

Medication Policy

Policy Control Page

Responsible Person	Academy Nurse
Approved By	Dr N. Smallwood (General Practitioner) and SLT
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Date	Version	Person	Change / Action
July 2022	V1	Nurse	Minor amendments and update onto new template. Now incorporates Rolle House.

The purpose of this medication policy is to provide guidance and to ensure that good practice in the Academy's systems and processes for managing medicine is observed by all staff.

Academy Medical Staff

Young persons are registered with local General Practitioners (G.Ps) either at the request of parents/guardians, or if over the age of 18, by the young person themselves.

The local Academy G.P practice is Rolle Medical Partnership, Claremont Grove, Exmouth, EX8 2JF. Appointments are necessary and can be made either directly by the young person themselves or via the Academy Nurse.

The Academy also employs a part-time nurse, in post for 21 hours (4 days a week). For detailed information on working hours and contact details, both young people and staff can view these on the door of the nurse's office as well as on Teams.

Consent

Consent from a parent or guardian to administer medication, first aid or sun cream is requested if the young person is under 18, via the 'Student Permissions Booklet' and is updated annually. No medication, first aid or sun cream will be administered without consent. If the young person is over 18 years of age, they will sign the consent form themselves.

Procedures

The procedures for ordering, storage, administration and documentation of medication is based on the document 'The Handling of Medicines in Social Care' written by The Royal Pharmaceutical Society of Great Britain.

For the location of policies and other documents, see Appendix 1 (at the back of this Medication Policy).

Ordering Medication

A prescription will be generated by the young person's General Practitioner (G.P) or Consultant.

A designated member of staff from residential care will lead in medication and liaise with the Academy nurse. They will be responsible for making sure that residential students have enough prescribed medication. The lead in medication for care staff is Alice Drinkald.

Education staff are responsible for informing the Academy nurse when further supplies are required. Young people must have at least 2 weeks supply of medication in the Academy at all times and medication should be ordered accordingly.

Rolle House are responsible for ordering and obtaining their young person's medication.

The designated member of staff from residential care or education will inform the Academy nurse via e-mail, when medication is required. If a young person is registered with the local G.P, the Academy nurse will e-mail Rolle Medical Partnership and request a repeat prescription which will be sent to Clarepharm Ltd pharmacy. If the young person is registered with their home G.P, the Academy nurse will request a repeat prescription from the parents/carers. The prescription needs to be sent to Clarepharm Ltd, Health Centre, Claremont Grove, Exmouth, EX8 2JW via the Electronic Prescription Service (EPS). Parents must then inform the Academy nurse when this has been done and when it will be ready to be picked up.

Medication must NOT be transferred between home and the Academy. A separate supply must be kept both at home and in residential care. Exceptions to this are inhalers, nasal sprays, specific specialised medicines with a short shelf life, the contraceptive pill and medication used for short-term acute conditions e.g. antibiotics. They must, however, still be labelled correctly. Any medication received from home will only be accepted and administered if the medication is in its' original packaging and has the young person's name, the name and dosage of the medication, the frequency of the dose and the batch number and expiry date on the pharmacy label.

If these standards are not met, the medication should not be accepted and returned to the young person's parents/carers. The parents/carers should be informed on the same day and arrangements made for replacement medication that adheres to the standards mentioned above.

Medication that is handed over between external providers e.g. taxi drivers/personal assistants and Academy staff, must be signed in and out of the Academy. A 'Medication Handover Form (for external providers)' must be completed and retained by the party that is handing over the medication. Blank, hard copies are held in the Academy Reception and may also be found on Teams.

No more than 2 months' supply of medication should be kept in Rolle House, the nurse's or care office's medication cabinet unless there are extenuating circumstances which will be assessed on an individual basis. For residential young persons, each area should contain medication for the current month ONLY and spare supplies should be stored in the care office cabinet.

