

ASHTONS PHARMACY NEWS

WINTER 2022

Medication news | Clinical guidelines | Sector updates



Continuing professional development: hepatic encephalopathy



Also in this issue:

- The CQC is changing the way they inspect
- The effect of COVID-19 on clozapine monitoring
- Ashtons celebrates 'Growth and Innovation' at the annual Pharmacists' Conference
- New training seminars including Sleep Disorders and ADHD

Contents

Welcome	3
---------	---

The latest clinical guidelines	4–7
--------------------------------	-----

- CG137: Epilepsies: diagnosis and management
- CG142: Autism spectrum disorder in adults: diagnosis and management
- CG170: Autism spectrum disorder in under-19s: support and management
- QS202: Workplace health: long-term sickness absence and capability to work
- NG203: Chronic kidney disease: assessment and management
- NG209: Tobacco: preventing uptake, promoting quitting and treating dependence
- NG197: Shared decision making
- NG199: *Clostridioides difficile* infection: antimicrobial prescribing
- QS201: Venous thromboembolism in adults
- NG28: Type 2 diabetes in adults: management
- NG17: Type 1 diabetes in adults: diagnosis and management

FEATURE

Continuing professional development: hepatic encephalopathy	8–9
---	-----

Ashtons commits to ESG	10
------------------------	----

Ashtons' new courier delivery service	10
---------------------------------------	----

Lead Pharmacist Dorna Ghashghaei takes to the ring for Charity Boxing Nights	11
--	----

Pre-order your flu vaccine for next winter 2022/2023	11
--	----

Smoke-free society	12-13
--------------------	-------

The effect of COVID-19 on clozapine monitoring	13
--	----

New training seminars: Sleep disorders, ADHD and Smoking Cessation in Mental Health	14
---	----

Your training allocation for 2022 is now available	14
--	----

Ashtons e-Works wins at the HTN Now Awards 2022	15
---	----

The CQC is changing the way they inspect	15
--	----

Celebrating 'Growth and Innovation' at the annual Pharmacists' Conference	16
---	----



Welcome to the Winter 2022 issue of Ashtons Pharmacy News

Hepatic encephalopathy is a disorder caused by a build-up of toxins in the brain that can happen with advanced liver disease. It's important for healthcare staff to be aware of the symptoms as they are sometimes so mild that they are not easily noticed. We cover this and the different forms and grades of the disorder in our feature on pages 8-9.

Despite campaigns and restrictions in recent years, smoking is still the largest cause of preventable death in England. With Public Health England's aim of a 'smoke-free society by 2030', we cover how to use smoking cessation products and medicines to maximum efficacy on pages 12-13.

It's been a difficult few years with remote working during the pandemic but we were delighted to be able to host our annual Pharmacists' Conference for the first time in two years in September 2021, where our pharmacists

and associate healthcare staff were able to meet for two days of learning and development. It was fantastic for the team to be able to see each other in person and catch up on what everyone has been up to – we were especially delighted to hear of Lead Pharmacist Dorna Ghashghaei's foray into boxing where she helped raised over £90,000 for the Royal Manchester Children's Hospital.

If you have any queries, or would just like to chat about how we can help with your service provision, please don't hesitate to get in touch!

FOR YOUR INFORMATION: We provide two newsletters



The Palliative Care Edition of *Ashtons Pharmacy News* covers the latest relevant clinical guidelines, recommendations and important medical information for the palliative care industry.



**HOSPITAL
PHARMACY SERVICES**

SUBSCRIBE NOW

Register at:
<http://eepurl.com/do9dtD>

or email us at:
customerservice@ahps.co.uk

Clinical guidelines

NICE guidance and quality standards

CG137: Epilepsies: diagnosis and management

This NICE clinical guideline was updated in May 2021 and covers the diagnosis, treatment and management of epilepsy and seizures in children, young people and adults in both primary and secondary care. It makes several recommendations including:

- diagnosis and investigations to support a diagnosis
- pharmacological treatment and advice for seizures
- referral to tertiary services
- psychological interventions
- treatment of prolonged or repeated seizures
- advice for specific groups of people with epilepsy
- regular structured medical review of people with epilepsy

