

CareHomesNews

BLMK ICB Care Home Medicines Optimisation team

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- **Reminder - BLMK ICB Medication Training for Adult Social Care**
- **BLMK ICB Tier 3 Medication Champion training - update**
- **Reminder - End of Life Care Medicines Service**
- **Flu vaccination reminder for care home staff**
- **Complex Care Team (CCT) - Pharmacy team and services**
- **Colchicine tablets: ensuring appropriate quantity prescribed**
- **Medicines that require careful handling (e.g., cytotoxics)**
- **Clozapine - Learning Relating to an Unexpected Patient Death**
- **Reminder - Acute Hospital Trusts - contact details for discharge queries**



Reminder - BLMK ICB Medication Training for Adult Social Care

Tier 1 – Foundation knowledge eLearning training modules hosted by PrescQIPP

The following courses are available free of charge:

- ⇒ Medicines use in care homes: course 1
- ⇒ Medicines use in care homes: course 2
- ⇒ Medicines use in care homes: course 3
- ⇒ Managing medicines for adults receiving social care in the community: course 1 - **free until April 25**
- ⇒ Managing medicines for adults receiving social care in the community: course 2 - **free until April 25**

Please click on link for [Tier 1 flyer](#) and [logon guide](#) for guidance on how to register.

Tier 2 – Focused on selected topics and local guidance/policies - dates for 2024/25

The BLMK ICB Care Home Medicines Optimisation Team are pleased to facilitate the following virtual medication training sessions, for all adult social care (ASC) staff, delivered via MS Teams.

See our [ASC Medication Training – Tier 2 Flyer](#) for more information on how to join the events

Homely Remedies & Self-Care *delivered*	Tuesday 21 st May 2024, 14:30 –15:30
When Required (PRN) Medication *delivered*	Wednesday 10 th July 2024, 14:30 – 15:30
Covert Administration of Medication *delivered*	Tuesday 17 th September 2024, 14:30 – 15:30
Medicines Reconciliation & Transfers of Care *delivered*	Wednesday 13 th November 2024, 14:30 – 15:30
Controlled Drugs (CDs) & Regulations in Care Homes *delivered*	Tuesday 21 st January 2025, 14:30 – 15:30
Medication Safety, Governance & Safeguarding	Wednesday 19 th March 2025, 14:30 – 15:30

A big thank you to those that joined our Tier 2 session on ‘Controlled Drugs (CDs) & Regulations in Care Homes.

We hope you can join us for the forthcoming topic, even if just for a refresher! All of our training information for Adult Social Care staff can be found via the website link:

[Adult Social Care Staff Only – BLMKICB Medicines Optimisation](#)

BLMK ICB Tier 3 Medication Champion Training - update

In November last year our team successfully held two further Tier 3 Medication Champion Training events for care home staff. As a result in total we have trained 77 Medication Champions across BLMK. If you are interested in becoming a Medication Champion for your care home we have a further training date scheduled as per below:

Forthcoming date for Medication Champion day (9am - 3pm):

Thursday 27th February 2025 - The Willows (Milton Keynes)

To be eligible to become a Medication Champion you must:

- ⇒ Complete the CORE Tier 1 PrescQIPP e-Learning training AND
- ⇒ Attend the Tier 2 online virtual medication sessions, where possible AND
- ⇒ Attend a Medication Champion Training day



To register for the above event please click on the Eventbrite link below which also explains the event in more detail:

[Medication Champion Training for Care Home Staff | Eventbrite](#)

If you have any questions please contact the relevant care home team for your area. Contact details can be found at the end of this newsletter.

Reminder - End of Life Care Medicines Services

BLMK ICB commissions the End of Life Medicines Service from selected community pharmacies across the county. This service aims to ensure that patients/residents receiving palliative care in the community have access to specialised drugs when these are required in an emergency. Click on link below for the list of medicines.

[List of medicines](#)

The service is available within the normal opening hours of the pharmacy contractor - details of the participating pharmacies and their contact details are provided via the link below. Out of hours centres hold their own supplies to meet the demand outside normal pharmacy opening hours.

[List of Participating Pharmacies](#)

Clinicians and carers should note that a pharmacy may not have the full quantity of medication to fill a prescription however it is expected that there will be sufficient supply to allow treatment to be started and the remaining stock ordered for urgent delivery, usually by the next working day (subject to wholesaler availability).

Flu vaccination reminder for care home staff

You will be aware that our hospitals have been under significant pressures recently due to high flu cases as well as other winter viruses. There has been low uptake of the flu vaccination this year so this creates a vulnerable workforce.

We would like to remind care home staff that if you have not already had the Flu vaccine it is not too late, this can still be accessed via walk-in clinics at local community pharmacist sites. Please use the link below to find a vaccinating site and opening times for the Flu vaccine:

[Find a pharmacy that offers free flu vaccination - NHS](#)

Complex Care Team (CCT) - Pharmacy team and services

The Complex Care Team (CCT) includes the Bedfordshire Community Health Services (BCHS) Pharmacy Team. The pharmacy team are responsible for conducting medicines reconciliation for residents (new or existing) admitted into care home either from hospital or another care setting. CCT/BCHS liaise with multidisciplinary teams to ensure patient medication records are up to date.