Excessive medication that has accumulated should be returned by the nurse or Rolle House to parents or sent to pharmacy for disposal.

Medication Audits

All medication stock levels are to be checked and recorded on a 'Medication Movement and Audit Sheet' by the shift leaders or Rolle House staff at the start of every new shift. If a young person is self-medicating, shift leaders or Rolle House staff must carry out a joint weekly audit of their medication WITH the young person.

A full audit is also carried out monthly by the Academy Nurse or Deputy Head of Care in residential or with the Registered Manager at Rolle House. All medication will be checked against the prescription label, MAR sheet and Placement Plan.

Keyworkers are also responsible for checking their allocated young person's medication against the prescription label, MAR sheets, Placement Plan and any emails/communication on a weekly basis to ensure that the information is consistent across them all and recording it on a keyworker checklist. If the keyworker has yet to complete their medication training, this will be done by a shift leader or Registered Manager.

Blister Packs

Blister packs are used by some young persons that are registered both at home as well as with our local G.Ps. They are prepared and delivered by White's Pharmacy, 17 Rolle St, Exmouth, EX8 1HA every 4 weeks. They are delivered on a Monday morning to Reception between 09.30 – 13.30hrs. This process is overseen by the Academy nurse who is responsible for signing them in to the Academy as well as sending back any unused medication for disposal.

Emergency Supplies/Verbal Orders

The law permits prescription-only medicines (POM) to be supplied in an emergency without a prescription, provided it is at the doctor's request and the correct procedure given by the Doctor is followed.

Written confirmation from the prescriber must be obtained via email before medication may be given.

Storing Medication

All medication will be stored securely in an approved, locked, medicine cabinet. It will also be stored in conditions that maintain its' potency and in accordance with the manufacturer's advice. These instructions should be clearly documented on the box or label.

Medication should only be handled by medication trained members of staff with the exception of medication that is handed into Reception by external persons. Upon receipt Reception staff should inform the nurse in the first instance or another medication trained member of staff to come and pick it up immediately. If a medication trained member of staff is unavailable immediately, it will temporarily be stored in the safe in Reception. Codes to medication cabinets or keys should not be shared with non-medication trained members of staff except for extenuating circumstances. These will be considered on an individual basis and the decision to allow this will be made by a Senior Leader, Deputy Manager, Registered Manager or the Academy Nurse.

Temperatures must be recorded daily on a 'Room Temperature Chart' in all areas where medication is stored, to ensure that the temperature is below 25 degrees Centigrade. If temperatures exceed 25 degrees, the Academy Nurse must be informed immediately.

Controlled Drugs (C.Ds) should be stored behind two secure, locked doors.

Where medication requires refrigeration, the 'Cold Chain' policy should be followed. All medication for refrigeration should be stored in a locked, temperature monitored refrigerator and daily temperature readings taken and recorded.

When the Academy Nurse receives medication from the pharmacy, it will be signed into the nurse's office in the 'Medication Records' folder and the items placed into each individual student's medication box in a locked cupboard. It will be stored there until required by education or residential care staff at which point it will be signed out of the nurse's office. It is then the responsibility of the collecting medication trained person to sign it in on the 'Medication Movement and Audit Sheet' as well as the MAR sheet and to place it into the student's named medication box. This will also be kept behind a locked door.

This is the same for Controlled Drugs (C.Ds) which are signed into the Academy and residential areas. In accordance with the Royal Pharmaceutical Society of Great Britain, there is no need for a separate blue C.D book to be completed within the school/residential settings.

Emergency medication i.e. auto-injectors e.g. EpiPens and inhalers are to be kept with the student at all times. Young persons who are able to do so will carry their own emergency medication, otherwise it will be held by a member of staff. This information needs to be handed over between parents or care and education staff both at the start and the end of the educational day.

Administering Medication

Staff may administer prescribed medication (including controlled drugs) to young people, with consent, so long as this is in accordance with the prescriber's directions (Medicines Act, 1968).