For more information, please visit: www.nice.org.uk/guidance/cg137

CG142: Autism spectrum disorder in adults: diagnosis and management

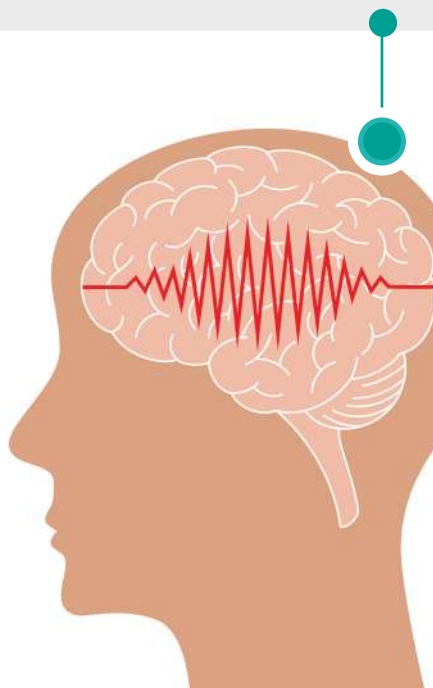
This NICE guideline was updated in June 2021 and covers the diagnosis and management of both suspected and confirmed autism spectrum disorder in adults. It aims to improve experience of care, and access to interventions and services. It makes recommendations on general principles of care; identification and assessment; organisation and delivery of care; and interventions for autism, behaviour that challenges and coexisting mental disorders.

For more information, please visit: www.nice.org.uk/guidance/cg142

CG170: Autism spectrum disorder in under-19s: support and management

This clinical guideline was updated in June 2021 and covers how health and social care professionals can provide support, treatment and help for children and young people with autism (and their carers). It makes eight recommendations on general principles of care; families and carers; specific interventions for the core features of autism; interventions for behaviour that challenges; interventions for life skills, interventions for autism that should not be used, interventions for coexisting problems and transition to adult services.

For more information, please visit: www.nice.org.uk/guidance/cg170



You can access our library of newsletter articles at:

www.ashtonshospitalpharmacy.com/blog



QS202: Workplace health: long-term sickness absence and capability to work

This NICE quality standard was published in September 2021 and covers helping people return to work after long-term sickness absence, helping prevent movement from short-term to long-term sickness absence and reducing recurring sickness absence. It makes four quality statements on:

- workplace culture and policies
- support during sickness absence
- statement of fitness for work
- support to stay in or return to work

For more information, please visit:
www.nice.org.uk/guidance/qs202



NG203: Chronic kidney disease: assessment and management

This NICE guideline was updated in November 2021 and covers both care and treatment of people with chronic kidney disease (CKD), or people at risk of CKD. It covers the management of anemia and hyperphosphataemia associated with CKD. Additionally, it aims to prevent or delay progression, as well as reduce the risk of complications and cardiovascular disease and makes 12 recommendations.

For more information, please visit:
www.nice.org.uk/guidance/ng203



NG209: Tobacco: preventing uptake, promoting quitting and treating dependence

This NICE guideline was published in November 2021 and covers supporting people aged 12 and over to stop smoking, and help reduce harm from smoking if they are not ready to stop in one go. This guideline brings together all NICE's previous guidelines on using tobacco, with updates including smokeless tobacco. It also covers nicotine replacement therapy and e-cigarettes, and ways to prevent young people from taking up smoking.

For more information, please visit:
www.nice.org.uk/guidance/ng209

Clinical guidelines

NICE guidance and quality standards

NG197: Shared decision making

This NICE guideline was published in June 2021 and covers how to make shared decision making part of everyday care in all healthcare settings. It promotes ways for healthcare professionals and people using services to work together to make decisions about treatment and care, and makes four recommendations:

- embedding shared decision making at an organisational level
- putting shared decision making into practice
- patient decision aids
- communicating risks, benefits and consequences

For more information, please visit:
www.nice.org.uk/guidance/ng197

NG199: *Clostridioides difficile* infection: antimicrobial prescribing

This NICE guideline was published in July 2021 and covers an antimicrobial prescribing strategy for managing *Clostridioides difficile* infection in adults, young people and children. It covers both community and hospital settings and aims to optimise antibiotic use and reduce antibiotic resistance. It makes recommendations on:

