

National Institute for Health & Clinical Excellence**Falls****Guideline Development Group (GDG) meeting 3**Tuesday 15th May 2012

Level 1A, City Tower, Piccadilly Plaza, Manchester, M1 4BD

GROUP MEMBERSHIP

| In Attendance | |
|-----------------------------|-----------------------|
| GDG Members | |
| Damien Longson (DL) (Chair) | JoAnne Panitzke |
| Senel Arkut | Frances Healey |
| Julie Windsor | Harm Gordijn |
| Ray Jankowski | John Taylor |
| Caroline Brown | Cameron Swift |
| Rosemary Leaf | |
| Lindsay Smith | |
| NICE Staff | |
| Stephanie Mills (SM) | |
| Sheryl Warttig (SW) | |
| Steven Ward (SWard) | |
| Gabriel Rogers (GR) | |
| Dylan Jones (DJ) | |
| Michael Heath (MH) | |
| Rachel Ryle (RR) | |
| Apologies: | |
| Opinder Sahota | Jenny Kendrick (NICE) |
| Harry Allen | Lyn Knott (NICE) |

MINUTES OF THE MEETINGTuesday 15th March 2012**1.1 Agenda item 1: Introductions & Objectives**

DL welcomed the group and all GDG members. Apologies for the meeting were received from and Opinder Sahota, Harry Allen, Jenny Kendrick and Lyn Knott. DL asked if there were any changes to declarations of interest above those already declared.

DL outlined the objectives of the one day meeting and made clear that day 1 was for presentation and discussion of the evidence for review question 4b. DL also explained because of the lack of evidence around falls service delivery, formal consensus methods would be used to agree the underpinning principles for recommendations.

1.2 Agenda item 2: Review Question 4b (RQ4b) – overcoming service delivery barriers

SW presented an overview of the evidence for RQ4b on overcoming the barriers to delivery. SW discussed the inclusion/ exclusion criteria of studies within this question and also touched on issues around making recommendations on 'discharge'. The group noted these issues also the lack of evidence for this particular area. The GDG also discussed issues around the applicability of studies that looked at service delivery in non-UK settings. The GDG went on to agree the evidence statements for RQ4 with some minor revisions.

1.3 Agenda item 3: Using formal consensus methods

DJ gave a presentation on the use of formal consensus methods as a way of explicit and transparent decision-making. DJ also stressed that the recommendations on service delivery have the potential to make a great impact on national practice but reminded the group that the original Falls guideline (CG21) cannot be altered.

1.4 Agenda item 4: RQ4 – Voting on principles for recommendations

SW presented the draft principles for recommendations to the group. The principles were categorised by each service delivery barrier identified by the GDG following GDG 1. The principles were drawn from the evidence base for RQ4a & b and the findings from the Royal College of Physicians Falls audit. In cases where there was no evidence or very little the extremes for each principle was given for the group to vote on. GDG members were assured that areas where there was no consensus would be talked about as part of a structured discussion session later on in the day. It was also confirmed to group members that voting would be anonymous and only anonymised aggregated results would be presented back to the GDG.

1.5 Agenda item 5: Health Economics

SWard presented to the group on the progress of developing a health economic model to underpin the Falls guideline. SWard told the GDG about the data and assumptions that were used to generate the model. The GDG felt that another health state may need to be included to reflect step down care, which is common for people who leave hospital to go home following a fall. The group also considered whether the increased risk of falling after a first fall and how this should be included in the model.

1.6 Agenda Item 6: Formal consensus methods structured discussion

Through discussion chaired by DL the group went through all the principles which had not reached consensus. SW took note of the GDG discussions to inform the redrafting of the principles so that the GDG would be able to vote on them again.

1.7 Agenda item 7: Summary of the day

DL thanked the group for their input and SM confirmed that the next GDG meeting would be on 19/20 June 2012.