Staff who administer medication MUST complete and pass the OPUS Medication Awareness online training session on a two-yearly basis, as well as pass a practical assessment (carried out by the Academy nurse) of Medication Competency, on a yearly basis. Following the OPUS training session, staff are required to undergo further training as detailed in the 'Procedure for Medication Training' document.

All new staff to the Academy that will be required to administer medication must complete the assessments within 6 weeks of commencement of duties or before if required. Staff who have not completed both assessments will NOT be allowed to administer medication.

Any member of staff who is unsure of what to do regarding medication, in any given situation, should contact their line manager or the Academy nurse immediately and not give it until they are sure.

Medication that has been prescribed and dispensed for a young person should NOT under any circumstances be given to anyone else or used for a purpose that is different from that for which it was prescribed.

Staff should not administer medication to a young person without their knowledge (covert administration). Exceptions to this are where consent has been sought from a medical professional such as a GP or Hospital Consultant and written documentation to support this decision has been provided.

All young persons who take medication and are over the age of 18, will be assessed upon entry to the Academy by means of a risk-assessment to ensure that they are safe and competent to administer their medication independently. For those young persons over 18 years of age as well as those under 18 who wish to self-medicate, a 'Self-Medication Risk Assessment' form must be completed by their keyworker and sent via e-mail to the Academy nurse and Alice Drinkald for checking before self-medication can commence. Young persons who self-medicate will have this information recorded on their Placement Plan.

A MAR sheet should still be completed by self-administering young persons and co-signed by staff, documenting that they have asked them if medication has been taken and the appropriate answer recorded and signed. This will be reviewed after a period of 2 weeks and removed if both young person and staff are happy that medication has been taken safely and correctly. The young person's choice as to whether they continue or stop the MAR sheet will be recorded on their Placement Plan. Care staff are also required, with the young person's consent, to audit the medication WITH them on a weekly basis (preferably Sunday).

Whilst in the care setting, all young persons will have the choice of having their medication in their own bedroom or in the staff office. Their choice should be clearly documented in the daily routine section of the Placement Plan.

It is the responsibility of all staff to monitor young persons after medication has been given, and to report any untoward adverse effects to the Academy nurse, NHS 111 or to the young person's G.P. Information relating to a medication's possible side effects may be found on the Patient Information Leaflet (PIL) inside its' box. PILs for blister packs are kept all together in an envelope, labelled and stored with the blister pack.

Information on all medication, its uses and possible side effects may also be found on the NHS website.

Please see the OPUS 'Medicines Awareness for Schools & Early Years' online training for detailed instructions on:

- Application of Creams, Lotions, or Ointment
- Instillation of Eye Drops and Ointments
- Instillation of Ear Drops

Items used for dispensing or auditing medication such as inhalers, spacers or tablet counters must be kept in a clean and dry condition and stored in a cupboard where they will not collect dust.

Documentation

Every young person that takes medication will have a Medication Administration Record (MAR) sheet for each item. These are to be filled in at the beginning of the week and then completed every time medication is administered. If the MAR sheet is not available then the medication must not be administered and the line manager or nurse informed immediately. All sections of the MAR sheet must be completed.

MAR sheets can be created by any medication trained member of staff but must be approved and hand signed (not typed) by either the Head and deputy heads of care, Rolle House Registered Manager or its' deputy, the shift team leaders, Olivia Hills or the Academy nurse prior to them being used. These are NOT to be

approved by any other members of staff.

When completing a new MAR sheet, the information on the prescription label MUST be followed and not taken from any other source.

The only exception to this rule is when a medical professional has requested a change to the original prescription e.g. change of dose, time or frequency. In this instance the nurse will email the change in details to relevant staff. This email MUST be stapled to the MAR sheet every week and the change in dose highlighted in the 'Special Instructions' section until a new supply of medication with the correct details on the prescription label becomes available.

