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## Low Value Care

Letter To Editor

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**Conflicts of Interest;** Nil identified

Dear Editor

Low value care (LVC) has gained increasing traction over the past few decades with the Choosing Wisely campaign reaching Australia in 2015.<sup>1</sup> The Royal Australasian College of Physicians, Paediatric and Child Health Division has put forward 5 'not-to-do' practices known widely as the Evolve Criteria.<sup>2</sup> The idea that we order unnecessary tests, treatments

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and procedures can be confronting for clinicians, and drivers are not well understood. At a large tertiary paediatric centre, we surveyed clinicians (medical and nursing) in June 2018 involved in the care of infants with bronchiolitis (one of the 5 Evolve conditions) about drivers of LVC. We used a 20-question on-line survey provided by NPS-MedicineWise Australia<sup>3</sup> which we then emailed to all Emergency Department (ED) and General Medical doctors as well as nursing staff in the ED. 54 individuals responded. Clinicians reported seeing a problem in unnecessary care in pathology (88%), radiology (70%), medications (50%) and surgeries / procedures (25%). 15% of clinicians reported being asked for an unnecessary test every day, with 71% asked at least weekly. Major drivers for unnecessary care ordering were identified as diagnostic uncertainty (69%), perceived parental expectation (46%) and fear of litigation (32%). When considering practices of others, 44% reported that their colleagues ordered unnecessary tests several times a week with 15% seeing this every day. Only 17% of staff reported they had a high level of influence over changing low value care practices, with 65% reporting some or moderate influence, and 18% of reporting they had little or no influence. This study was single site and views of our clinicians may not generalise to clinicians working in other hospitals. However, this survey highlights that low value care is not due to a lack of knowledge by clinicians but rather other drivers. Further interrogation into the drivers and tailored interventions are required if we are to reduce LVC in a sustainable manner.

Kind regards,

#### References

1. Choosing Wisely Campaign. Accessed from <http://www.choosingwisely.org.au/home> on 26/2/2019
2. Royal College of Physicians. Paediatrics and Child Health Division, Top 5 low-value practices and interventions. Accessed from <https://evolve.edu.au/published-lists/paediatrics-and-child-health-division> on 26/2/2019

3. NPS Medicine Wise. Accessed from <https://www.nps.org.au/> on 26/2/2019

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