

# Health and Wellbeing Policy and Procedures

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# **INDEX**

Section / Content	Page Number
Recording and Management of Student and Associate     Health and Wellbeing Information	2
2. Medicines Management	5
3. Staff Training	15
4. Nutrition and Hydration	16
5. Managing Specific Conditions	16
6. Health and wellbeing education for students	18
7. Healthcare Infection Control	18
8. Safeguarding, including Child Protection	18
9. Behaviour Management	18



# 1. <u>Recording and Management of Student and Associate Health and Wellbeing Information</u>

#### **General information**

The Health and Wellbeing team (or appropriate support staff at LFH) are responsible for recording general health and wellbeing information for each student or Associate. The information is kept on Databridge, Carelog and individual student files and is shared where appropriate using the event recording system (SUD), email and handover books.

# **Allergies**

The Health and Wellbeing team are responsible for keeping the allergy list up to date in each house. It is displayed on the inside of each medicine cabinet for quick reference and to maintain confidentiality. It is also stored in the electronic and paper Compendiums, available to all staff.

# **Hospital passports**

Students and Associates have individual hospital passports which ensure accessible information is available at short notice in the case of an emergency. Electronic copies are kept on SharePoint and paper copies in a folder at each student/Associate residence.

#### **Recording medical appointments**

It is the responsibility of staff supporting students and Associates to attend medical appointments to communicate and record the outcome of these appointments in the appropriate ways, i.e. verbal and written handover to contact staff and Health and Wellbeing.

# Risk assessments for student medication and medical conditions

Students and Associates have a risk assessment for medication and medical conditions. This allows the Health and Wellbeing team to monitor and audit specific 'high risk' students or Associates, thus reducing the likelihood of errors.

# Individual risk assessments

Students and Associates have individual general risks assessments which follow a 'traffic light' format. Staff must read these to ensure they are aware of individual students or Associate's risks and needs.

Students with identified specific needs have 'traffic light behaviour escalation scales'. These provides staff with information about specific presentation and

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behaviour through the stages of escalation and guidance on how to manage and de-escalate this behaviour. The risk assessments and traffic light scales are available in electronic format on SharePoint and paper format in the staff room at ATy. At RH, WHF and LFH each house, they are stored in individual folders.

# Learning disability health checks

The Health and Wellbeing team (or appropriate staff at LFH) are responsible for ensuring students and Associates attend learning disability health checks on a yearly basis.

# **Dental appointments**

Parents or guardians are responsible for student dental health. However, if a student develops an unexpected dental issue during term time, the Health and Wellbeing team can arrange an emergency appointment at Ringwood Dental Clinic.

The FCRT is responsible for Associate dental health.

#### Liaison with external bodies

When a student or Associate presents with any concerning changes in their behaviour, mental/physical health or any other specific needs which require additional support or specialist intervention, this must be reported to the Health and Wellbeing team. The Health and Wellbeing team are then responsible for referral and liaison with appropriate external bodies. Once the referral has been made the student or Associate can be supported to attend any appointments by staff who work closely with the individual, and are familiar with their needs. This may or may not be a member of the Health and Wellbeing Team.

Student and Associate personal information is only shared when necessary and confidentiality is maintained at all times, in line with the FCRT Data Protection policy.

#### Health and Wellbeing assessments

The Health and Wellbeing team are responsible for carrying out specific assessments in relation to:

- Mental capacity
- Behaviour
- Sexual knowledge and understanding
- Self-harm
- Physiotherapy
- Sensory needs

- Occupational therapy
- Self-administration of medication

(This list is not exhaustive)



#### Immunisation for students and Associates

The FCRT encourages health promotion strategies and immunisation is an important part of a preventative health care programme for the community. Students and Associates are made aware of this and the options available to them.

If the student is of an age where they are considered a child, a parent or guardian must sign a consent form for immunisation to go ahead.

If the student is legally an adult then Health and Wellbeing staff will confirm consent with the student prior to any immunisation-taking place.

The surgery practice nurse will also confirm consent with the student before administering the immunisation.