- assessment
- treating suspected or confirmed *C. difficile* infection
- advice
- reassessment
- referral
- choice of antibiotic
- preventing *C. difficile* infection

For more information, please visit:
www.nice.org.uk/guidance/ng199

QS201: Venous thromboembolism in adults

This NICE quality standard was published in August 2021 and covers reducing the risk of venous thromboembolism (VTE) in people aged 16 and over who are in hospital. It also covers diagnosis and treatment, and replaces two previous quality standards on venous thromboembolism in adults: QS3 and QS29. It makes five recommendations covering:

- timing of pharmacological venous thromboembolism prophylaxis
- risk assessment for people with lower limb immobilisation
- proximal leg vein ultrasound scan
- anticoagulation review
- follow-up for outpatients with low-risk pulmonary embolism

For more information, please visit:
www.nice.org.uk/guidance/qs201





NG17: Type 1 diabetes in adults: diagnosis and management

This NICE guideline was updated in July 2021 and covers care and treatment for adults with type 1 diabetes. It makes several recommendations, including:

- diagnosis and early care plan
- education and information
- dietary management and physical activity
- blood glucose management
- insulin therapy and insulin delivery
- hypoglycaemia awareness and management
- diabetic ketoacidosis
- managing cardiovascular risk
- managing complications of diabetes

For more information, please visit: www.nice.org.uk/guidance/ng17

NG28: Type 2 diabetes in adults: management

This NICE guideline was updated in February 2022 and covers the care and management of type 2 diabetes for people aged 18 and over. It makes eight recommendations covering individualised care; education; dietary advice and bariatric surgery; diagnosing and managing hypertension; antiplatelet therapy; blood glucose management; drug treatment; and managing complications.

For more information, please visit: www.nice.org.uk/guidance/ng28

Other NICE and clinical guidance:

- NG81: Glaucoma: diagnosis and management <https://www.nice.org.uk/guidance/ng81> (updated January 2022)
- NG205: Looked-after children and young people www.nice.org.uk/guidance/ng205 (published October 2021)
- NG206: Myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome: diagnosis and management www.nice.org.uk/guidance/ng206 (published October 2021)
- NG208: Heart valve disease presenting in adults: investigation and management www.nice.org.uk/guidance/ng208 (published November 2021)
- CG187: Acute heart failure: diagnosis and management www.nice.org.uk/guidance/cg187 (updated November 2021)
- NG210: Pelvic floor dysfunction: prevention and non-surgical management www.nice.org.uk/guidance/ng210 (published December 2021)
- NG211: Rehabilitation after traumatic injury www.nice.org.uk/guidance/ng211 (published January 2022)

FEATURE:

Continuing professional development: hepatic encephalopathy



Hepatic encephalopathy (HE) encompasses a wide spectrum of clinical manifestations of highly variable severity, from asymptomatic forms only detected

in neuropsychological tests to hepatic coma.

The liver has several big jobs to do. One of the most important things the liver does is to change potentially damaging substances that are either made by or taken in by the body and make them harmless. However, if the liver is badly damaged and unable to function properly, these toxins can build up in the bloodstream and, if they enter the brain, they can result in the condition called hepatic encephalopathy (HE).

HE is a disorder caused by a build-up of toxins in the brain that can happen with advanced liver disease. It affects many things including behaviour, mood, speech, sleep and movement.

HE is most commonly seen in patients with liver cirrhosis, but it can also be secondary to liver vascularization disorders without parenchymal injury.

"HE is a disorder caused by a build-up of toxins in the brain that can happen with advanced liver disease. It affects many things including behaviour, mood, speech, sleep and movement."

Early symptoms of hepatic encephalopathy

- confusion
- forgetfulness
- personality or mood changes
- stale or sweet odour on the breath
- poor judgement
- poor concentration
- change in sleep patterns
- worsening of handwriting or small hand movement

Severe symptoms of hepatic encephalopathy

- unusual movements or shaking of hands or arms
- extreme anxiety
- seizures
- severe confusion
- sleepiness or fatigue
- severe personality changes
- jumbled and slurred speech
- slow movement

Symptoms are usually graded from 1 (mild) to 4 (severe).



Treatment

HE is a treatable condition. The severity of the condition and potential triggers will determine the treatment given.

