NATIONAL INSTITUTE FOR HEALTH AND CARE 1 **EXCELLENCE** 2 **Guideline scope** 3 Stroke rehabilitation in over 16s (update) 4 5 This guideline will update the NICE guideline on stroke rehabilitation in adults 6 (CG162). 7 The guideline will be developed using the methods and processes outlined in 8 developing NICE guidelines: the manual. 9 This guideline will also be used to update the NICE quality standard for stroke 10 in adults. 1 Why the update is needed 11 12 The NICE guideline on stroke rehabilitation in adults was published in 2013. 13 Since then there have been changes in NICE methods and in the organisation 14 and delivery of stroke services. At the same time, the evidence base has expanded to include more systematic reviews, randomised controlled trials 15 16 and observational studies. The surveillance process has identified new 17 evidence that could affect recommendations. 18 Topic experts, including those who helped to develop the 2013 guideline, 19 advised NICE on whether areas should be updated or new areas added. Full 20 details are set out in the <u>surveillance review decision</u>. However, the 21 surveillance review was published in March 2019 and more evidence is likely 22 to have become available since then. Why the guideline is needed 23 24 Stroke is a major healthcare problem. It can have a devastating impact on the 25 lives of people and their carers. Morbidity from stroke is the single largest 26 cause of complex impairments and limitations on activity. Mood disturbance,

DRAFT

- 1 cognitive impairment and fatigue are particular issues which exacerbate other
- 2 problems and impair overall recovery.
- 3 Although stroke is one of the biggest causes of death in the UK, most people
- 4 survive a first stroke. Thanks to improvements in organised stroke care and
- 5 new acute treatments, the overall survival rate from first stroke has improved
- 6 over the past 10 years. This has led to increases in the number of people in
- 7 the community who need comprehensive post-stroke care and rehabilitation.

8 Current practice

- 9 Modern stroke care starts immediately after the onset of stroke symptoms.
- 10 Most acute care is delivered within stroke units as part of organised stroke
- services. Post-acute care can be delivered in secondary or primary care, often
- by teams working across organisational boundaries.
- Within such services, specialist multidisciplinary teams of appropriately skilled
- 14 professionals work together to deliver goal-directed rehabilitation with the aim
- of maximising function, minimising pain and distress, and enabling people
- who have had a stroke to function in their usual settings,

17 **2 Who the guideline is for**

- 18 This guideline is for:
- health and social care practitioners
- commissioners and providers of stroke rehabilitation services
- people using stroke rehabilitation services, their families and carers.
- 22 NICE guidelines cover health and care in England. Decisions on how they
- 23 apply in other UK countries are made by ministers in the Welsh Government,
- 24 Scottish Government and Northern Ireland Executive.

25 Equality considerations

- 26 NICE has carried out an equality impact assessment during scoping. The
- 27 assessment:
- lists equality issues identified, and how they have been addressed

explains why any groups are excluded from the scope.

2 3 What the updated guideline will cover

3 3.1 Who is the focus?

4 Groups that will be covered

- 5 The guideline will cover people aged 16 and over who have had a stroke and
- 6 who have continuing impairment or limitations on their activities.
- 7 No specific subgroups of people have been identified as needing specific
- 8 consideration.

9 Groups that will not be covered

- 10 The guideline will not cover people who have had a transient ischaemic attack
- 11 or subarachnoid haemorrhage.

12 **3.2 Settings**

13 Settings that will be covered

- 14 The guideline will cover primary, secondary, tertiary and community care
- 15 settings.

16 3.3 Activities, services or aspects of care

17 Key areas that will be covered in this update

- We will look at evidence in the areas below when developing this update. We
- 19 will consider making new recommendations or updating existing
- 20 recommendations in these areas only. We may also restructure the guideline
- 21 to better reflect current models of care. We plan to undertake further scoping
- work during consultation to identify the highest priority questions in these
- 23 sections.
- 24 1 Organising health and social care for people needing rehabilitation after
- stroke, including medicines management.
- 26 2 Assessment