#### **Procedure for Tetanus**

All students and Associates should have received the required amount of tetanus injections during their childhood.

If a student or Associate incurs an injury that breaks the skin and there is a risk of infection, a member of the Health and Wellbeing team (or appropriate staff at LFH) will call the surgery and confirm whether the student or Associate requires another tetanus injection.

If the injury occurs out of normal working hours then staff need to call the Minor Injuries Unit at Lymington (01590 663000 opening hours 8am to 9pm) to clarify whether a tetanus injection is required. Outside of these hours, staff should contact the Head of Health and Wellbeing for further advice.

# Accessing medical treatment outside of surgery hours

- If a student or Associate requires **urgent** medical treatment then they should call an ambulance (dial 999).
- If it is felt that the student or Associate requires medical treatment but the situation is not urgent then staff should call 111 to see medical advice.
- If a student or Associate sustains an injury that does not require urgent care but needs medical input, then staff should take the student or Associate to the Minor Injuries Unit at Lymington (this service is nurse led, no doctors on site) or Bournemouth A & E.
- If a student or Associate sustains a head Injury, they must be monitored for any pain, distorted vision, nausea or vomiting, confusion or dizziness. If any of these symptoms are apparent, take them to Lymington Minor Injuries Unit.



- If a student or Associate sustains a severe head injury which renders them unconsciousness follow first aid procedures and CALL 999.
- If the student or Associate needs urgent medical attention due to breaking or dislocating bone or laceration needing sutures:

08.00-21.00 hours- Please go to Lymington Hospital 01590 677011

24 hours- Accident and Emergency at The Royal Bournemouth Hospital 01202 303626

24 hours- Accident and Emergency at Southampton Hospital 02380 777222

# 2. Medicines management

# Medicines ordering

All prescribed medication is ordered monthly, from the relevant GP practice.

Prescriptions are sent electronically to Boots Christchurch.

On receipt of prescriptions, Boots notify the Health and Wellbeing Department if there are any missing items. In this instance Health and Wellbeing liaise with the relevant surgery.

If there are any changes made to prescribed medication, or if new medication is prescribed, a 'Service User Update Form' is completed by Health and Wellbeing and sent by Fax to Boots Pharmacy.

#### **Receipt of medication**

Medication is delivered monthly.

A member of the Health and Wellbeing team is present to receive the order, and MARS sheets.

All medication is then checked by Health and Wellbeing staff to make sure what is received corresponds with the MARS sheet.

This is then recorded on the MARS sheet, in the appropriate box.

If there are any missing items, Health and Wellbeing staff notify Boots Pharmacy.

Receipt of Controlled Medication must be recorded in the C.D. book, and witnessed and signed for by two members of staff, who have the appropriate training. The amount of medication received **must be added to ALL of that individual's medication currently onsite**, including the medication kept in their own cupboard if

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self-medicating. This figure should then be entered into the totals column in the C.D. book.



# **Medication auditing**

Two members of the Health and Wellbeing team audit all medication monthly.

The amount of medication 'carried over' is entered on the MARS sheet, in the appropriate box.

The figures are then checked to make sure they tally with what should have been used.

Any discrepancies are reported to the Head of Health and Wellbeing.

### Disposal of medication

Boots Pharmacy, Christchurch, collects medication for disposal.

A member of the Health and Wellbeing Team completes the 'Returns Book'.

The following information is recorded:

Date, student or Associate's name, date of birth, medication, dose, amount being returned and reason for disposal.

On collection, a member of the Health and Wellbeing team and the Boots' driver both sign the 'Returns Book'.

Returned medication is also entered on the MARS sheet in the appropriate box.

#### Administering prescribed medication

- Only staff who have received generic medication training and have been observed and signed off as competent should administer prescribed medication. A competency assessment is completed at least annually by a member of the Health and Wellbeing staff and is kept on the staff member's Personnel file. If a member of staff has not been signed off by current Health and Wellbeing staff then they should not administer prescribed medication.
- There is an individual medication risk assessment in each student or Associate's file.
   All staff that are competent to administer medication should have read this.
   Included in this risk assessment is an individual PRN protocol for each student or Associate.
  - Before administering medications staff must follow effective hand washing procedures (see infection control policy).
  - The medication is dispensed and administered immediately to the student or Associate. Medication should never be dispensed in advance and left for later.



