

Using clinical practice variations as a method for commissioners and clinicians to identify and prioritise opportunities for disinvestment in health care: a cross-sectional study, systematic reviews and qualitative study

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Plain English summary

Identifying opportunities for disinvestment in health care

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Plain English summary

Health-care spending has been restricted since the 2007 economic crisis. We developed tools to help NHS policy-makers identify surgical procedures where there is uncertainty about appropriate use or that might be used too often in some areas of England. We also explored obstacles to reducing spending (disinvesting) on procedures which may be overused.

We used data on NHS surgical procedures (2007 to 2012) to calculate differences in procedure rates among primary care trusts (PCTs) in England after adjusting for need (e.g. population size). In two PCTs we compared local and national procedure rates and reviewed evidence on two procedures [carpal tunnel syndrome (CTS) surgery for hand symptoms and laser capsulotomy for clouded vision] to understand why local rates were high. We observed PCT meetings and interviewed NHS managers, surgeons and patients to better understand the difficulties of regulating surgical procedures rates.

For five procedures the rate of surgery was more than 10 times higher in some PCTs than others. Variation was particularly high where procedure use was rapidly increasing or declining. CTS surgery is cost-effective for many patients but studies provided little evidence on which patients benefit most. There were no high-quality studies of laser capsulotomy. PCT meetings rarely discussed disinvestment. Barriers included lack of collaboration, central support and tools for disinvestment. Clinicians felt some PCT regulation had little impact on practice and most patients were unaware of regulation.

Variation might be used to identify procedures where new studies are most needed to guide policy and identify procedures that might be used too often. Increased NHS support to tackle disinvestment and to provide the relevant tools, data and evidence is needed.

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