A MAR sheet must also be created when using blister packs. Separate MAR and Movement sheets are provided for blister packs. Full instructions on using them can be found in the document 'Guide to Using Blister Packs.'

Current MAR sheets should be kept in the medication file in the student's residential flat, Rolle House staff office or if non-resident in the medication cabinet within their educational area. When young persons' MAR sheets are complete, they should be scanned and stored electronically in the medical section (Scanned MAR & Movement sheets) within the young person's personal record. A maximum of two recent MAR sheets may be kept in the medication file/cabinet at a time. All others must be removed to prevent overcrowding of the folder/cabinet and potentially leading to a medication error.

Medication files should be kept neat and tidy at all times and contain the following items:

- Medication permissions/consent forms for all young persons
- A named picture of each young person requiring medication in the flat
- MAR sheets
- Movement sheets
- Up to date, relevant copies of instructions from external health care providers.

The maintenance of these files in residential care are the responsibility of the lead in medication for care (Alice Drinkald), in education they are the responsibility of the Academy nurse (Tracey Crabb), and in Rolle House it is the Registered Manager.

The administration of C.Ds from individual boxes and bottles must be checked by two members of staff who have completed their medication training. In order to preserve the young person's privacy and dignity and to provide a therapeutic parenting approach, only one staff member needs to be present to administer the medication. The member of staff who checks the C.D needs to sign the MAR sheet with a (C) in brackets after their name, and the person that gives it should sign and put a (G) after their name. By signing the MAR sheet, both staff are acknowledging that they have counted the medication and are certain that the correct number is present for the correct student. This complies with current NICE guidelines as well as 'The Handling of Medicines in Social Care' written by the Royal Pharmaceutical Society of Great Britain. If the C.D is contained within a blister pack, it is not necessary to have two members of staff checking and signing the MAR sheet. One staff member is sufficient and complies with current guidelines.

Any deviations to this policy involving C.Ds will be recorded on the young person's Placement Plan along with the reason why.

Where it is not practically possible for two staff to be present when preparing a C.D for administration e.g. when out during off-site activities, this must be stated on the MAR sheet and the reason why.

STAFF SHOULD NEVER SIGN TO SAY THAT THEY HAVE WITNESSED PREPARATION FOR ADMINISTRATION OR CARRIED OUT AN AUDIT OF A C.D IF THIS IS NOT CORRECT.

It is the responsibility of every staff member that administers medication to keep

the medication records accurate and up to date. Failure to do so may result in disciplinary action.

Confidentiality

Medication documents are confidential records and must be stored securely.

They are also official documents and any entry errors made in completing them must not be covered over with correcting fluid or scribbled out. Instead, a clear line should be drawn through the error and initialled and the correct entry entered beside or below it.

Information on these documents should only be discussed with the following persons;

- The young person
- Other care staff involved in the young person's care
- The G.P
- The pharmacist dispensing the medication
- Relatives or friends who have the young person's written permission or an enduring power of attorney (EPA)
- Other individuals on a 'need to know' basis only e.g. governors, independent visitors.

Prescribed Medication

All staff are to administer medication as per the instructions on the pharmacy prescription label. Prior to giving it, staff must check that the prescription label is consistent with the MAR sheet. If there are any discrepancies, the medication must not be given and the Academy nurse or line manager contacted immediately. Medication must be clearly labelled by the pharmacy with the young person's name, the name and dose of the medication, the frequency of the dose and any special instructions e.g. take with food. All medication dispensed by the pharmacy should be checked by staff as it is collected and again against the young person's Placement

Plan upon return to the Academy. If any medication is not labelled to the required standards, staff should ask the pharmacy to rectify this immediately. Any medication that is sent in from home that does not adhere to these standards must NOT be used and will be sent home.

