

# Theory and practical guidance for effective de-implementation of practices across health and care services: a realist synthesis

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## Plain English summary

Effective de-implementation of health and care services practices

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## Plain English summary

There is a growing emphasis on better use of resources in the NHS and, in particular, avoiding unnecessary spending on treatments or procedures that are of limited clinical effectiveness or cost-effectiveness but continue to take place. Stopping or withdrawing existing practices is not always easy, and this review aimed to explore the best ways of successfully changing/stopping or replacing them. We did this by reviewing literature and engaging with stakeholders to develop theories or 'ideas' and resources that would help professionals and managers to change or stop low-value practices.

Health and social care services need to consider the following points if reducing or removing procedures that have limited evidence for their effectiveness.

- Professionals need to be more aware of their day-to-day decision-making habits when ordering investigations and treatments through justifying their choices and receiving feedback on their performance relative to their colleagues.
- Systems that support professionals' decisions, including electronic health records, need to make it harder for low-value treatments to be visible, and those treatments that are seen as more effective need to be presented first.
- Professional education about de-implementation of interventions combined with supportive individual feedback needs to be prioritised, starting during initial training and continuing throughout professional life.
- If there is professional uncertainty about the benefits of certain treatments, or the patient requests low-value investigations, the professional and patient should use 'watchful waiting' as an active consultation strategy, which supports patient and professional concerns. Here, the professional will not prescribe active intervention, but will agree with the patient to review symptoms for a time-limited period, after which further discussions about interventions will take place.
- The relationship between professionals and their patients is an important aspect of care, which can result in emotional difficulties if de-implementation is not managed in a clear and supportive way, thereby limiting its effectiveness.
- There is an onus on health-care organisations to give de-implementation equal consideration within short- and long-term policy strategy.



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