National Institute for Health and Care Excellence

Medicines Optimisation

Stakeholder Comments – Draft scope

Please enter the name of your registered stakeholder organisation below. **NICE is unable to accept comments from non-registered organisation or individuals. If you wish your comments to be considered please register via the NICE website or contact the registered stakeholder organisation that most closely represents your interests and pass your comments to them.**	
Stakeholder organisation:	**British Association of Dermatologists**
Name of commentator:	**Therapy & Guidelines sub-committee**

Comment No.	**Section number** Indicate **number** or **'general'** if your comment relates to the whole document	**Comments** Please insert each new comment in a new row. Please do not paste other tables into this table, as your comments could get lost – type directly into this table
Example	3.4.6	Our comments are as follows …….
Proformas that are not correctly submitted as detailed in the line above may be returned to you		
1	General	We agree with the definition of '*medicines optimisation*'.
2	General	We agree with the priorities of the guidelines, which will focus on patient safety, improving patient information with regard to their medicines and creating systems to avoid prescribing and dispensing errors.
3	General	We would like the role of pharmacogenetics in improving safety and outcome to be considered.
4	General	We recommend that the value of improving efficacy and compliance, particularly with topical and inhaled products, by nurse-directed education of patients should be addressed.
5	General	We recommend that the scope should explicitly address different modes of treatment including topical, inhaled, orals and injectables.
6	4.1.1	We strongly recommend the scope should include both inpatients and outpatients, as well as day cases – currently it mentions medicines on discharge of patients, which implies the inclusion of only inpatients.
7	4.1.1	We recommend the scope should also include pregnant and breastfeeding female patients.
8	4.1.1	We recommend that neonates and infants should be given particular consideration.
9	4.1.1	We recommend that people with long-term conditions (not just multiple) should also be mentioned.
10	4.3.1	We agree with the inclusion of '*interventions to reduce inappropriate variations in prescribing, such as variation in the uptake of NICE-approved medicines and in the implementation of NICE guidance*' in the scope. The prescribing of e.g. biological therapies is patchy and inconsistent with NICE guidance in all areas of the UK, and this needs to be addressed.

11	4.3.1	We agree with the inclusion of '*interventions to reduce medicines-related patient safety incidents, including prescribing errors, dispensing errors, administration errors and monitoring errors*' in the scope. Although specific named medicines are out-of-scope, we strongly feel that isotretinoin and the ineffectiveness of the associated Pregnancy Prevention Plan should be explicitly highlighted.
12	4.3.1	Increasing safety of prescribing medications should specifically address drug interactions.
13	General	NHS organisations responsible for prescribing policies and formularies should ensure that when generic substitutions are made, there are adequate safeguards to ensure that patients with allergy to components of a product other than the principal ingredient are not accidentally treated with a substance to which they are allergic, and that such policies guidelines and formularies include explicit provision to ensure that there are safe arrangements for patients with relevant allergies to continue to receive appropriate products if generic substitutions are to be recommended by a Healthcare Organisation or Practitioner.

Please add extra rows as needed

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

Closing date: 5pm on 4 October 2013

PLEASE NOTE: The Institute reserves the right to summarise and edit comments received during consultations, or not to publish them at all, where in the reasonable opinion or the Institute, the comments are voluminous, publication would be unlawful or publication would be otherwise inappropriate.