- All students or Associates taking prescribed medication have a Medication Administration Recording Sheet (MARS) detailing medication and times to be taken.
- Only one student or Associate should be in the Healthcare Room, or other designated area, whilst medicines are being administered.
- Check the student or Associate against the MARS chart to ensure medication not already given and gain consent from student or Associate.
- Staff to retrieve the medication from the cupboard and then lock it again whilst the student or Associate takes their medication.
- Check the medication container and contents and student or Associate's name on label against the MARS chart.
- Check the time of administration is the same on the prescription chart and medicine container.
- Check the dose/frequency is the same on the prescription chart and medicine container.
- Check the form the medication comes in is correct e.g. tablet, liquid or topical.
- For topical treatments check the date it was opened
- Check the expiry date of the medication on the container.
- Check the medication is to be given in the right way e.g. swallow, chew, and suck.
- Supervise the student or Associate taking the medication in the correct manner.
- Record on the MARS chart that the medication has been taken.
- The aim is for the **right student or Associate** to get the **right drug** at the **right time** in the **right dose** using the **right method** following the **right procedure** and ensuring the **right record keeping**.

#### Refusal/dropping of medication

If a student or Associate refuses their medication once it has been dispensed then staff need to put the refused medication in a clear pouch (provided by Boots Pharmacy) and label (again, provided by Boots). The information on the label must include student or Associate name, name of medication, dose of medication, date and be initialled by the member of staff administering the medication. The staff member must then record on the MARS that the medication has been refused (using the correct code that is indicated on the MARS and displayed on the wall).



If a student or Associate refuses a medication and it has not yet been dispensed then staff ONLY need to record this on the MARS. Staff do not have to dispose of the medication into the clear pouch.

If staff or a student or Associate drop medication then it should not be given and staff should follow the same procedure as for refusal of dispensed medication.

**N.B.** If unsure about administering a medicine, contact the Head of Health and Wellbeing for advice.

A British National Formulary (BNF) is available on all FCRT sites or access <a href="https://www.medicines.org.uk/emc/">https://www.medicines.org.uk/emc/</a> for staff to consult about the medicine they are giving and its side effects.

### Administering of controlled drugs

When staff administer controlled drugs, the following procedure must be followed: -

- Only staff who have received generic medication training and been observed and signed off as competent should administer controlled medication.
- There must be another member of staff present to witness the whole procedure.
- Check the student or Associate against the MARS chart to ensure medication not already given and gain consent from student or Associate.
- Remove the controlled drug from the locked cupboard within the medicine cupboard.
- See above for medication administration procedure.

#### **THEN**

- Count the tablets by emptying from the container to the triangle pill counter.
- Both staff members must check the outstanding amount of tablets or liquid in the stock balance column in the Controlled Drug Record book. Each time a tablet is given the number counted should be one less than the number before.
- An entry in the Controlled Drug Record book must be completed with the date, time, student or Associate's name and amount of medication to be given. The witness as well as the staff member administering medication must countersign this
- Return the controlled drugs to the lockable controlled drug cupboard.

# **PLEASE NOTE**

When a full-unsealed box of tablets is received from the chemist, to avoid over handling and counting, the sealed box is to be placed in the CD cupboard. It is not necessary to individually count these tablets as the amount will be on the sealed label. However, if the seal is broken the tablets must be counted. The number of tablets must



be added together with the tablets currently in use to give a stock balance in the CD book.

If a controlled drug is dropped please record in Controlled Drug Record book and place in sealed envelope back in controlled drug cupboard. Please notify the Health and Wellbeing Team as soon as possible for safe disposal at chemist.

### Administering homely remedies

There are many times at which a student or Associate may develop a minor ailment that needs to be treated. It is important that staff are able to respond in a timely way and help the student or Associate to feel well. To address this in a care setting, we use **homely remedies/over the counter medications**.