The first step is to identify and treat any factors that have caused the HE episode. Once this has been addressed, treatment is aimed at lowering the level of ammonia and other toxins in patient's blood. Medication can be used to help prevent future episodes. The long-term aim of HE treatment is to reduce the production and absorption of toxins such as ammonia.

Treatment of HE is directed at a series of targets that determine the plasma concentration of substances that have a toxic effect on the central nervous system. Most of the treatments have been designed to decrease the plasma concentration of ammonia since clinical experience relates the development of encephalopathy with the higher content of nitrogenous compounds in the digestive tract.

However, studies that support recommendations are scarce and are often poorly designed, meaning evidence-based treatment is difficult.

There are two types of medication commonly used to reduce recurring episodes of HE:

Lactulose

Lactulose works by drawing water from the body into the colon which softens stools and causes the patient to have more bowel movements. This helps to lessen the absorption of toxins in the intestines by flushing toxins out of the system.

This helps during HE recurrences and also makes them less likely to occur.

Antibiotics

Antibiotics work by stopping the growth of certain bacteria that create toxins from digested food. By reducing these bacteria, antibiotics reduce the amount of toxins produced in the body.

A few different antibiotics are used; the most common being Neomycin and Rifaximin.

With proper adherence to therapy, the progression of HE can be slowed and sometimes even stopped.

Additional treatments include medication to control bleeding, stopping the use of medications that can trigger an episode and any appropriate therapy for kidney issues.

In addition to pharmacological treatment, eating a healthy balanced diet and exercising to maintain a healthy weight will help to obtain best outcomes. Current advice

suggests aiming for 30 minutes of exercise at least five times a week, including some strength training because skeletal muscle contributes to the elimination of ammonia with the synthesis of glutamine. It is important to avoid prolonged fasting with multiple intakes of small amounts of food throughout the day. In addition, the deficiency of vitamins and minerals should be treated; the contribution of thiamine and, in some cases, zinc being especially useful.

In the past, a protein restriction was recommended in patients with HE. However, experimental studies have shown that the complete elimination of protein leads to an increase in plasma ammonia due to a decrease in the activity of an enzyme of the urea cycle. The current recommendation in patients with HE is a normoprotein diet of 0.8-1g per kilogram per day, with plant-based proteins being preferred to those from animal sources.

Although HE is a serious medical condition, with early intervention, symptoms can often be managed and disease progression slowed.



Rayco León
Álvarez,
Clinical
Pharmacist

Ashtons commits to ESG



With the rise of global sustainability challenges such as climate risk, privacy and data security, along with regulatory pressures, companies in recent years have been looking increasingly at sustainability and the impact their business has on the environment around them. ESG is a way for companies to evaluate their sustainability status, and it is commonly used by investors to screen potential investments and help determine their future financial performance.

What is ESG?

ESG stands for environmental, social and governance and is a set of standards for a company's operations in each of these areas.

Environmental

This could include a company's energy use or efficiency, waste management, pollution and natural resource conservation.

Social

This concerns people and the company's business relationships, and showing how they positively impact their employees, customers and the communities around them. It could include employee health and safety, customer satisfaction, data protection and privacy, and diversity. Do they also work with suppliers that have similar standards and values?

Governance

This examines how the company is governed, and how it responds and interacts with shareholders. It involves transparent decision making, accurate accounting methods and avoiding conflicts of interest in the choice of Board members.

Ashtons has been working towards sustainable practice for many years, in

particular with reduction of paper use and wastage via our suite of electronic systems; Live View electronic reporting, e-Works e-prescribing and e-learning modules; and undertaking an ESG assessment will allow us to fully evaluate our current standing against ESG metrics and implement strategies for any necessary improvements.

To help us do this, Ashtons have recently engaged Sustainable Advantage, a leading independent ESG consultant in the UK, to complete a sustainability impact report, which will soon be shared with stakeholders. We are very excited about this next step and are committed becoming a leader in ethical and sustainable business practice.

Ashtons' new courier delivery service



At Ashtons, we are always looking to improve the services we provide to our customers. Our latest service enhancement is to introduce a new courier services provider.

All customers will transition to the new service provider by early March 2022.

In recent years, courier services have evolved and improved with the addition of a variety of new features, including enhanced tracking, delivery notification capability and reporting. These features enable our Customer Service Team to manage your orders, as well as any queries or complaints, much more efficiently and effectively.

