

j2019 surveillance – [Stroke rehabilitation in adults \(2013\) NICE guideline CG162](#)

Stakeholder consultation comments form - proposal ‘to update’

Consultation on the proposal ‘to update’ opens at: 9am, Thursday 31 January 2019

Comments on proposal to be submitted: no later than 5pm, Wednesday, 13 February 2019

Please enter the name of your registered stakeholder or respondent organisation below.

Please use this form for submitting your comments to NICE.

1. Please put each new comment in a new row.
2. Please note – we cannot accept comments forms with attachments such as research articles, letters or leaflets. If we receive forms with attachments we will return them without reading the comments. If you resubmit the comments on a form without attachments, this must be by the consultation deadline.
3. If you wish to draw our attention to published studies, please supply the full reference.
4. If you’re commenting for an organisation, your organisation needs to be [registered as a stakeholder](#).

Not eligible? Contact the [registered stakeholder organisation](#) that most closely represents your interests and pass your comments to them.

We can accept comments from individuals. These will be considered, but you won’t get a formal response and they won’t be posted on the NICE website. Wherever possible we encourage you to submit your comments through a registered stakeholder organisation.

Organisation name – Stakeholder or respondent (if you are commenting as an individual rather than a registered stakeholder or respondent organisation, please leave blank):	British and Irish Orthoptic Society
Disclosure Please disclose whether the organisation has any past or current, direct or indirect links to, or receives funding from, the tobacco industry.	n/a
Name of commentator:	Nicola Bennett and Lauren Hepworth

[Developing NICE guidelines: the manual](#) gives an overview of the processes used in surveillance reviews of NICE clinical guidelines.

ID	Questions	Overall response yes / no	Comments Please insert each new comment in a new row
1	Do you agree with the proposal to update the guideline?	yes	<p>The current guideline pays limited attention to vision in stroke. There is increased evidence of the incidence of visual problems in stroke and recommendations that orthoptists be part of the core MDT.</p> <p>Screening and assessment 1.2.1: We agree that all patients should have a vision screening assessment as soon as possible on admission to hospital</p> <p>1.4.3 Those with visual neglect should have a full orthoptic investigation to ensure there are no other co-existing visual impairments alongside the neglect such as visual field loss.</p> <p>1.6 Vision We agree that this section should be expanded to include the wider variety of post stroke visual impairment and not just diplopia and should include information about when this should be done following admission and by whom. Evidence is available that tells us Orthoptists should screen for all visual impairments: visual field loss, ocular motility problem, visual perception, reduced visual acuity and visual neglect.</p> <p>1.6.2 All patients who fail a vision screen should have a full orthoptic assessment and management and should not be limited to patients with diplopia. All visual impairments will impact on the patient's psychosocial well being and their ability to undertake effective rehabilitation.</p> <p>1.6.3 This should not be limited to patients with awareness of hemianopia. Those without awareness should also be offered therapy and support to undertake that therapy. It should also not be limited to hemianopia but patients with field loss.</p>
2	<p>NICE guideline CG76 Medicines adherence covers: Patient involvement in decisions about medicines; Supporting adherence; Reviewing medicines; and Communication between healthcare professionals. NICE guideline NG5 Medicines optimisation covers: Patient safety</p>		

ID	Questions	Overall response yes / no	Comments Please insert each new comment in a new row
incidents; Communication when patients move between care settings; Medicines reconciliation; Medication review; Self-management plans; Patient decision aids; Clinical decision support; and Organisational and cross-sector working.			
2a)	Are medicines management issues that may arise in stroke rehabilitation suitably covered by other NICE guidance such as NICE CG76 and NICE NG5?		Not able to comment
2b)	If not, please indicate any stroke-specific medicines considerations that may be missing from NICE guideline CG162 Stroke rehabilitation in adults.		
3	A Cochrane overview of interventions for upper limb function found benefits of: mental practice, interventions for sensory impairment, and unilateral (vs. bilateral) arm training. The evidence base for these was systematic reviews from 2009 to 2013, and the current surveillance review found no more recent evidence. [Note: the Cochrane overview covered other interventions which have more recent evidence bases – see individual sections in Appendix A for details].		
3a)	Should any of these 3 interventions be considered in an update of CG162?		Not able to comment
3b)	If so, are you aware of more recent evidence since 2013?		
4	Do you have any comments on areas excluded from the scope of the guideline?	no	
5	Do you have any comments on equalities issues?	yes	Vision is an important area of priority in stroke that has been documented by multiple stakeholders and interested parties including RCP and the stroke association and this has been given less information in the guideline in its current form. Vision should be included as a key priority given the evidence for change. Other professional groups have been given clear guidelines for their roles within stroke however none are provided for orthoptists. There are no guidelines to discuss provision of information, education and training in visual problems to MDT, patients, carers and family

ID	Questions	Overall response yes / no	Comments Please insert each new comment in a new row
			Visual impairment is not discussed in return to work sections. There needs to be consideration of the visual demands of the job and the effects of visual impairment on work performance and any adaptations that need to be made

Please email this form to: surveillance@nice.org.uk

Closing date: 5pm, Wednesday 13 February 2019

PLEASE NOTE: NICE reserves the right to summarise and edit comments received during consultations, or not to publish them at all, if NICE's reasonable opinion is that the comments are voluminous, publication would be unlawful or publication would be otherwise inappropriate.