Referrals can be made by ringing Single Point Of Access (SPOA) Tel: 03456024064 or via email elft.pharmacybchs@nhs.net. There is no cut-off time in the day for the pharmacy team and working days/hours are: Monday to Friday from 8am till 5pm.

The team cover the following areas across Bedfordshire:

- North Hub , 37 care homes within Bedford.
- Mid Hub, 16 care homes within Ampthill and Shefford.
- South Hub, 19 care homes across Leighton Buzzard and Dunstable.

Colchicine tablets: ensuring appropriate quantity prescribed

Colchicine is a medicine for treating inflammation and pain from gout. It works by reducing the inflammation caused by the crystals of uric acid that build up in joints during gout. It is given as a short course and is available as 500microgram tablets.

For the treatment of an acute attack of gout, the total dose for a course of colchicine should not exceed more than **6mg (12 tablets for the whole course)**. This is important as colchicine is extremely toxic in overdose.

There is often a delay of up to 6 hours before toxicity is apparent, and some feature of toxicity may be delayed by 1 week or longer. Symptoms of colchicine overdose include nausea, vomiting, abdominal pain, and diarrhoea. Diarrhoea may be profuse and bloody, and the resident may present with electrolyte disturbances and hypovolaemic shock. This can progress in severe cases to include multiple organ failure and death.

If one of your residents is prescribed colchicine and is issued more than 12 tablets please query with the community pharmacist and/or the resident's GP immediately.

Medicines that require careful handling (e.g., Cytotoxics)

There are certain medicines that require careful handling due to their hazardous nature. These include **Cytotoxic drugs** which may be used to treat cancers or other conditions such as rheumatoid arthritis and psoriasis. Cytotoxics affect how the body's cells grow and reduce the activity of the immune system. However, they are safe and effective medicines if taken at the right dose, with appropriate monitoring and handling. Other medicines such as hormones may also require careful handling.



Some examples of medicines which require careful handling include Methotrexate, Finasteride and Tamoxifen. These can be harmful and could cause adverse health effects to the person administering them, especially anyone that is pregnant or of child-bearing age. It is recommended that staff or carers at any stage of pregnancy or if breastfeeding should not administer medicines such as cytotoxics, or other hazardous medicines, and they should not deal with body fluids from the resident taking them. Women of child-bearing age who are being asked to administer such medicines must be informed that exposure may harm an unborn baby.

All care home staff who are required to administer cytotoxic medicines, or deal with body fluids from a person taking a cytotoxic medicine, must be provided with the appropriate training and equipment to ensure they can do so safely to protect both the resident and them from harm. Care homes must have robust procedures in place to ensure this. It is important to note that a resident may go to hospital or a clinic for administration of cytotoxic medicines, but the precautions for handling body fluids still need to be followed.

Appropriate Personal Protective Equipment (PPE) such as gloves (preferably nitrile) and a disposable apron should be worn when administering cytotoxic medicines. PPE should also be worn when handling body fluids, faeces or contaminated clothing, dressings or bed clothes – for up to seven days following the last dose.

When **administering medication**, we would advise using a **‘no touch’ technique**. If administering oral medication – transfer the medicine from the bottle or blister pack into a medicine pot, spoon or oral syringe that is designated for this purpose and clearly labelled ‘for cytotoxic medication only’. These should be washed thoroughly between doses and safely disposed of at the end of treatment – appropriate PPE should still be worn when doing this. Do not crush, dissolve or break cytotoxic tablets, capsules, or any other hazardous medicines. If the resident is unable to swallow, then contact an appropriate healthcare professional for advice.

The **disposal of cytotoxics and other hazardous medication** should be recorded in the care homes medicines policy. They should be disposed of safely to avoid potential harm to others and must never be disposed of in an ordinary bin.

Care homes **with nursing** will need to follow the processes outlined by their waste contractor to safely dispose of cytotoxic medicines. The medication awaiting disposal must be put in a sealed container clearly marked ‘cytotoxic medicines for disposal’.

Care homes **without nursing** will need to return cytotoxic medicines to the pharmacy for disposal in a sealed container marked ‘cytotoxic medicines for disposal’.

Useful references:

- [PrescQIPP ‘Medicines use in care homes: course 3’ - administration of methotrexate and other cytotoxics](#)
- [Health and safety in care homes](#)

Clozapine - Learning Relating to an Unexpected Patient Death

Clozapine is an antipsychotic medicine used to treat psychosis, including schizophrenia and psychosis in Parkinson’s disease. A specialist psychiatric consultant is responsible for starting clozapine and patients remain under the care of mental health services while they are taking clozapine. Clozapine requires strict monitoring, which is carried out by the relevant mental health team. Recently an incident occurred, out-of-area, whereby a patient sadly died as a result of clozapine toxicity, possibly related to a change in smoking status.

