

JOURNAL-BASED LEARNING EXERCISES



Please select your choice of correct answers and complete the exercises online at: www.ibms.org/cpd/jbl

DEADLINE WEDNESDAY 7 APRIL 2021

Improving through inclusion. Supporting staff networks for black and minority ethnic staff in the NHS.

NHS England, 2017 (www.england.nhs.uk/wp-content/uploads/2017/08/inclusion-report-aug-2017.pdf). Assessment No: 010921

01	The Workforce Race Equality Standard (WRES) survey had 14,023 replies.	11	No specific courses or programmes will be considered, so no financial pressures.
02	There are award-winning Black and Ethnic Minority Staff networks recognised for their inclusivity.	12	BAME young people between 16 and 19 are the most rapidly growing demographic in the UK.
03	There are five underpinning points identified as supports for effective networks.	13	It is recommended that BAME staff networks are championed at board level.
04	It is recommended that BAME chairs of staff networks and their deputies are allocated one day per month to carry out their duties.	14	A national approach to increase network collaborations is suggested.
05	It is evident that BAME staff have less good career progression.	15	More BAME staff report experiencing bullying and harassment than white staff, no matter where working in the NHS.
06	The WRES is designed to help organisations as an operational tool.	16	All staff are more productive if they feel valued.
07	Networks can assist in allowing all staff to influence local culture.	17	The highest response rate to the WRES survey was from London.
08	The WRES survey received a number of responses which indicated that networks would not be beneficial.	18	The public do not see networks as being a benefit to an organisation.
09	It was observed that working together can be supportive to BAME but not other staff networks.	19	More than half of survey respondents thought their own staff networks were actually having positive impacts.
10	Accountability for both management and staff networks is important in taking the findings of the study forward.	20	Empathy is a key element of networks.

REFLECTIVE LEARNING

01	Does your organisation have a BAME forum or network? If so, can you attend a meeting to assess its effectiveness?	02	How do you perceive the value of separate staff forums for different groups (eg BAME, LGBTQ) or are they divisive and encouraging of discrimination by focusing on difference?
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Elevated serum alkaline phosphatase in epilepsy: effect of age and treatment

Rawat C, Kukal S, Kushwaha S *et al.* *Br J Biomed Sci* 2020; **77** (1): 44–7.

doi: 10.1080/09674845.2019.1663781. Assessment No: 010321

01	Antiepileptic drugs such as phenytoin, carbamazepine, and valproate are the most widely prescribed first-line drugs.	11	The study by Boluk <i>et al.</i> , cited in this work, reported a marked increase in serum ALP levels in patients taking valproate.
02	Newer antiepileptic drugs that have less adverse effects are generally prescribed alone.	12	There was a positive correlation between ALP levels and drug doses of phenytoin, carbamazepine and valproate.
03	In this study of 546 patients, 323 were newly diagnosed and drug-naïve, while 223 were receiving antiepileptic drug therapy.	13	Serum ALP is a marker of hepatocellular injury and bone turnover.
04	A cohort of 37 healthy subjects with no history of any neurological or neuropsychiatric ailment and on no medication were recruited to provide reference data.	14	Antiepileptic drug therapy has been associated with osteomalacia due to reduced ALP levels.
05	In those patients receiving antiepileptic drug therapy, 105 were on phenytoin, 82 were on carbamazepine, and 43 were on valproate.	15	It is suggested that it is not medication but the disease phenotype which may play a role in increasing ALP levels.
06	Drug-naïve patients who showed higher pre-treatment seizure frequency had significantly lower alkaline phosphatase (ALP) levels.	16	Hormones such as prolactin, oestrogen and parathyroid hormone have been reported to influence bone metabolism.
07	In this study, the gender split of patients was 168 males versus 175 females.	17	An alkaline phosphatase level of 40–140 U/L was regarded as normal in this study.
08	Drug dose and ALP level were correlated by Spearman's method, with data presented as median (interquartile range).	18	A total of 118 patients had been on antiepileptic drug therapy for >24 months.
09	While no gender disparity was observed in the ALP levels, there was a marked effect of age on levels of ALP in all groups.	19	Higher ALP levels were found in patients aged 5–15 years than in older patients, probably due to the increased osteoblastic activity in children.
10	Patients receiving antiepileptic drug therapy for >3 months had significantly higher ALP levels than those for <3 months.	20	Patients with idiopathic epilepsy were found to have higher ALP levels than those with cryptogenic epilepsy.

REFLECTIVE LEARNING

01	Discuss the role of alkaline phosphatase testing in diagnostics and its use in your laboratory.	02	Compare and contrast the methods available for the determination of serum alkaline phosphatase level.
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is easy to use and meets the requirements for achieving and maintaining professional registration. The scheme is now electronic, so recording, amending and validating are all carried out online.

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advances and techniques as part of CPD.

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