

# National Institute for Health and Care Excellence

## Medicines Optimisation – NICE Short Clinical Guideline

Stakeholder scoping workshop  
10.30am, 30 September 2013, Manchester

### Workshop notes

**Attendees:** Darren Allsobrook, Nerea Asiain, Philip Aubrey, Emma Baggaley, Anne Baileff, Chris Barker, Helen Brewah, Brian Brown, Liz Butterfield, Alastair Buxton, Eileen Callaghan, Rebecca Cheatle, Susan Clarke, James Dale, Rob Darracott, Sue Dickinson, David Erskine, Cecilia Fenerty, Robin Ferner, Catherine Fewster, Leslie Galloway, David Gerrett, Raymond Guirguis, Leyla Hannbeck, Sue Hawker, Katrina Humphreys, Manir Hussain, Anne Joshua, Andrew Lawrence, Harriet Lewis, Steve May, Riz Miarkowski, Ann Millar, Jason Miller, Jane Munro, Michelle Murray, Charles Phillips, Mark Robinson Alison Sampson, Lance N Sandle, Matthew Sawa, Richard Seal, Simon Selo, Helen Seymour, David Terry, Kate Towers, Katrina Vout, Jo Watson, Andrew White,

**NICE staff and GDG Chair:** Mark Baker (MB), Weeliat Chong (WC), Paul Chrisp (PC), Cheryl Giddings (CG), Anthony Gildea (AG), Johanna Hulme (JH) (Project Lead), Neal Maskrey (NM), Clifford Middleton (CM), Greg Moran (GM), Shelly Patel (SP), Louise Picton (LP), Ian Pye (IP), Rebekah Robinson (RR), Erin Whittingham (EW)

#### **1. Welcome and introductions**

MB opened the meeting and welcomed everyone.

#### **2. Introduction to NICE**

CM gave a presentation highlighting the aims and objectives of the workshop. He also explained the importance of the scope.

#### **3. Medicines and prescribing centre and the role of the guideline development group**

JH gave a brief background to the NICE Medicines and prescribing centre. JH explained the role of the guideline development group, its likely make-up and the guideline development process.

#### **4. Patient and public involvement programme**

EW gave a brief presentation on the NICE patient and public involvement programme.

#### **5. Clinical need for the guideline and presentation of the scope**

WC gave a presentation on the need for the guideline and the current draft scope.

## **6. Group discussion**

The delegates broke into 5 groups and discussions took place regarding the current draft scope. Each group made notes on flipchart and the facilitators fed back to the Medicines and prescribing centre to allow the discussions to feed in to the scoping process. The main points highlighted by each group were fed back during agenda item 7.

## **7. Feedback and round-up**

MB chaired the feedback from the groups and explained the next steps in the scoping and development process. The main points fed back to the Medicines and prescribing centre from each group were:

- Definition of medicine optimisation needs to be clear
  - Needs to be more concise than the current definition
  - Very wide topic
  - People will understand different things by the term
  - Patients may not understand the term medicine optimisation
- Population should include everyone
  - Not useful to break the population down
- Outcomes should focus on improvement after intervention
  - Patient experience is covered within another NICE guideline
  - Patient responsibility
  - Patient satisfaction
  - Health and social care utilisation
- Guideline should be applicable to all settings
- Challenge of the guideline is to change culture
- For some review questions there is a large amount of cross over and they could be combined. This would need to be looked at by the medicines and prescribing centre.
- Key priorities
  - Patient choice
  - Leadership
  - Learning from patient experience
  - Professional collaboration and communication
  - Transfers of care
  - Reducing medicines related patient safety incidents

**The meeting closed at 13:30.**