

National Institute for Health and Clinical Excellence

Centre for Public Health Excellence

Review for Guidance Executive 18th October 2011

Review of Public Health guidance (PH16) – Occupational therapy interventions and physical activity interventions to promote the mental wellbeing of older people in primary care and residential care

1 Background information

Guidance issue date: 2008

3 year review: 2011

2 Process for updating guidance

Public health guidance is reviewed 3 years after publication to determine whether all or part of it should be updated.

The process for updating NICE public health guidance is as follows:

- NICE convenes an expert group to consider whether any new evidence or significant changes in policy and practice would be likely to lead to substantively different recommendations. The expert group consists of topic experts, practitioner professional bodies and representatives of relevant government departments.
- NICE consults with stakeholders on its proposal for updating the guidance.

- NICE may amend its proposal, in light of feedback from stakeholder consultation.
- NICE determines where any guidance update fits within its work programme, alongside other priorities.

3 Consideration of the evidence and practice

The expert group met in July 2011 to discuss current and ongoing research of relevance to the current recommendations.

A range of evidence from policy and practice was identified that might add detail to the guidance. It was thought unlikely that the new evidence would invalidate the existing recommendations.

Much of the evidence discussed related to the implementation of the guidance, for example:

- recommended actions can also be delivered by professionals who have been trained to apply the principles and methods of occupational therapy.
- skills development, training and approaches to delivery, particularly for those working with older people with cognitive impairment and dementia.

Recommendation 1: Occupational therapy interventions

The expert group considered this recommendation to be still relevant and useful. New evidence was identified that might add detail to the recommendations, for example occupational therapy interventions improving the mental wellbeing of older people diagnosed with dementia.

Recommendation 2: Physical activity

The expert group considered this recommendation still to be relevant and useful. New evidence, for example on the role of physical activity in preventing or delaying dementia might add detail to the recommendation but would be unlikely to change it.

It was suggested the guidance could be amended to include a link to the Chief Medical Officer's physical activity guidelines for older adults (2011) <http://www.nhs.uk/Livewell/fitness/Pages/physical-activity-guidelines-for-older-adults.aspx>

Recommendation 3: Walking Schemes

There is new evidence of the cost effectiveness of walking for health schemes.

Recommendation 4: Training

The expert group considered this recommendation still to be relevant and useful. They noted that occupational therapists are asked to help adapt physical activity for people with cognitive impairment and to provide training for care home staff. The group also noted new schemes for accredited training and skills development for those who work with people with cognitive impairment and/or dementia.

The group was aware of research in progress or soon to begin on focused intervention and training for care homes (FITS), workforce and training for the care of people with dementia.

4 Implementation and post publication feedback

In total, 13 enquiries were received from post-publication feedback, most of which were general information requests, such as for printed copies and

requests for the web link. Other enquiries included a request for guidance about staffing levels and skill mix in a care home setting, exercises for the elderly and guidance on older adults with mental health issues.

No new evidence was identified through post publication enquiries or implementation feedback that would indicate a need to update the guidance.

5 Stakeholder consultation

The proposal was made to stakeholders that the guidance should not be updated at this time. This was because no additional areas had been identified which were not covered in the original guidance scope or would indicate a significant change in practice. There was nothing which would invalidate or change the direction of the current recommendations.

Nine stakeholders responded, including the College of Occupational Therapists, the Royal College of General Practitioners, the Royal College of Nursing and Unite the Union/Mental Health Nursing Association. No additional evidence was identified by the stakeholders that would indicate a need to update the guidance. Four stakeholders explicitly stated they were in agreement that the guidance should not be updated at this time; the remaining 5 stakeholders alluded to agreement, stating that the guidance should be updated only if there is new evidence available. Suggestions were made to include links to recent policy documents and a link to the Chief Medical Officer's physical activity guidelines for older adults (2011).

6 Equality and diversity considerations

There has been no evidence to indicate that the guidance does not comply with anti-discrimination and equalities legislation.

7 Recommendation

A link should be added to the NICE webpage and pathway for this guidance to the Chief Medical Officer's physical activity guidelines for older adults (2011).

The guidance should not be updated at this time. It should be reviewed again in 3 years.

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