**RESPONDENT INFORMATION FORM**

**Please Note** this form **must** be completed and returned with your response.

Are you responding as an individual or an organisation?

[ ]  Individual

[ ]  Organisation

Full name or organisation’s name

Phone number

Address

Postcode

Email

**Information for organisations:**

The option 'Publish response only (without name) is available for individual respondents only If this option is selected, the organisation name will still be published.

If you choose the option 'Do not publish response', your organisation name may still be listed as having responded to the consultation in, for example, the analysis report.

The Scottish Government would like your

permission to publish your consultation

response. Please indicate your publishing

preference:

[ ]  Publish response with name

[ ]  Publish response only (without name)

[ ]  Do not publish response

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

[ ]  Yes

[ ] No

**List of consultation questions**

|  |  |
| --- | --- |
| **PHE Recommendation 1** | “Increasing the availability and use of data on the prescribing of medicines that can cause dependence or withdrawal to support greater transparency and accountability and help ensure practice is consistent and in line with guidance.” |
| **Scottish Context** | Public Health Scotland considered the PHE analysis of prescribing data and replicated for Scotland, this enabled the SLWG to consider differences between England and Scotland and how recommendations in Scotland needed to be adjusted. |
| **SLWG Recommendation 1** | Make data available for all prescribers, health and social care partnerships and patients to allow monitoring of data and improvement in practice. |
| **Question 1.1**Do you agree with this recommendation? |  |
| **Question 1.2**On a scale of 1-5, where 1 is not effective at all and 5 is extremely effective how effective do you think that action will be? |  |
| **Question 1.3**Comments: |  |

|  |  |
| --- | --- |
| **PHE Recommendation 2** | “Enhanced clinical guidance and the likelihood that it will be followed” |
| **Scottish Context** | There are multiple source of Guidance, such as Scottish Intercollegiate Guidance Network (SIGN) and National Institute for Health and Care Excellence (NICE).Scottish Government also produces its own series of Quality Prescribing Guides in partnership with the NHS to support implementation in practice. Work has already started on guides for antidepressants, benzodiazepines and hypnotics and gabapentinoids. Scoping documents have been shared with the SLWG. |
| **SLWG Recommendation 2** | Develop or renew Quality Prescribing Guides for all classes of drugs covered by the SLWG: z-Drugs, benzodiazepines, gabapentinoids, opioids, antidepressants |
| **Question 2.1**Do you agree with this recommendation? |  |
| **Question 2.2**On a scale of 1-5, where 1 is not effective at all and 5 is extremely effective how effective do you think that action will be? |  |
| **Question 2.3**Comments: |  |