1	Fatigue
2	Vision
3	3 Planning and delivering stroke rehabilitation.
4	 Supported self-care management.
5	 Intensity and frequency of stroke rehabilitation, including 7-day
6	services.
7	 Long-term rehabilitation.
8	4 Specific problems and interventions.
9	 Swallowing.
10	Mouth care.
11	 Communication.
12	 Speech and language therapy combined with app-based therapy
13	tools for aphasia.
14	Movement.
15	 Walking therapy (group training).
16	 Electromechanical and robot-assisted arm training.
17	 Music therapy.
18	 Pain, including shoulder pain.
19	Spasticity.
20	 Transcutaneous electrical nerve stimulation.
21	 Baclofen (oral and intrathecal).
22	 Botulinum toxin.
23	 Mirror therapy.
24	 Urinary incontinence.
25	Proposed outline for the guideline
26	Tables 1 to 3 below outline all the areas that will be included in the guidelin
27	They set out what NICE plans to do for each area in this update. It is

- e.
- 28 anticipated that the guideline may need to be restructured to more clearly
- 29 follow the flow of inpatient rehabilitation, discharge from hospital, and
- community rehabilitation in different settings and for different groups of 30
- 31 people.

1 Plans for each area in the current and updated guideline

2 Table 1 Organising health and social care

Area of care in the current and updated guideline	What NICE plans to do
Stroke units	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Core multidisciplinary stroke team	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Health and social care interface	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Transfer of care from hospital to community	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Medicines management	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members

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1 Table 2 Assessment, planning and delivering stroke rehabilitation

Area of care in the current and updated guideline	What NICE plans to do
Screening and assessment	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Setting goals for rehabilitation	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Planning rehabilitation	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Intensity of stroke rehabilitation	Review evidence: update existing recommendations as needed
Supported self-care management	Review evidence: new area in the guideline
Duration of stroke rehabilitation	Review evidence: new area in the guideline
Providing support and information	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Fatigue	Review evidence: new area in the guideline
Vision	Review evidence: update existing recommendations as needed

3 Table 3 Specific problems and interventions

Area of care in the current and updated guideline	What NICE plans to do
Visual neglect	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Memory function	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Attention function	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members

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Area of care in the current and updated guideline	What NICE plans to do
Emotional functioning	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Swallowing	Review evidence: update existing recommendations as needed
Mouth care	Review evidence: new area in the guideline
Speech and language therapy	Review evidence: update existing recommendations as needed
Speech and language therapy combined with app-based therapy tools	Review evidence: new area in the guideline
Strength and fitness training	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Orthoses for upper limb and for ankle- foot	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Electrical stimulation: upper limb	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Constraint-induced movement therapy	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Shoulder pain	Review evidence: update existing recommendations as needed
Repetitive task training	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Walking therapy: treadmill with or without body weight support	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Walking therapy: group training	Review evidence: new area in the guideline
Electromechanical and robot-assisted arm training	Review evidence: update existing recommendations as needed
Music therapy	Review evidence: new area in the guideline
Electrical stimulation: lower limb	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members

Area of care in the current and updated guideline	What NICE plans to do
Vocational rehabilitation	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Occupational therapy for care home residents	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members
Transcutaneous electrical nerve stimulation, baclofen, acupuncture and botulinum toxin	Review evidence: new area in the guideline
Mirror therapy	Review evidence: new area in the guideline
Long-term health and social support	No new evidence review: retain and refresh recommendations from existing guideline using the expertise and experience of the committee members

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- 2 Recommendations in areas that are being retained from the existing guideline
- 3 may be edited to ensure that they meet current editorial standards, and reflect
- 4 the current policy and practice context.

5 Related NICE guidance

6 Published

- Workplace health: long-term sickness absence and capability to work.
- 8 NICE guideline NG146
- Stroke and transient ischaemic attack in over 16s: diagnosis and initial
- 10 management. NICE guideline NG128
- Neuropathic pain in adults: pharmacological management in non-specialist
- 12 <u>settings. NICE guideline CG173</u>
- Spasticity in under 19s: management. NICE guideline CG145

14 NICE guidance that will be updated by this guideline

• Stroke rehabilitation in adults. NICE guideline CG162

- 1 NICE guidance about the experience of people using NHS services
- 2 NICE has produced the following guidance on the experience of people using
- 3 the NHS. This guideline will not include additional recommendations on these
- 4 topics unless there are specific issues related to stroke rehabilitation:
- Medicines optimisation. NICE guideline NG5
- Patient experience in adult NHS services. NICE guideline CG138
- 7 Service user experience in adult mental health. NICE guideline CG136
- Medicines adherence. NICE guideline CG76

9 **3.4** Economic aspects

- 10 We will take economic aspects into account when making recommendations.
- We will develop an economic plan that states for each review question (or key
- 12 area in the scope) whether economic considerations are relevant, and if so
- whether this is an area that should be prioritised for economic modelling and
- 14 analysis. We will review the economic evidence and carry out economic
- analyses, using an NHS and personal social services (PSS) perspective.

