

Rehabilitation after Stroke Stakeholder Scoping Workshop: Royal College of Surgeons 9th December 2009

The stakeholder scoping workshop is held in addition to the scoping consultation on the first draft of the scope, which is scheduled from 25th January 2010 until the 22nd February 2010.

The objectives of the scoping workshop were to;

- obtain feedback on the key clinical issues included in the first draft of the scope
- identify which patient or population subgroups should be specified
- seek views on the composition of the Guideline Development Group (GDG)
- encourage applications for GDG membership.

The scoping group (Technical Team, NICE and GDG Chair) presented a summary of the guideline development process, the role and importance of patient representatives, the process for GDG recruitment and proposed constituency for this group, and the scope. The stakeholders were then divided into 5 groups which included a facilitator and a scribe and each group had a structured discussion around the key clinical issues.

Population

The stakeholder groups considered that the population specified in the scope was correct. Black and ethnic minorities were considered to be an important subgroup to consider.

Key clinical issues

Most stakeholders agreed that the most commonly used interventions had been proposed. Many felt that all the proposed interventions should be included but there was some agreement that it was too early to include the more experimental interventions such as robotics as the evidence available was still mainly lab based. The following occupational and vocational activities were specifically mentioned; return to work, return to voluntary work, community involvement and activities of daily living. The stakeholders considered that education provision on occupational and vocational activities would be helpful. The stakeholders noted that the timing of information provision is different for each individual and their carers / family members, and that information should be offered repeatedly. Stakeholders considered that support for carers / family members should be included.

Points of discussion

Stakeholders discussed the following areas:

- should assessment be included?
- are the interventions included the correct ones?
- prioritisation of the proposed interventions
- what occupational and vocational activities should be included?
- what are the key questions in information, education and support?

Outcomes

Stakeholders found it difficult to come up with a definitive list but the following were amongst those suggested;

Timed up and go, Nottingham ADL, social participation outcomes, goal attainment score, Hospital Anxiety and Depression scale, Rivermead Mobility Index, General Health Questionnaire, SF-36

No other issues were considered specific to this guideline

GDG membership

The stakeholders were asked for feedback on the following GDG constituency;

- Neurologist or physician with expertise in stroke rehabilitation
- Physiotherapist
- GP with expertise in stroke
- Speech therapist
- Geriatrician with expertise in stroke rehabilitation
- Neuropsychologist
- Occupational therapist
- Nurse with expertise in stroke rehabilitation
- Patient/Carer Representative

Overall, stakeholders agreed with the proposed GDG membership. Stakeholders discussed the appropriateness of including other health professionals as full members of the GDG or co-optees:

- Neurophysiotherapist
- Orthotics professional
- Art/music therapist
- Social worker
- Dietician
- Dentist
- Clinical service development manager
- Orthoptist
- Stroke rehabilitation physician

The facilitators for each group closed the meeting by explaining the scoping group will subsequently meet to summarise all key themes that emerge from the workshop and will update the scope accordingly.

The facilitators for each group also encouraged that stakeholders should submit all their comments more formally through the scoping consultation process.