We have identified Parcelforce Worldwide as the best provider to give you optimal service. They have the largest market share in UK next-day deliveries and directly employ 80% of their drivers. Having the same driver on the same route every day means the driver knows the route and the customers, providing a more consistent level of service. They also employ route optimisation to avoid overloading of delivery driver routes, giving drivers more time to make their deliveries.

We anticipate that our new delivery service will bring many benefits to your site in the long term. However, please be aware that there may be a period of settling in with your new driver and we politely request your patience and cooperation during this time. In the meantime, should you wish to discuss the new delivery service, our Customer Service Team is available to help. Please call us on **0345 222 3550** or email customerservice@ahps.co.uk



Darren Ellis,
Head of
Operations



Lead Pharmacist Dorna Ghashghaei takes to the ring for Charity Boxing Nights

On 24 September, champion Lead Pharmacist Dorna Ghashghaei took to the ring to fight it out to raise money for the Newborn Intensive Care Unit at the Royal Manchester Children's Hospital. Charity Boxing Nights is a fantastic white-collar boxing event that allows people with no experience to partake in an intensive training regime culminating in a fight to raise money for charity.

Dorna partook in the gruelling seven-week training boot camp to get contestants

fighting fit, learning the fundamentals of each skill and training five times a week. The event was held over two nights, where guests were welcomed to the Manchester Vermillion's Grand Suite by fire eaters and rhythmic gymnasts, and Dorna was one of 22 contestants. Dorna pushed herself to the limit in a very close fight with an opponent who was a force to be reckoned with, lasting all three rounds but narrowly missing out on a win. The event raised over £90,000, with Dorna herself raising over £2,000 of that.

Speaking about the experience, Dorna said, "It was a gruelling training camp and a super tough fight, but this is a small comparison to what the children and families have to overcome at the unit daily and it's a cause very close to my heart. I was very much out of my comfort zone but am incredibly proud of my achievement. Win or lose, we raised an exceptional amount of money for the Newborn Intensive Care Unit at the Royal Manchester Children's Hospital. Every penny will help those babies and families cared for by the wonderful staff at the unit, and provide essential equipment, training and other resources so desperately needed to improve outcomes, or simply support families whose babies sadly do not pull through. Thank you so much to everyone who donated, it really means a lot."

We are incredibly proud of Dorna for this amazing achievement, well done! If anyone wishes to make a donation, Dorna's sponsorship page is still open: <https://www.justgiving.com/fundraising/Dornaboxing>

Flu vaccine pre-orders

Pre-order your flu vaccines for next winter 2022/2023



The 2022/2023 flu vaccine from Ashtons is available to pre-order now, for both your patients and your staff.

Ordering now guarantees you our best price for winter 2022/2023, as we will pre-book your vaccines with the manufacturer. There is no minimum order quantity.

Please contact our Customer Service Team on **0345 222 3550** or email customerservice@ahps.co.uk to pre-order your flu vaccines.



Smoke-free society

Smoking is still the largest cause of preventable death in England. It costs communities an estimated £12.6 billion annually with an additional annual cost of £2.5 billion to the National Health Service (NHS)¹. Public Health England is aiming for a smoke-free society by

2030 with adult prevalence of 5% or less². Patients with a severe mental health illness smoke one-third of all cigarettes smoked in total¹. It is therefore important to focus on this group to be able to achieve this aim and give this group better patient outcomes.

Events in a Global Smoking Cessation study (EAGLES) found that neither varenicline nor bupropion increased the risk of neuropsychiatric adverse events. It also found that varenicline was more effective than an NRT patch, placebo and bupropion⁵. Pharmacists can highlight these findings to encourage prescribers to prescribe according to the NICE guidelines and use varenicline and bupropion if necessary.

Harm reduction can be pursued with the use of e-cigarettes which are safer to use than smoking as vaping is at least 95% less harmful than smoking⁶. E-cigarettes can be used safely at the same time as NRTs⁷. The risk of nicotine poisoning when using an e-cigarette is zero as the maximum strength of nicotine sold for use in e-cigarettes is 20mg/ml⁸. According to Toxbase, a fatal dose of nicotine is estimated to be 0.5-1gram in an adult⁹, which demonstrates the unlikelihood of overdose when using products in combination. Pharmacists can therefore encourage the use of NRTs with e-cigarettes to help with harm reduction.

