NATIONAL COLLABORATING CENTRE FOR NURSING & SUPPORTIVE CARE (NCC-NSC)


Notes of the Sixth and Seventh Guideline Development Group Meetings
Commencing at 10.00 a.m., Wednesday 21st January 2009
at the Royal College of Nursing HQ, Cavendish Square, London.

Wednesday 21st and Thursday 22nd January 2009 (Room 108)

PRESENT:
John Young (JY, Chair)  Professor and Honorary Consultant Geriatrician, Bradford Teaching Hospitals Foundation NHS Trust
David Anderson (DA)  Consultant in Old Age Psychiatry, Mersey Care NHS Trust
Melanie Gager (MG)  Sister in Critical Care Follow Up, Royal Berkshire NHS Foundation Trust
Jim George (JG)  Consultant Physician, North Cumbria Acute Hospitals NHS Trust
Anne Hicks (AH)  Consultant in Emergency Medicine, Plymouth Hospitals NHS Trust
John Holmes (JHo, Day 1)  Senior Lecturer - Liaison Psychiatry of Old Age, University of Leeds
Sue Latchem (SL)  Guidelines Commissioning Manager, NICE (until 11:30 on day 2)
Emma Ouldred (EO)  Dementia Nurse Specialist, King's College Hospital NHS Foundation Trust
Najma Siddiqi (NS)  Consultant Psychiatrist, Bradford District Care Trust
Rachel White (RW)  Patient/Carer Representative
Matt Wiltshire (MW)  Patient/Carer Representative
Wendy Harvey (WH)  General Manager, Barchester Healthcare

APOLOGIES
Jane Healy (JH)  Senior Clinical Practice Facilitator, UCLH NHS Foundation Trust
Sue Latchem (SL)  Guideline Commissioning Manager, NICE

IN ATTENDANCE
Anayo Akunne (AA)  Health Economist, NCC NSC
Ian Bullock (IB)  Chief Operating Officer, National Clinical Guideline Centre Acute and Chronic Conditions
Andrew Clegg (AC, observer)  Specialist Registrar in General Medicine, Bradford Teaching Hospitals Foundation NHS Trust
Sarah Davis (SD)  Senior Health Economist, NCC NSC
Sarah King (SK)  Consultant reviewer
Lakshmi Murthy (LM)  Research and Development Fellow, NCC NSC
Maggie Westby (MW)  Senior Research & Development Fellow, NCC NSC

Day 1

1. Welcome, introduction and apologies
GDG Chair, JY welcomed everyone to the meeting. JY reported Beverly Tabernacle has had to withdraw from the group.

2. Minutes, declarations of interest and matters arising
JY reviewed the notes from the 5th GDG meeting. There were no points raised by GDG members for correction.

JY asked if there were any updates to individual Declarations of Interest (DoI). JY reported that he would be updating his DoI to include a recent research bid.
3. Risk Factors

MW presented an introduction to the methodology of conducting risk factor reviews, highlighting the importance of quality assessment. MW highlighted that the presentation would focus on patient and procedural risk factors and that pharmacological and environmental risk factors would be presented at a later date.

MW then went on to present the characteristics of the included studies in the risk factor review.

MW asked the GDG to clarify methodological issues that emerged from the review.
(a) Representativeness
(b) Delirium at baseline
(c) Confounders

MW took the GDG through the quality rating for each study, focusing in particular on whether the studies had addressed the important confounding identified by the GDG at the 2nd GDG meeting [25th September 2008].

5. Results

MW presented the results for age and dementia.

(a) Age
The GDG wanted further clarification on how the results from the odds ratio for age as a continuous variable will be used.

Action Point: SD to provide GDG with an example to.

(b) Dementia

Meeting closed at 5:00 pm.

Day 2 (Meeting 7)
1. Welcome, introduction and apologies
GDG Chair, JY welcomed everyone to the meeting.

2. Declaration of interests
There were no updates made to Dols.

3. Risk Factor
MW continued with the presentation of the results from the risk factor reviews and provided an overview of the quality of the studies, updated following the GDG’s comments on the previous day.

(a) Sensory impairment
(b) Drugs
(c) Severity of illness
(d) Comorbidities
(e) Surgery type
(f) Mobility
(g) Sleep deprivation
(h) Dehydration

4. Single component- Prevention (Hydration)
LM presented the results of a study (O’Keeffe 1996) comparing subcutaneous versus intravenous fluid delivery. The presentation can be found on Claromentis at Root/Delirium/GDG meetings 6 and 7.

Action Point: NCC to cross check the NICE Nutrition guideline for recommendations in reference to hydration.

WH presented the research programme that she had implemented at a nursing care home in Bury St. Edmunds.

5. Multicomponent intervention- treatment
MW presented the systematic review relating to multi component interventions and the impact they have on the treatment of delirium.

MW talked the GDG through the type and profile of multi component interventions and the quality assessment of the included studies

7. Health Economics
AA presented the economic model for treatment interventions and the cost of multi-component targeted intervention (MTI) for the prevention of delirium.

AA then presented the GDG the multicomponent interventions for prevention of delirium in surgical as well as general medical patients with the aim of clarifying how these should be costed.

The GDG were presented with information on the personnel who would be required to implement the multicomponent interventions and the associated costs in general medical patients.

9. Consequences of delirium
LM briefly presented to the GDG the outcomes and the confounding factors identified in the consequences of delirium review.

The GDG advised additions or amendments to the list of outcomes to be considered.

9. Date and time of GDG meeting 8

The next meeting is on Wednesday, 4th March 2009, commencing at 10:00 am at the Royal College of Nursing HQ, Cavendish Square, London.

Meeting closed at 15:35