A homely remedy is a medicinal preparation used to treat minor ailments; it is purchased over the counter and does not require a prescription. These homely remedy products are kept in the residence.

Homely remedies fall into two legal categories,

- **GSL** (general sales list), which are available widely and sometimes referred to as over the counter medicines or
- P (pharmacy) medicines, which are available only from a pharmacy.

The GP (Dr R Jenkinson) for the Fortune Centre of Riding Therapy has agreed a list that can be given without consultation this is known as the FCRT GP Homely Remedy Group Directive (this is displayed in the medication area/room of each residence) If a homely remedy is used occasionally,

It is now **not** advised for staff in a care setting **to administer ibuprofen** tablets for mild to moderate pain. If paracetamol and ibuprofen gel are not sufficient, advice should be sought from the GP. If a student or Associate chooses to purchase ibuprofen, please advise health and wellbeing who will refer to the procedure for assessing capacity to buy homely remedies.

If a student or Associate buys or returns from home with homely remedies Health and Wellbeing need to be informed. A decision will then be made as to whether this item is safe to be kept in their room OR will need to be taken and put on a MARS and kept into the homely remedies cupboard.

# Administering PRN (as required) medication

Any student or Associate who is prescribed specific PRN medication such as antihistamine or inhalers or regularly requires non-prescribed PRN medications such as paracetamol will have an individual PRN protocol within their medication risk assessment. This is kept in each student or Associate's medication file.

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If a student or Associate is prescribed a PRN medication, this will be entered on the individual MARS.

At WHF and LFH, there will always be a member of staff on duty who has been trained and assessed as competent to administer medication. Therefore, if a student requires a homely remedy, this should be administered by that member of staff.

At ATy, if there is no Health and Wellbeing staff available, efforts should be made to locate a staff member who has been trained and assessed as competent to administer medication. If there is no such staff member available, it has been decided that all staff are able to administer homely remedies, in accordance with the following procedure.

The procedure is:

Before administering any homely remedy, the staff member must firstly check:

- Which homely remedies can be administered by FCRT staff. A laminated green summary is available in the ATy Health and Wellbeing room and the WFH Medical room.
- 2. The student or Associate allergy list that is listed on a laminated sheet on the inside of the glass-fronted cabinet in the ATy Health and Wellbeing room. At WHF, the sheet is on the inside of the homely remedies cupboard. At LFH the list is inside the stock medication cupboard.
- 3. The handover book and the homely remedies recording book (at either site) which show whether the student or Associate has already received any homely remedies that day.

It is also recommended that staff refer to the individual medication risk assessment for the student or Associate which details any specific PRN medication requirements.

Staff should record the medication given, the time, the dose and the reason on two stickers. One sticker is added to the homely remedies recording book kept in the Health and Wellbeing room at ATY, in the medication room at WHF, and in the office at RH and LFH. The second sticker is added to the relevant Handover book. In addition to this staff need to record the stock levels of paracetamol in the over the counter medication book.

Student/associate allergy list is inside the glass cabinet in the H and w room at ATY, inside the OTC cupboard at WHF, inside the stock medication cupboard at LFH and on the cupboard by the desk in RH office. It is also accessible on Sharepoint.

# Dispensing medication on exeat weekends and holidays



- Check what medication is required, including dosage and frequency by referring to medication charts in prescription folder.
- Check medication against chart and ensure medication is clearly labelled with drug name, dosage, frequency of taking and any relevant precautions
- Ensure student or Associate has enough for the weekend/holiday + a few days extra, (should they not be able to return as planned).
- If the student or Associate is responsible enough to carry own medication the staff member must ensure that it is packed in an appropriate place.
- If it is inappropriate for student or Associate to carry own medication then inform the adult accompanying student or Associate of medication required and any special instructions and give medication to responsible adult.
- Record all medication dispensed on specific exeat/holiday form in the back of the medication file.
- On return from holidays/exeat, all medication to be counted and entered onto exeat/holiday form.

**Please note:** When dispensing controlled drugs for exeats/holidays, there must be two members of staff present. The process above of signing drugs in and out must be completed in the controlled drugs book as well.

