## NICE Collaborating Centre for Social Care

## Intermediate care (including reablement) Guideline Committee meeting 6

28th April 2016, 0945-1630, SCIE Offices, Meeting room 1, Kinnaird House, 1 Pall Mall East, London, SW1Y 5BP

## **Minutes**

Guideline Committee Members		
Name	Role	
Laura Stuart-Neil (LS)	Frailty Programme Manager (Vice-chair)	
Andrew Nwosu (AN)	Regional Allied Health Professional Lead	
Caroline Ryder–Jones (CRJ)	Specialist in Dementia and Reablement	
John Murray (JM)	Service user/carer	
Kate Burgess (KB)	Social care commissioner	
Kath Sutherland-Cash (KSC)	Service user/carer	
Lisa Langford (LL)	Occupational Therapist	
Marion Lockett (ML)	Reablement Team Manager	
Phillip Whitehead (PW)	Research Fellow, Occupational Therapist	
Sarah Cambridge (SC)	Principal Occupational Therapist and County Manager	

Other invitees		
Name	Role	Organisation
Beth Anderson (BA)	Senior Lead	NCCSC
Zenette Abrahams (ZA)	Project Manager and minutes	NCCSC
Jennifer Francis (JF)	Lead Systematic Reviewer	NCCSC

The NCCSC is a collaboration led by SCIE











Other invitees		
Name	Role	Organisation
Ted Barker (TB)	Research Assistant	NCCSC
Justine Karpusheff (JK)	Programme Manager	NICE
Paul Ross (PR)	Senior Information Specialist	NCCSC
Annette Bauer (AB)	Economist	NCCSC
Nipa Shah (NS)	Clinical Manager, STARRS (expert witness)	NWLH NHS Trust
Edgar Swart (ES)	Clinical Head Nurse, STARRS (expert witness)	NWLH NHS Trust
Rachel O'Mahoney (RO)	Technical Advisor, Centre for Clinical Practice (observer)	NICE

Apologies		
Name	Organisation	
Antoinette Foers (AF)	Service user/carer	
Claire Waddell (CW)	Health service manager	
Dee Christie (DC)	GC Chair	
Pam Enderby (PE)	Professor of Community Rehabilitation	
Rosa Hui (RH)	Service user/carer	
Terry Turner (TT)	Chair and owner of Domiciliary care agency	

No	Agenda Item	Minutes for NICE website	Action/Owner
1.	Welcome, apologies and potential conflicts of interest	Vice-chair LS welcomed members to the 6 <sup>th</sup> Guideline Committee meeting for this topic. LS would be chairing the meeting in DC's absence. Apologies had been received from DC, AF, PE, TT, RH and CW.  LS asked the GC and other attendees to introduce themselves, to say	
		whether there were any changes to the register of interests, and any particular conflicts of interest in relation to the agenda for the meeting today.  There were no changes to the register of interests (See Appendix 1) and no conflicts in relation to items on the agenda today.	
2.	Minutes and matters arising from the last meeting	The minutes of Guideline Committee 5 meeting held on 8 <sup>th</sup> March 2016 were agreed as an accurate record of the meeting, subject to minor amendments to wording on pages 5. 6 and 9 of the working notes.  The minutes were reviewed for matters arising. Actions were all completed or in hand.	

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3.	Expert witness testimony for RQ3 Crisis Response Intermediate Care	BA briefly explained the process for expert witness testimony to the GC. The expert witnesses then joined the meeting and introductions were made around the room.	
		Nipa Shah, Clinical Manager and Edgar Swart, Clinical Head Nurse from LNWH NHS Trust's STARRS Team presented expert testimony on the outcomes of crisis or rapid response services (as defined by the National Audit of Intermediate Care) to the GC.	
		After the presentation the GC had a chance to ask the expert witnesses questions and further points of clarification.	
		BA thanked NS and ES for attending and for the information they presented. The expert witnesses left the meeting.	
4.	Review draft recs for RQ3	Following the expert testimony, the GC reviewed the draft recs for Crisis response intermediate care (RQ3) in plenary.	
		The draft recs were displayed on the screen. The GC had an opportunity to consider and comment on each draft rec in turn, taking into account the additional testimony/evidence presented by the expert. JF amended the draft recs live as the GC discussed them. These amendments would be captured in the draft Linking Evidence to Recommendation (LETR) tables for review at GC 9 & 10.	
5.	Economic modelling on Reablement	AB presented an overview of the modelling work done for economic priority area D – reablement.	Action 1: AB to amend modelling as agreed and explore work
		AB talked through the structure of the economic model, and the parameters for modelling. The GC provided feedback on the assumptions and values and suggested some changes.	on additional areas identified.
		AB also presented the intial findings of the modelling work.	
		Next steps:	