"Patients with a severe mental health illness smoke one-third of all cigarettes smoked in total."¹

Since the NHS long-term plan is committed to offering funding towards tobacco treatment services to all inpatients, including the option of switching to e-cigarettes while in the inpatient setting², it is important to use these products to maximum efficacy. NICE guidance states that for these patients a long-acting and a short-acting nicotine replacement therapy (NRT) should be used and that bupropion and varenicline should be made available for use³. However, the data shows that only 47% of mental health trusts offer the choice of combination NRT or varenicline².

Varenicline was a black triangle medicine until 2016 as additional monitoring was required for people with a mental health condition⁴. However, the Evaluating Adverse



A survey has found that 59% of psychiatrists and 76% of nurses have never prescribed stop smoking medicines since being qualified to do so². Pharmacists can help with this by educating and supporting those involved in smoking cessation or harm reduction and can also encourage the prescribing according to the NICE guidelines to gain the maximum benefit from these products.

As NICE have recommended frontline staff to be trained in smoking cessation on a yearly basis³, pharmacists can

support this by providing smoking cessation training and/or referring staff to online training platforms such as the National Centre for Smoking Cessation and Training (NCSCT)⁷. To help with this, Ashtons has released a new training seminar on smoking cessation in mental health which covers the prevalence of smoking, why smoking cessation is important in mental health, why smoking rates are high in mental health patients, the difference between smokers with mental health illness and the general population, how nicotine affects the body, different types of products to aid smoking cessation, how to tailor

treatment for mental health patients and how psychiatric medicines are affected by smoking.

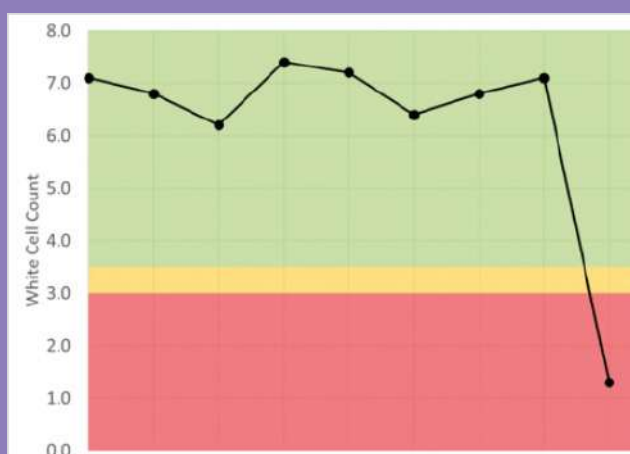
References

For all references for this article, please see our blog page: <https://bit.ly/3w4LKwO>



Meeta Narayan,
Clinical
Pharmacist

The effect of COVID-19 on clozapine monitoring



In some patients, COVID-19 infection or vaccination can cause a drop in white cell count

Our knowledge of COVID-19 is still developing and, even though we have been able to develop vaccines and are beginning to discover effective treatments, we are still learning about the nuances of how to adapt to the effects of the pandemic.

In 2021, it was reported that infection with COVID-19 could lead to changes in white cell counts due to the body's reaction

to the virus. This means that patients with COVID-19 may present as having an abnormal white cell count. This can make the result difficult to interpret especially when the patient is having their white cell count monitored for another reason (for example, to monitor the safety of clozapine).

It is now becoming clear that vaccination for COVID-19 can also cause a similar effect to white cell counts. The product licence for clozapine requires stopping the medicine if there is a low white cell count. However, if the neutrophil level is still in range, it may be possible to continue clozapine. This would be unlicensed and would need to be discussed with the monitoring service before any decision was made.

There have also been reports of clozapine *plasma* levels increasing in patients who have COVID-19 infection, and it is possible that the same could also be seen after vaccination. Therefore, if a patient has COVID-19 or receives the vaccination, it would be advisable to monitor them for any signs of increased plasma levels (for example, increased drowsiness, tachycardia or myoclonic jerks).

