



Surveillance report 2017 – Home care: delivering personal care and practical support to older people living in their own homes (2015) NICE guideline NG21

Surveillance report

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Surveillance decision

We will not update the guideline on [Home care: delivering personal care and practical support to older people living in their own homes](#) at this time. However, we will make the following amendments:

- [Recommendation 1.3.8](#) will be amended to emphasise that NICE guidance is available to assist with the referral and management of a range of conditions.
- [Recommendation 1.4.8](#) will be amended to ensure it addresses all protected characteristics in the Equality Act 2010.

Further details on these changes are included in [appendix A](#): summary of evidence from surveillance.

Reason for the decision

Assessing the evidence

For this guideline, we checked any legislation, policy, or other guidance documents that had been issued or updated since NICE guideline NG21 was published. We also checked any Cochrane reviews related to the guideline, this included the 1 review used to inform the recommendations during development, as well as others published since 2013 when the original search took place. Each piece of evidence was checked against the guideline recommendations to assess any potential impact (see [appendix A](#)).

We did not undertake a formal evidence review for this guideline in the current surveillance review. Initial intelligence gathering indicated that there is a lack of new research in this area. This was confirmed by members of the original guideline committee, who agreed that there had been no substantial changes to the evidence base that would affect the guideline at this point (see [views of topic experts](#)).

Equalities

An equality issue was raised during stakeholder consultation regarding recommendation 1.4.8.

See [surveillance decision](#) for further details on how this issue has been addressed.

Overall decision

After considering the evidence described above as well as the views of topic experts and stakeholders, we propose to not update this guideline.

See [how we made the decision](#) for further information.

How we made the decision

We check our guidelines regularly to ensure they remain up to date. We based the decision on surveillance 2 years after the publication of NICE's guideline on [home care](#) (NICE guideline NG21) in 2015.

For details of the process and update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual.

Evidence

As well as checking any relevant legislation, policy or other guidance that had been issued or updated since the guideline was published, we also checked for relevant ongoing research. This will be evaluated again at the next surveillance review of the guideline.

See [appendix A](#): summary of evidence from surveillance for details of all evidence considered, and references.

Views of topic experts

We considered the views of three topic experts who were members of the original guideline committee. All of the topic experts were in agreement that the guideline does not need updating. However, they each expressed a concern that a continuing financial pressure on local authorities and home care providers is currently a major barrier to the implementation of the recommendations. It was also highlighted that the UK Home Care Association released a new version of the 'Minimum Price for Home Care' guidance. These factors do not directly affect the guideline as the recommendations still stand and they are not expected to affect the economic conclusions of the guideline. None of the topic experts were aware of any ongoing research in this area that may impact on the guideline.

We also considered the views of Public Health England (PHE), who felt that the guideline should be updated. New evidence was highlighted on dementia prevention, intervention and care as well as the publication of PHE's revised training materials for carers on dementia awareness. This evidence is more applicable to the NICE guideline on [dementia, disability and frailty in later life – mid-life approaches to delay or prevent onset and will](#) passed onto relevant NICE teams. Furthermore, NICE guideline NG21 already recommends

that carers should understand common conditions such as dementia and be able to recognise and respond to symptoms (see [recommendations 1.3.8](#) and [1.7.4](#)), therefore it is unlikely that the new evidence will impact the guideline. An updated consensus statement from PHE on falls and fractures was also highlighted, however this document is more relevant to the NICE guideline on [falls in older people: assessing risk and prevention](#) (NICE guideline CG161) and will be passed onto relevant NICE teams.

Views of stakeholders

Stakeholders commented on the decision not to update the guideline. Overall, 13 stakeholders commented. See [appendix B](#) for Stakeholders' comments and our responses. Of the 13 stakeholders that commented on the proposal to not update the guideline, 7 agreed with the decision.

Reasons for disagreement with the decision not to update included requests to update recommendations with greater reference to signposting to relevant national/local organisations, training of home care professionals in dealing with sensitive issues, stigma and discrimination associated with certain conditions. We felt that these issues were addressed within the existing recommendations of the guideline. One respondent disagreed on the decision based on the omission of research on ethics of care, which was out of scope for the guideline, and as such not considered as part of the 2-year surveillance review process. However, the scope does cover developing relationships with people using their services, their family and carers and the evidence reviews included published qualitative research on both carer and service user's views/experiences.

Two stakeholders commented that recommendations could make reference to signposting of certain health services such as sight and hearing tests, which were deemed to be highly important for the population of interest. We will refresh recommendation 1.3.8 to emphasise that NICE guidance is available to assist with the referral and management of a range of conditions.

Two stakeholders suggested that the guideline did not specifically address the needs of some populations such as older lesbian, gay, bisexual and transgender people, or people living with HIV, and that these people often face inequalities due to a lack of awareness of their rights and/or stigma amongst health and social care professionals. Stigma and discrimination was addressed within the existing recommendations of the guideline: it states that staff working practices should maximise control, dignity and respect for service users. Several stakeholders also commented on various other equality issues, including

that the recommendations did not specifically focus on the needs of individuals with multiple disabilities, elderly hearing and sight care or the perspectives of older people. Given that the evidence reviews included service user's views/experiences and the committee involved in the development of this guideline included two community members that were service users, we felt that the perspectives of older people had been taken into account. We will refresh recommendation 1.4.8 to ensure it addresses all protected characteristics in the Equality Act 2010.

See [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual for more details on our consultation processes.

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