Incident & Learning

The patient visited A&E 3 times over a period of a week leading up to his death. He had symptoms of constipation, abdominal pain and vomiting. No referral to the psychiatric liaison service was made and the patient self-discharged. The following day, patient collapsed at his supported living service, CPR was commenced and an ambulance was called but sadly the patient died in A&E.

Upon investigation it was found that at the patient's last contact with the Mental Health Trust (3 days before death) it was noted that the patient had stopped smoking 2 weeks prior. Changes in smoking status can lead to a potentially significant increase in plasma clozapine levels. Therefore the cause of death was determined as clozapine toxicity, possibly due to the change in the patient's smoking status.

Issues Identified:

1. Clinicians did not explore the patient's change in smoking status further despite the patient offering the information. A change in smoking status may have required additional monitoring and/or a clozapine dose change.
2. Clozapine induced hypomotility (slowing down of gut motility – this has a 20% mortality rate in clozapine patients) was not investigated. Staff to be aware of the signs and symptoms of clozapine induced hypomotility, including constipation, abdominal pain and vomiting.
3. There was limited clinical engagement in the clozapine clinic, nor robust care plans, about the patient's physical health, including constipation or smoking habits.

Considerations for Social Care Providers:

- Follow good practice for medicines reconciliation and check if a person you are caring for is prescribed clozapine. Be aware that clozapine does not always appear on the GP summary care record or repeat prescription, as it is prescribed by the mental health service.
- Check whether the person has had a physical health check within the past 12 months.
- Where appropriate, **record the person's smoking status and caffeine intake**. This is because smoking and caffeine can cause changes to levels of clozapine in the blood – the dose of clozapine may need to be changed if there is a change in smoking or caffeine habit. The patient's mental health team should be contacted for advice in this situation.
- Enable support for people to have regular blood tests, including making and attending appointments, and receiving and acting on results.
- People's medicines must be available when needed. **It is important that clozapine is taken as prescribed as it can be dangerous to miss doses and then restart at the full dose. Seek advice if more than one dose is missed** - treatment may need to be restarted at a lower dose and closer monitoring may be needed.
- Know how to identify possible side-effects – **Care plans should include possible serious side-effects (including constipation) that need immediate medical attention.**
- Know who to contact for advice and support and which clozapine patient monitoring service the person is registered with.

Further Reading / Resources:

- [Guidance for clozapine in care homes.pdf](#)
- [High risk medicines: clozapine - Care Quality Commission](#)
- [Clozapine: reminder of potentially fatal risk of intestinal obstruction, faecal impaction, and paralytic ileus - GOV.UK](#)
- [Clozapine and other antipsychotics: monitoring blood concentrations for toxicity - GOV.UK](#)

Reminder - Acute Hospital Trusts - contact details for discharge queries

For Bedford Hospital and Luton & Dunstable Hospital - care homes can use the contact details below for any concerns or queries (including medication queries) they may have after a hospital discharge.

Any concern or query after hospital discharge - including out of hours and weekends (24 hr a day)

RING Bedford Hospital and bleep 309

RING Luton hospital and bleep 555

To communicate with the hospital about a person's discharge please email - ALSO if you want the ward staff to give you an update about a persons condition/ discharge plans we can facilitate this via this route rather than via ward phone.

Luton central email for discharge officers :

DischargeManagers@ldh.nhs.uk<mailto:DischargeManagers@ldh.nhs.uk>

Bedford central email for discharge:

bhn-tr.integrateddischargeplanning@nhs.net<mailto:bhn-tr.integrateddischargeplanning@nhs.net>

- Email addresses are manned from 08.00 till 18.00, 7 days a week. If you email us we will ask the wards to contact you / ring you back and provide an update or liaise with you to arrange discharge.
- MOD (Manager of the Day) telephone number: 07769935313 (This is manned from 08.00 till 18.00, 7 days a week)
- OOH (Out of Hours) site team Ops phone: 07884160312 SMOC (Senior manager on call) via Bedford switchboard manned 18.00 until 08.00

For Milton Keynes University Hospital (MKUH) - care homes can use the contact details below:

- MKUH - Helpline number **for medicines discharge queries only** - 01908 995733
- Hours - Monday to Thursday, 2pm to 5pm - the Helpline has an answerphone facility - messages will be picked up by the team each afternoon apart from Fridays.
- Outside these times, if the query is urgent and cannot wait for the team to respond, the care homes should contact the ward that the patient was on.

Please make sure your staff are aware of the above contact details

Contact us:

Bedfordshire team: Email: blmkicb.bedsnocarehometeam@nhs.net

Luton team: Email: blmkicb.lutoncarehometeam@nhs.net

Milton Keynes team: Email: blmkicb.mkcarehomespharmacy@nhs.net