Non - Prescribed Medication in the Care Setting

Any non-prescribed medication (homely remedies) will only be administered if it is in its' original packaging and it has clear written instructions from parents/guardians with details of why it is required, the young person's name, drug name, dose, frequency and any special instructions as well as the duration it is required for. Parents/guardians are required to complete the OPUS 'PRN (when required) Medicine' form for EVERY non-prescribed medication that they would like staff to administer. This form must be kept in the residential medication folder as well as scanned onto their student personal records. This is available to parents/carers on the Academy website.

Rolle House staff are able to give homely remedies to young person's without the need for an OPUS PRN form.

A separate MAR sheet must be created for PRN (as required) medication and the time given (in the 24-hour clock format) must be entered in the box next to the staff member's signature. Whenever PRN medication is given on an educational day, an email should be sent to all medication trained members of staff (under the group email 'Medicationday') as well as the young person's tutor. This should provide details of the name of the young person, the name and dose of the medication given, time given as well as a brief explanation as to why.

Staff must not offer advice to young persons regarding 'over-the-counter' medication or complementary treatments. All queries should be directed to the Academy nurse, the local pharmacist or the student's G.P. Only after that advice is sought may non-prescribed medication (homely remedies) be given.

At the beginning of each academic year, parents/guardians are required to complete a Parental Permissions booklet which contains a page for the administration of 'Homely Remedies.' A detailed breakdown of permissions given for each young person as well as the dose that they require may be found on Teams and the Residential Care file on the S drive under Nurse Forms. A hard copy of this form is also available in the medication file of every flat. Updates to permissions will also be distributed in the same manner. Each young person's permissions are also saved within their Student Personal Records.

Non-Prescribed Medication During the Educational Day

All medication given during the educational day will be administered by the Academy nurse or by a medication trained member of staff. A detailed breakdown of permissions for each young person, as well as the dose that they require may be found at the front of every medication file associated with a cabinet. It may also be found on Teams as well as in the Student Personal Records.

Whenever PRN medication is given, an email should be sent to all medication trained members of staff (under the group email 'Medicationday'), the young person's tutor as well as residential care staff (where relevant). This should contain details of the name of the student, the name and dose of the medication given, time given as well as a brief explanation as to why.

PRN medication that is used from the medication cabinets in the educational building, should be documented on the Medication Movement and Audit Sheet that accompanies the PRN medication. It should include details of the name of the young person it was given to, by whom, as well as the dose (please don't use abbreviations).

If a young person is non-resident, a Nurse/Home Report Form should be filled in (found on Teams) and given to the young person to take home. This should contain the same details as per the e-mail.

Medication Error Reporting

It is important that errors are recorded and the cause investigated so that lessons can be learnt and to prevent a similar error happening in the future.

Examples of medication errors are: the wrong dose is given, too much or too little, medication is missed and is not given, medication is given to the wrong student or medication is incorrectly stored or even lost. Anything that deviates from the correct storage, administration or recording of medication is considered an error.

If an error is discovered by any member of staff, their line manager and the Academy nurse MUST be informed immediately. Where necessary, the young person's G.P or NHS 111 should be contacted and advice sought. The advice given should be briefly reported in the young person's daily log/Mentor for Rolle House and a Medical Appointment Record form (this includes telephone consultations) completed and emailed to the Academy nurse. This should also be saved in the medical section of the young person's personal record as well as reported in shift handovers for students in the care setting.

A decision as to whether the staff member should be suspended from administering medication, will be made in the first instance, rather than waiting for the Medication Error panel to meet. This decision can be made by a Senior Leader, Deputy Manager or the Academy Nurse. This suspension may be removed following the Medication Panel meeting or may proceed as documented below.

The discovering member of staff must then complete a 'Medication Error Report' form and forward it immediately to the Academy nurse who will then investigate it, where possible, within 48hrs of receiving the report. Details of the error and the nurse's actions are then forwarded onto the Head of Care. A medication panel then meets to review the error and a decision is made on the outcome. This may involve the member of staff being put on a capability restriction or disciplinary procedures may be invoked by HR.