# NB Do not transfer medication into other containers or cut sleeves of packets in ha Self-administration of medication for students and Associates

<u>Aim:</u> To ensure that students and Associates receive training to administer their own medicines in a correct and safe manner to promote independence and autonomy.

# Practice:

- Before student or Associate is started on self-administration of medicines programme an initial risk assessment form must be completed.
- Risk assessment to be discussed by the Health and Wellbeing Team for agreement that student or Associate enters into self-administration of medication programme.
- The student or Associate is given information about self-administration of medication in verbal, written or in pictorial format by the Health and Wellbeing team.
- If the student or Associate agrees to proceed with the self-administration of medicines programme written consent should be obtained from the student or Associate and kept in their medication folder and also in the student or Associate's records. The student or Associate may withdraw consent at any time and this should be recorded in the student or Associate's records.
- The student or Associate is then entered onto the self-administration of medicines programme. Before the student or Associate moves from one level to the next



there should be assessment and discussion of their progress by the Health and Wellbeing team. They would also need to not require prompting for any of the items on each of the self-medicating assessment form.

All students or Associates will start on Level 1. There is a minimum of one week at each level but this can be longer depending on the individual student or associate.

## Levels of the self-administration of medicines programme

#### Level 1

- A supply of medication will be left in the student or Associate's named container which is stored in the medication cabinet at WHF.
- In RH and LFH, the medication will be kept in the student or Associate's room, locked in their medication cabinet.
- The student or Associate will be expected to request their medication at the correct time. If the student or Associate has not requested their medication within 30 minutes of appointed time the staff should remind them and then continue to follow the Level 1 assessment process.
- Staff should complete the assessment form. This is kept in the student or Associate's prescription folder.
- When the student or Associate is competent at Level 1, they will move onto Level 2.

# Level 2

- A supply of the student or Associate's medication will be stored in a locked medication cupboard in the student or Associate's room. Only a staff member will hold the key.
- The student or Associate will be expected to request their medication at the correct time. If the student or Associate does not request their medication then they should be reminded. As this is Level 2 of Assessment for selfmedication, the student or Associate should not need reminding. If the staff member is having to frequently prompt/remind the student or Associate then the student or Associate may have to go back to Level 1 for a longer period.
- The staff member will then open the student or Associate's medication cupboard and observe the student or Associate taking out the required medication. The staff member will then ask the student or Associate what they need to take. Before allowing the student or Associate to take the medication, the staff member needs to check it is the correct tablet and amount.
- Assessment for self-medicating form Level 2 to be completed by staff member. This will be kept in the student or Associate's prescription folder.

Before moving onto Level 3, a staff member of Health and
Wellbeing needs to complete, with the student or Associate, a student or
Associate self-medication checklist. The student or Associate needs to
'competent' in all relevant areas on the checklist before they can move onto
Level 3.

# Level 3

- A supply of the student or Associate's medication will be stored in a locked medication cupboard in the student or Associate's room. The student or Associate and staff will hold the key.
- The Health and Wellbeing Team will dispense a supply of medication, this will vary depending on the level of independence the student or Associate has.
- The student or Associate will be responsible for self-administration
- A member of staff will check daily that the student or Associate has left the medication cupboard locked.
- Review of self-administering medication will vary of the independence of the student or Associate but initially it will be weekly.
- If the student or Associate requires prompting from a staff member on any of the items on the self-medicating assessment form (Level 3) then the student or Associate will need to return to Level 2.

# Responsibility

- The Health and Wellbeing Team are responsible for student and Associate information, teaching and supervision before commencing self-administration of medication.
- The Health and Wellbeing team are responsible for ensuring ongoing supplies of medication.
- All assessments to be undertaken by registered nurses.
- Assessment forms to be stored with prescription chart in the student or Associates' medication folder and be completed by staff member undertaking medication.
- When students or Associates are on Level 1 and Level 2 of programme prescription charts to be signed in usual way. Staff will also need to fill in the assessment form for Level 1 and 2. Health and Wellbeing staff will complete assessment form for level 3.
- Level 3 does not require a prescription chart to be kept.
- The Head of Health and Wellbeing team is responsible for ensuring these procedures are implemented.



