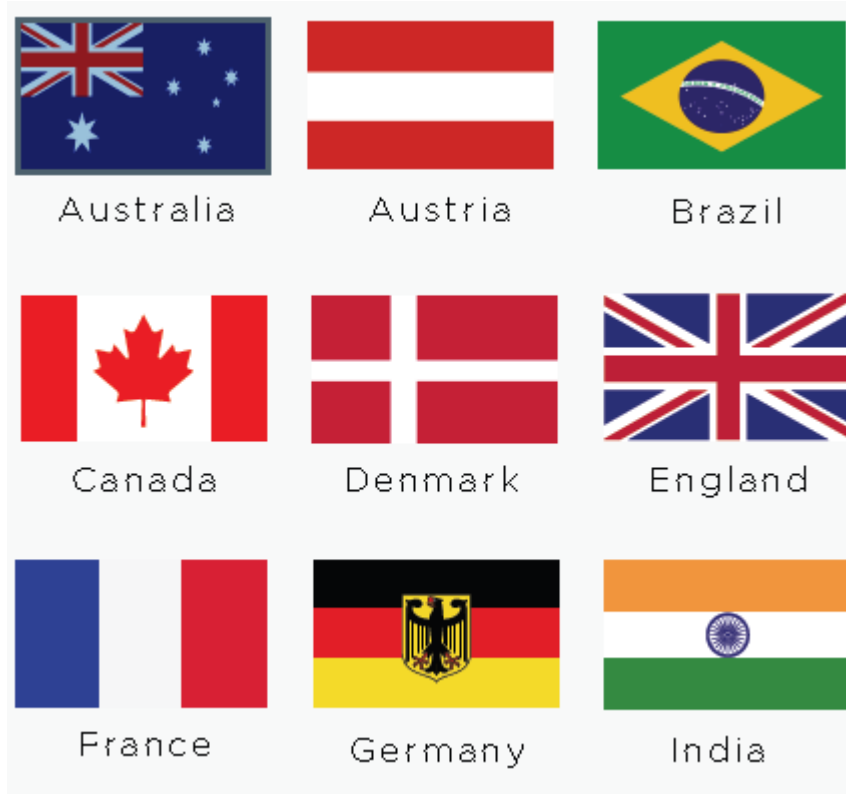


Factors that encourage over use

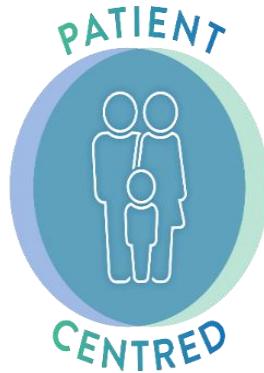
- I've always done it this way
- The \$\$\$
- I don't want a complaint
 - Errors of Omission/Commission
- The patient wants it
- Community attitudes to testing/treatment
 - Doing something rather than nothing
 - Thoroughness
 - Belief in modern high tech medicine
- The referring doctor wants it
- Poor understanding of risk/benefit



Part of an international campaign



Choosing Wisely Principles



CHOOSE
WISELY

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Choosing Wisely

- Working with Health Professional organisations to identify areas of over investigation or over treatment based on evidence
- Working with the community to change attitudes to over investigation or over treatment



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Examples of Choosing Wisely

Avoid prescribing antibiotics for upper respiratory tract infection	The Australasian Society for Infectious Diseases
Do not use antipsychotics as the first choice to treat behavioural and psychological symptoms of dementia.	The Australian and NZ Society for Geriatric Medicine
Do not prescribe oral antifungal therapy for suspected nail fungus without confirmation of fungal infection.	New Zealand Dermatological Society
Do not use antibiotics in asymptomatic bacteriuria.	Australasian Society for Infectious Diseases Inc
	Australian and NZ Society for Geriatric Medicine
	The Royal College of Pathologists of Australasia
Don't use opioids for the treatment of migraine, except in rare circumstances.	Australian and NZ Association of Neurologists
Ultrasound for large babies: Unless the mother has diabetes, in the absence of other clinical concerns ultrasound scans should not be routinely offered to check if a baby is bigger than normal for its gestational age.	New Zealand College of Midwives
Do not routinely prescribe oral antibiotics to children with fever without an identified bacterial infection.	Paediatrics & Child Health Division of RACP

Shared Decision Making

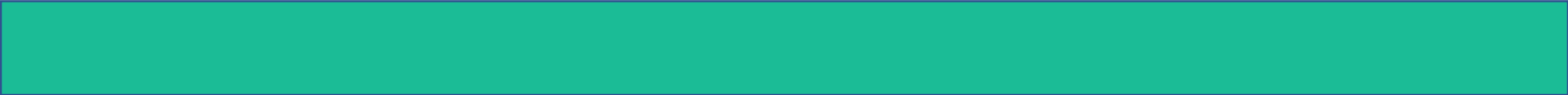
- Health Professional
 - Diagnosis
 - Aetiology
 - Prognosis
 - Investigation options and risks
 - Treatment options and risks
 - Outcome probabilities
- Patient
 - Experience of illness
 - Social Circumstances
 - Attitude to risk
 - Goals, values and preferences
 - Support needs



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HQSC Patient Experience - Oct 2018

- In the community, only 53% of patients say that their specialist doctor asked what is important to them
 - Māori consumers are consistently and significantly less likely to:
 - Always get answers they could understand when they had important questions to ask a doctor
 - Have their condition explained to them in a way they could completely understand
 - Always feel that doctors listened to what they had to say
 - Always feel that nurses listened to what they had to say
- 

30-40% of patients do not get treatments of proven effectiveness

20-25% of patients get care that is not needed or is potentially harmful





NPNZ and Choosing Wisely

NPNZ is an organisation that provides a collective voice to advance NP Practice and enable high quality integrated and accessible healthcare throughout New Zealand.

Promote excellence in advanced clinical nursing through practice, education and research
Enhance capacity of the Nurse Practitioner practice in New Zealand
Provide resource and consultation for healthcare practice in New Zealand

Choosing Wisely key outcomes

Working to get a health service **where low value care and inappropriate clinical interventions are avoided.**

A health service where patients and health professionals have well informed conversations about their treatment options leading to better outcomes **and improved quality of care.**

The Council of Medical Colleges

CMC is involved, as one of the Colleges aim is to provide the community with the **highest quality medical care** and to **improve, protect, and promote the public health.**



Choose Wisely - and join this collaborative effort



As at January 2019

**MORE, ISN'T ALWAYS BETTER.
SO LET'S TALK BETTER CARE**

Choosing Wisely promotes a culture where low-value and inappropriate clinical interventions are avoided, and where patients and health professionals have well-informed conversations around treatment options – leading to better decisions and outcomes.



31 COLLEGES & ASSOCIATIONS



17 DISTRICT HEALTH BOARDS



39 SUPPORTERS



6 SPONSORS and PARTNERS



8 SUMMER STUDENTSHIPS



154 RECOMMENDATIONS



48 PATIENT RESOURCES



62 PRESENTATIONS
TO GROUPS ACROSS THE SECTOR

4 PUBLIC and PROFESSIONAL EVENTS

CHOOSINGWISELY.ORG.NZ

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“The care they need and no less and the care they want and no more”
Angela Coulter

- For more information – www.choosingwisely.org.nz
- Or contact CMC – enquiries @cmc.org.nz
- Choosing Wisely National Forum