New training seminars



Sleep Disorders

Our new Sleep Disorders training seminar helps healthcare staff understand of the basic pathophysiology of sleep disorders and their management. It explains the different sleep disorders patients may experience as well as how to diagnose and manage or treat sleep disorders both pharmacologically and non-pharmacologically. It discusses the potential causes of sleep disorders and how they can relate to psychiatric disorders, as well as how to maintain good 'sleep hygiene'.



Attention Deficit Hyperactivity Disorder (ADHD)

The aim of our new ADHD seminar is to provide knowledge on how to diagnose and manage or treat ADHD in children and adults both pharmacologically and non-pharmacologically. It allows staff to understand the differential diagnoses which could present as ADHD and offers attendees the chance to discuss case studies. It also discusses the possible causes and helps staff understand how the NICE guidelines define diagnosis.



Smoking Cessation in Mental Health

This new seminar helps participants gain an understanding of the impact that smoking and smoking cessation have on patients within the mental health sector. It helps staff understand the effects of nicotine in the body, and any dosage and monitoring adjustments required for those on psychotropic medications. It also covers the range of nicotine replacement therapies available in addition to prescription-only medicines and aims to provide staff with greater knowledge of how to support mental health patients with smoking reduction or cessation.

Your training allocation for 2022 is now available

The above courses are in addition to our full suite of clinical training seminars, which include:

- Anaphylaxis
- Asthma & COPD
- **NEW** Attention Deficit Hyperactivity Disorder (ADHD)
- Cannabis Oil
- Clozapine
- Controlled Drugs
- Diabetes Mellitus and Mental Health
- Drug Interactions
- Epilepsy and Mental Health
- High Dose Antipsychotic Treatment
- Long-Acting Antipsychotic Injections
- Medication and the Mental Health Act
- Medicines Management
- Patient Group Directions
- Rapid Tranquillisation
- Safer Medicines Administration
- **NEW** Sleep Disorders

- **NEW** Smoking Cessation in Mental Health
- The Accountable Officer
- Valproate and Pregnancy

The following are also available for healthcare assistants:

- Administration of Medicines
- Introduction to Medication
- Secondary Signatory for the Management of CDs and DLMs

For hospitals that have an allocation of inclusive training, this begins in January and must be taken within the calendar year. Hospitals cannot roll over their allocation to the following year. Additional clinical training seminars are charged at the standard rate of £545 + VAT.

In addition to our clinical training seminars, Ashtons also provides access to e-learning courses and our brand-new e-learning system was launched in 2021, with **all courses accredited with CPD UK**. Courses include:

- Using Medication to Deal with Acute Disturbance
- Medicines Management
- Side Effects of Medications
- Management of Patients on Clozapine
- Side Effects of Clozapine

Book now

To book a course, please contact your Visiting Pharmacist, or for further information, please contact our Training Administrator at: training@ahps.co.uk

Ashtons e-Works wins at the HTN Now Awards 2022!



"e-Works is proven to reduce prescribing errors by up to 88% and medicines administration errors by up to 94%."

We're absolutely delighted to announce that our Ashtons e-Works electronic prescribing and medicines administration (EPMA) system has received the 'Making an Impact' award for 2022 at the HTN Now Awards.

These prestigious awards aim to recognise health tech suppliers that have made a genuine difference for their clients. So, to win – especially in the 'Making an Impact' category

– really underlines the outstanding improvements Ashtons e-Works has helped to bring about during the last year.

Most notably, e-Works is proven to reduce prescribing errors by up to 88% and medicines administration errors by up to 94%. The system has also helped reduce patient details errors by up to 92%.

These fantastic results follow a lot of hard work. Our e-Works system may only have been fully launched just a year ago, but that followed a seven-year period of development, testing and piloting. And yet, this is just the start. Like Ashtons as a whole, e-Works will never stand still. It will be continually refined, leading to constant evolution and improvement on an ongoing basis.

If you would like to know more about Ashtons e-Works and the many benefits this system could bring to your organisation, please call us on **01273 224604** or email at sales@ahps.co.uk

The CQC is changing the way they inspect

The Care Quality Commission (CQC) carries out regular checks on health and social care services and is changing their approach to these inspections.

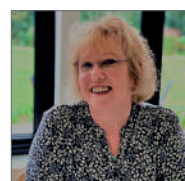
At the moment their focus is on services that have been previously rated 'requires improvement' or 'inadequate'. However, mental health has a high profile so we must not get complacent even with a good or outstanding rating.