# Management of medication errors

A medication error is an error in the process of prescribing, dispensing, preparing, administering, monitoring or providing medicine advice regardless of whether harm has occurred.

As a preventative action, senior staff made a decision to limit the number of staff trained to administer medication. All staff that administer medication have been signed off as 'competent'.

#### Staff action in the event of a medication error

If a student or Associate is seriously unwell because of the medication error or incident, medical assistance should be sought straight away and the student or Associate monitored closely. If the student or Associate is mobile and communicating then the senior staff should contact any staff member from the Health and Wellbeing Team to inform them of the error and seek advice.

Staff involved should then report the error on My Concern. Health and Wellbeing staff will then investigate and decide whether the error is notifiable or not.

# **Examples:-**

- 1. Omissions prescribed dose not given
- 2. Wrong dose administered too much or too little
- 3. Extra dose given
- 4. Un prescribed medicine giving a student or Associate a medication that is not authorised for them
- 5. Wrong dose Interval giving the medication too early or too late.
- 6. Wrong administration route administration of a medicine in a different form than prescribed.
- 7. Administration of a drug to a student or Associate that has a known allergy.
- 8. Administration of a drug past its expiry date
- 9. Not signing the MARS when medication not given.
- 10. Recording errors including signing on the wrong date or time on the MARS/CD book.



# 3. Staff Training

See staff training policy for further details

FCRT staff receive regular internal training on issues relating to health and wellbeing/safeguarding.

#### **Medication training**

Health and wellbeing staff who are registered Nurses and/ or have completed external medication handling training are qualified to assess members of the staff team and sign them off as competent to administer medication.

In order to administer medication a staff member must have completed the online generic medication training provided by boots. They must also have been assessed and observed and deemed to be competent and safe by a member of the health and wellbeing team. Specific paperwork is completed and these records are kept on the staff members file.

There are variations according to the site on which the staff member will be administering medication. If staff are to be administering medication at WHF, they must have been assessed doing the morning medication at WHF as this is the most challenging due to the number of students who require controlled medication. If the staff member is to be working solely at LFH or RH, then they can be assessed at this site only.

Specific staff have been identified, who will be responsible for administering medication on each shift and at each of the FCRT sites. There is to be two staff available at the main WHF site who are able to administer medication. This is so that, if there is a problem at another site due to the nominated person being absent or unable to fulfil this duty, this person can be asked to cover.

Staff are reassessed annually, and in the event of them being involved in a medication error.

#### **Epilepsy training**

At FCRT we recognise the importance of providing a high standard of staff training which is based on current practice. We aim to ensure that all staff are provided with the necessary training to enable them effectively support our students and associates to remain safe and well.

The staff team are trained internally by the head of health and wellbeing, who has completed an external course in training staff in this subject. The training involves all areas of the necessary generic epilepsy knowledge required. It also involves training staff in how to administer rescue medication. (The head of Health and wellbeing attends regular updates to maintain current skills).

The staff are signed off as competent when they complete this course, and a record kept on the staff members file. This training is repeated every 2 years, unless requested earlier.

# 4. Nutrition and Hydration



FCRT catering department are responsible for ensuring that the students receive a healthy balanced diet with alternative choices to account for differing taste. With regard to the Associates at LFH, the Associate coordinator and support staff are responsible for supporting the associates to buy and prepare a healthy balanced diet.

Students with diagnosed conditions which impact on their dietary intake will have specific individual plans in place which are written by Group staff with support from health and wellbeing if required. Catering staff are informed of any medical conditions and specific plans.

If staff identify an issue regarding the hydration or nutrition of a particular student which they require support with then health and wellbeing should be informed. Health and wellbeing will then liaise with relevant group staff and catering staff to resolve the issue.

All staff are responsible for making sure that they are aware of meal plans and individual needs/ behavioural plans, and these should be followed.