16 3.5 Key issues and draft questions

- 17 While writing the scope for this updated guideline, we have identified the
- 18 following key issues and draft questions related to them:
- 19 1 Organising health and social care for people needing rehabilitation after
- stroke, including medicines management.
- 21 1.1 What planning and support does the stroke team need to provide to
- 22 ensure a successful transition of care and medicines management from
- 23 hospital to the person's home or other care setting?
- 24 2 Assessment
- 2.5 2.1 In people after stroke, what is the clinical and cost effectiveness of
- assessment methods for measuring fatigue?
- 27 2.2 What are the indications for referring people after stroke for specialist
- 28 orthoptist assessment?
- 29 3 Planning and delivering stroke rehabilitation

1		3.1 In people after stroke, what is the clinical and cost effectiveness of
2		high-frequency and high-intensity rehabilitation compared with usual
3		rehabilitation?
4		3.2 In people after stroke, what is the clinical and cost effectiveness of
5		supported self-care management compared with usual rehabilitation?
6		3.3 In people after stroke, what is the optimal duration of active
7		rehabilitation?
8	4	Specific problems and interventions
9		4.1 In people after stroke, what is the clinical and cost effectiveness of
10		interventions to reduce fatigue?
11		4.2 In people after stroke, what is the clinical and cost effectiveness of
12		interventions for swallowing (including neuromuscular electrical
13		stimulation, swallowing exercises, positioning and dietary modification)
14		to improve difficulty swallowing?
15		4.4 In people after stroke, what is the optimal tool for the assessment of
16		oral hygiene?
17		4.5 In people after stroke, what is the clinical and cost effectiveness of
18		enhanced oral hygiene?
19		4.6 In people who have aphasia after a stroke, what is the effectiveness
20		of high-intensity speech and language therapy compared with no speech
21		and language therapy or placebo (social support and stimulation) in
22		improving language, communication abilities and psychological
23		wellbeing?
24		4.7 In people with aphasia after stroke, what is the clinical and cost
25		effectiveness of app-based therapy to augment speech and language
26		therapy?
27		4.8 In people after stroke, what is the clinical and cost effectiveness of
28		group training to improve walking?
29		4.9 In people after stroke, what is the clinical and cost effectiveness of
30		electromechanical and robot-assisted arm training in improving function
31		and reducing disability?
32		4.10 In people after stroke, what is the clinical and cost effectiveness of
33		music therapy?

1	4.11 In people with shoulder pain after stroke, what is the clinical and
2	cost effectiveness of transcutaneous electrical nerve stimulation,
3	acupuncture, functional electrical stimulation and intra-articular steroid
4	injection in reducing pain?
5	4.12In people after stroke, what is the clinical and cost effectiveness of
6	interventions (transcutaneous electrical nerve stimulation, intrathecal
7	baclofen, oral baclofen, botulinum toxin and acupuncture) in reducing
8	spasticity?
9	4.13 In people after stroke, what is the clinical and cost effectiveness of
10	mirror therapy?
11	4.14 In people after stroke, what is the clinical and cost effectiveness of
12	interventions (including bladder retraining and botulinum toxin) on
13	improving urinary incontinence after a stroke?

14 3.6 Main outcomes

- 15 The main outcomes that may be considered when searching for and
- assessing the evidence are:
- 17 physical function
- communication (ability to communicate)
- 19 activities of daily living
- health-related quality of life.

21 4 NICE quality standards and NICE Pathways

22 4.1 NICE quality standards

- 23 NICE quality standards that may need to be revised or updated when
- 24 this guideline is published
- Stroke in adults. NICE quality standard 2

26 **4.2 NICE Pathways**

- When this guideline is published, we will update the existing NICE Pathway on
- 28 <u>stroke</u>. NICE Pathways bring together everything NICE has said on a topic in
- 29 an interactive flowchart.

1 5 Further information

This is the draft scope for consultation with registered stakeholders. The consultation dates are 6 November to 4 December 2020.

The guideline is expected to be published in December 2022.

You can follow the progress of the guideline.

Our website has information about how NICE guidelines are developed.

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