Their new approach is still being finalised and they have yet to decide whether they will continue with their current ratings, for example. Even so, it is clear their focus is on governance, leadership and culture.

The CQC want to make it easier for people to tell them about their experiences and what matters most to them. They promise to get better at checking services and will be looking for different types of information to help demonstrate how a service performs all of the time.

Keeping people safe remains a priority with an emphasis on continuous improvement and learning when things go wrong. The CQC appears keen to work with us, sharing examples of good practice, ensuring that they themselves understand how the use of technology can help improve care.

Finally, although a CQC inspection is going to be stressful, it is also an opportunity to highlight things within the service that you are proud of. Inspectors start from a place where all settings are 'good', so run towards them and make them listen to all the excellent work you are doing!



Lesley Spencer,
Palliative Care
Ambassador



Celebrating 'Growth and Innovation' at the annual Pharmacists' Conference at Jurys Inn Brighton Waterfront on 16-17 September 2021

On 16-17 September 2021, the Ashtons pharmacists and team gathered for our eleventh annual Pharmacists' Conference. It was exciting to be back and meeting together in person, as the 2020 conference was postponed due to the pandemic. Our pharmacists are spread across the UK to help support our clients nationwide, and so it is important for them to be able to meet and share their knowledge and experience through a series of lectures and discussions.

Growth and Innovation

This year's theme was 'Growth and Innovation'. In a difficult year that has brought about some unique challenges for us all, Ashtons has continued to grow and develop, launching new services and products aimed at supporting our clients to provide outstanding care, including our electronic prescribing and administration system, Ashtons e-Works; our new accredited e-learning system; and the installation of our new robot, Zelda, which has significantly increased our dispensing capacity.

Keynote speakers

The conference provides an opportunity

to hear from expert speakers across different areas of healthcare and this year we were delighted to welcome three fantastic speakers. **John Donoghue** is an award-winning author and mental health pharmacist, and a founding member of the College of Mental Health Pharmacy, who has written widely on mental health issues and has over 80 peer-reviewed publications. John delivered a fascinating insight into the long-term outcomes and acute treatment of schizophrenia.

We were also honoured to receive **Professor David Taylor**, Director of Pharmacy and Pathology at the Maudsley Hospital and Professor of Psychopharmacology at King's College London. Professor Taylor has formerly contributed to NICE guidelines, is a lead author for the Maudsley Prescribing Guidelines and in 2014 was ranked in the top 100 clinical leaders in the NHS by the Health Service Journal. He presented an engaging lecture on 'Pharmacogenetic Testing – The Future for Clozapine'. Also joining our group of external presenters was **Adrian Munday**, the Director of The First Aid Training College, our cherished partner for first aid training. Adrian was previously on the board of

directors at Cygnet Health Care and also runs a management consulting company – Essential Management Consultants. He delivered an insightful and practical session on immediate life support and basic life support.

Sharing experience

Our annual conference is also a chance for our pharmacists to present on their own topics and expertise, in specialist areas important to them. This included a variety of topics including 'Motor Neurone Disease – A Case Study' by Karen Higlett; 'STOMP' (Stopping Over Medication of People with a learning disability, autism or both) by Priyanka Patel and Matthew Roberts; 'The Role of the Hospice' by Lesley Spencer and 'Asthma and Chronic Obstructive Pulmonary Disorder' by Nabila Ditta. These compelling and thought-provoking seminars provided a great deal of information and helped solidify our team's understanding of important topics, so that they can continue to excel at supporting our clients to provide the very best patient care.

A big thank you to all of our speakers for creating a fantastic couple of days of learning and development!



ASHTONS PHARMACY NEWS

Editorial team:

Chris Burrell, Head of Marketing
Shannen Stevens, Graphic Designer and Sub-Editor

CONTACT US

Tel: 0345 222 3550

Email: customerservice@ahps.co.uk

Address: 4 Dyke Road Mews,
74-76 Dyke Road, Brighton, BN1 3JD

SUBSCRIBE

Register at: <http://eepurl.com/do9dtD> or email us at customerservice@ahps.co.uk
to get your free quarterly subscription. Previous issues are also available free of charge as electronic PDFs.