



# Resource impact statement

Resource impact

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## No significant resource impact is anticipated

We do not expect this guideline to have a significant impact on resources; that is:

- the resource impact of implementing any single guideline recommendation in England will be less than £1 million per year (or £1,800 per 100,000 population) **and**
- the resource impact of implementing the whole guideline in England will be less than £5 million per year (or £9,000 per 100,000 population).

Where clinical practice changes as a result of this guideline, it is not anticipated that there will be a significant change in resource use at a national level.

This is because:

- the recommendations on referral to specialist care aim to reduce the variability in referral and encourage more timely referrals which will improve outcomes and reduce the potential risk of scarring and treatments. There may be a small increase in referrals at a local level but this is not expected to be significant.
- the recommendations on antibiotic use may reduce long-term use of oral and topical antibiotics in favour of more appropriate use with regular review.
- the recommendation on photodynamic therapy would represent a change in practice and may require some additional resource use locally if more services are created. However many dermatology services in England already have photodynamic therapy facilities and the number of people with acne expected to be eligible for this treatment is small.
- the recommendations on glycolic acid peel or CO<sub>2</sub> laser treatment with punch elevation represent a change in practice but the eligible population will also be small.

Dermatology services are commissioned by integrated care systems and clinical commissioning groups. Providers are NHS hospital trusts, community dermatology services and GPs.