Please see the 'Error Reporting Protocol' for further details.

Refusal of Medication

Correctly taking medication is essential for the health and wellbeing of our young people, but the Academy also appreciates that there are circumstances in which they may fail to comply with their prescribed treatments.

Staff should never force young persons to take any medication if they do not want to.

Their rights are respected and those deemed to be 'Gillick Competent' are able to give or withhold consent for his or her own treatment at any time.

"Gillick competence is used in medical law to decide whether a child (16 years or younger) is able to consent to his or her own medical treatment, without the need for parental permission or knowledge. A child will be Gillick competent if he/she has sufficient understanding and intelligence to understand fully what is proposed"

However, young persons should be encouraged to take their medication, by informing them of why they are taking it and the benefits as well as the risks of not doing so.

If they still refuse to take their medication, this should then be recorded on the MAR sheet and signed by the member of staff that hears this refusal. If the young person refuses medication, staff have a duty to report it to their line manager and the Academy nurse the same day.

In the absence of the Academy nurse, the young person's G.P should be consulted or NHS 111 and the results of that conversation recorded on a 'Medical Appointment Record Form.' This form should then be e-mailed to the shift leaders, key worker and Academy nurse, as well as saved in the medical section of the student personal records.

If young persons are continuously refusing to take their prescribed medication, staff should try to ascertain as to why, and where appropriate the Academy Nurse will discuss the possibility of alternative medications with the G.P.

Disposal of Medication

All medication that is no longer in use or out of date should be returned to the Academy nurse immediately. This will be taken to a pharmacy to be destroyed. A return to Pharmacy form must be completed by the nurse with details of the drug(s) being returned, the name(s), dose, frequency, name of student for whom it is prescribed, batch number and expiry date. The form must then be dated and signed by both nurse and pharmacy staff and an official pharmacy stamp obtained.

Any medication that remains in a blister pack e.g. if the student is on a home weekend or refuses to take it, is to be returned to the nurse on a weekly basis. The used packs are then returned to White's pharmacy each month via their delivery driver as the new packs arrive. The delivery driver from White's pharmacy will then confirm receipt and leave a copy of the form for the Academy nurse.

If a single tablet needs to be disposed of e.g. it has been dropped on the floor, please dispose of it in a sharps box or place it in an envelope with the name of the medication and clearly marked 'For Disposal'

Rolle House staff are responsible for the return of unused and out of date medication to their local pharmacy.

Additional Medical Needs/Specialised Techniques

Where medication is given by 'specialised techniques', e.g. PEG feeding, staff will need additional specialised training. No member of staff is to participate in any specialised technique care unless: they have the permission of their manager, a care plan has been generated for the procedure, the information has been recorded on the Placement Plan (PP), the appropriate level of specialist training

has been undertaken, and the level of competency has been assessed by a healthcare professional.

Training for staff caring for young persons with additional medical needs will be carried out by their local authority, unless alternative arrangements have been made between the young person's local authority and the Devon authority.

All staff members who are involved daily with the young person will be trained, and records of the training will be held in the Human Resources Department.

When performing these specialised techniques, Academy staff must adhere, at all times, to the standards to which they have been trained.

Appendix 1: Location of Policies and other Documents

The following can be found electronically on Teams, in the Nurses folder as well as on the Shared Drive, within the Care section – Exmouth Residential Care - Nurse forms:

- Academy nurse's working hours and contact details
- Cold Chain Policy
- Controlled Drugs (C.D.) Policy
- Error Reporting Protocol
- Guide to Using Blister Packs
- The Handling of Medicines in Social Care (2019): Royal Pharmaceutical Society of Great Britain
- Instructions on How to Complete the MAR sheet
- Medication Handover Form (for external providers)
- Medication Movement and Audit Sheet
- Nurse/Home Report Form
- OPUS PRN (when required) Medicine Protocol Form
- Self-Medication Risk Assessment Form