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		<ul> <li>New model: e.g. hospital discharge focused reablement</li> </ul>	
		Modelling for another economic priority area e.g. hospital-at-home	
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6.	Deview guestien 4 Dechlement	The GC suggested that length of intervention be explored further:  JF gave an overview of the evidence for review question 4 – Reablement,	
О.	Review question 4 - Reablement	and presented the evidence statements.	
		and presented the evidence statements.	
		JF reminded the GC that in the absence of research evidence, they could	
		consider:	
		- a call for evidence	
		- call on expert testimony	
		- arriving at a recommendation by GC consensus	
		- making research recommendations	
7.	Reviewing economic evidence for Question 4 - Reablement	AB briefly talked through the economic evidence relating to reablement.	
8.	Question 4 - Readlement  Question 4 - Writing	The GC formed 2 groups with a mixture of practitioner and service	
Ο.	recommendations (groups) +	user/carer members in each. The groups were allocated evidence	
	noting implementation	statements to focus on and asked to develop recommendations.	
	considerations	Statements to result on and derived to develop recommendations.	
		Each group wrote recommendations based on the evidence statements	
		together with their own collective knowledge and expertise. Both groups	
		were asked to take some time to consider whether there were any other	
		evidence statements that could be drawn from the evidence, to note gaps in	
		the evidence, any research recommendations, and to capture notes about	
	Occasion 4 Diament	policy/practice that was pertinent to this review area.	
9.	Question 4 – Plenary	A nominated member from each group fed back the main points of the group discussion and any draft recommendations.	
		discussion and any draft recommendations.	
		The recommendations were displayed on the screen and each was	
		discussed and agreed in turn. Some amends were made following plenary	
		discussion and these amends were incorporated.	
		A number of issues and actions were noted as a result of GC discussion and	
		these would be captured on the draft Linking Evidence to Recommendation	
40		(LETR) tables, which will be reviewed at GC 9 & 10.	
10.	Gaps in evidence & expert	An expert witness for Crisis Response Intermediate Care was lined up for	
	witnesses	GC8 in August.	

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		Suggestions were given for services/teams that are doing interesting work on supporting people with complex needs or particular conditions.  Previous suggestions for expert witnesses for Dementia reablement would be carried forward.	
11.	Draft review strategy for RQ6	JF presented the draft review protocol for RQ6 – 'information, advice, advocacy, training and support' to the GC for comment.	
		PR talked through the Search strategy, highlighting any changes made and any relevant terms added. The GC commented and suggested a few additional search terms to be included.	
12.	Completing HBIC Ec recs	The GC reviewed and discussed the economic evidence review for RQ1 – Home-based Intermediate Care (from GC meeting 3) in plenary and drafted a few recommendations. These draft recs would be recorded on the draft Linking Evidence to Recommendation (LETR) tables, which would be reviewed at GC 9 & 10.	
13.	AOB	Ted Barker, Research Assistant would be leaving the NCCSC project team and moving to another project within SCIE. Florence Lindsay-Walters will be Ted's replacement and has already been working on the team.	
14.	Date of next GC meeting	GC7 - Tuesday 14 <sup>th</sup> June 2016, SCIE offices, Meeting Room 1	

## Appendix A – Register of Interests

Name	Interests declared
Andrew Nwosu	Directorship of a consultancy company, limited by shared (AB Therapy services) this company has in the past worked with both social care and health sector providers. Within the social care sector provided training for staff around reablement, within the health sector on a consultancy basis for NHSIQ. However the company's main contracts are within the private sector (Centrica) and are in the realm of Ergonomics/Biomechanics so do not compromise the applicant in respect of the current guideline consultations. Work with NHS England on DTOC.
Antoinette Foers	None
Caroline Ryder-Jones	None
Claire Waddell	None
Dee Christie	Clinical Advisor to Care Quality Commission and NICE Fellow.

John Murray	None
Kate Burgess	None
Kathleen Sutherland-Cash	Owner of a business and work as an Equalities Consultant, providing information, support and advice to disabled people, people with long term health conditions, statutory, voluntary and private sector organisations. Responsible for hosting a national Work Advice Service for the Association of Disabled Professionals and their Disabled Entrepreneurs Network. Work has, at times, involved challenging statutory authorities (NHS, DWP and local councils) to ensure that disabled people's needs are met appropriately and policies and procedures are being correctly applied. Involved in supporting many disabled people to make formal complaints about inappropriate health/social care practice and decisions. Also undertaken published research into the principles of the social model of disability in relation to people with learning difficulties ("learning disabilities") and their life stories. Asked to speak on breaking down the barriers to effective person centred support at Dementia 2020 ( <a href="www.dementia2020.co.uk">www.dementia2020.co.uk</a> ) in April 2016 and her company is a partner in the event. Undertaking some work with SCIE in relation to the local implementation of the NCCSC guideline on transition between inpatient hospital settings and community or care home settings for adults with social care needs.
Laura Stuart-Neil	Currently work for UCL Partners which is an AHSN and manages a portfolio of projects related to older people including some with a reablement or independence focus. These projects involve working with health, social care and third sector organisations and focus on the translation of innovation and evidence into practice, often using quality improvement methodology. Some of this work is funded by research grants. Co-author on 'I'm still me: a narrative for co-ordinated support for older people' published in December 2014. I have shared the results of this research and my personal reflections via blogs and twitter. This document is not a RCT but my be considered as evidence for this guideline as it describes the views of older people with regards to independence and health and social care services. Also works as bank occupational therapist at King's College Hospital through NHS Professionals.
Lisa Langford	None
Marion Lockett	None
Pamela Enderby	Received royalties from five books related to outcome measurement and assessment, interests relating to academic reputation and have no other financial interests relevant to this work.
Phillip Whitehead	Holds an NIHR Doctoral Research Fellowship - the research project attached to this award focusses on "Occupational Therapy in Homecare Reablement", author of a systematic review on "Interventions to Reduce Dependency in Personal Activities of Daily Living in Community Dwelling Adults who use Homecare Services" and three further empirical research publications in preparation which are based on the above fellowship programme. These publications are likely to be of relevance to the committee. Publication: Whitehead, PJ, Walker, MF, Parry, RH, Latif, Z, McGeorge, ID and Drummond, AER (submitted) Occupational Therapy in Homecare Re-ablement Services (OTHERS): Results of a Feasibility Randomised Controlled Trial.
Rosa Hui	None
Sarah Cambridge	None
Terence Turner	None