Staff must always respect the rights of students and associates, and be aware that although we can offer guidance in relation to encouraging healthy choices, a student or associate may choose not to take this advice. Where there are serious concerns over persistent prolonged poor choices which are impacting on the health and wellbeing of the individual we would then need to consider assessing mental capacity.

# 5. Managing Specific Conditions

#### Sensory needs

It is recognised that many students at FCRT have sensory needs. As an equine therapy establishment, it is common for students to meet sensory needs through working and being with the horses. However there are some students who need to meet their sensory needs in different ways.

At FCRT we always try and accommodate individual preferences and needs. We have a wide range of opportunities for people who seek sensory input. We are developing a range of sensory equipment which will be made available for students and associates to try.

If we feel that an individual requires specialist help in relation to their sensory needs FCRT will seek external support.

#### Managing Epilepsy

FCRT are able to accept students who have epilepsy, however the Health and Wellbeing Team and admissions department are responsible for obtaining all relevant information to enable a comprehensive Epilepsy care plan and Emergency protocol to be completed. Due to the risks associated with riding horses, we must also obtain specific agreement from the



parents or the student themselves that they understand the increased risk of riding a horse with epilepsy.

The individual needs of each student vary, and the way in which we approach the care and support of one person, may vary considerably from how we approach another. This is dependent on the type, frequency or pattern, and severity of seizures. A risk assessment process is carried out to establish whether the person requires monitoring at night, or to where a sensor during the day. It will also depend on the other needs of the student as to how much staff support they require.

It is FCRT policy that staff monitor any student with epilepsy whilst bathing/showering. This usually involves being present outside the bathroom door, to enable privacy whilst also being safe. Specific risks for each individual are stated in their epilepsy care plans and individual risk assessment.

All relevant staff are trained appropriately in generic epilepsy awareness and in the administration of rescue medication. (See Part 3 for specific details).

If the student is under the care of a Consultant Neurologist/ Epilepsy specialist nurse in their home area, it is usual for them to remain with this team for the duration of their course, unless it is agreed that a referral to a team local to FCRT is more appropriate. Normally the family support the student to attend their reviews/ appointments in their home area. Should the student experience an increase in seizures or change in seizures during their course, and they are not under an existing epilepsy team, the health and wellbeing team will make arrangements through the GP for a referral to the local team.

Seizure recording forms are available and should be completed by staff who are present when the student has a seizure. These forms are kept on the students file and copies are sent to the parents where appropriate in order for them to take to appointments/keep records.

# Managing mental health

FCRT recognise that many of our students have metal health needs and we always seek to support and assist with these issues. We have a registered Mental Health Nurse, who uses her skills and experience to provide individual support and counselling to students identified as requiring specialised input. If required, referrals can be made to external teams of specialists who work alongside our staff to assist the person.

Students or associates who come to FCRT with existing diagnosed conditions relating to their emotional/mental health are supported using any known strategies which are passed on to FCRT during our information gathering/assessment process. Any self-harming behaviour, suicidal tendencies or issues with anxiety are clearly documented in the individual risk assessment/traffic light/ behaviour plan. Staff are responsible for keeping themselves up to date with current care plans

#### The Forest Room

The Forest room is in the bungalow at ATY and has been designated as a place where students can go if they feel they need to have some quiet time, to rest, or if they feel unwell.



The Forest room has a locking system so that staff have to be present to unlock the door when someone needs to use the room. This is important as it means that staff are then aware of who is in the room.

- If a student is going to use the room the following rules apply:
- Only one student is to use the room at a time
- Staff attending when they enter the room are responsible for ensuring that the student is monitored according to their needs. How this is done will vary from student to student.
- The staff member permitting access to the forest room is also responsible for communicating with any staff working in the area that the student is in the forest room.
- No china crockery or glasses are to be taken in to the room. If food or drink is taken into the forest room plastic cups and paper plates should be used
- The room should be left in a clean and tidy state. If the student has made a mess they should be asked or assisted to tidy this when they leave. If there is any need to specific cleaning to be done, staff should report this appropriately.
- When leaving the room the door should be closed and therefore locked.

# 6. Health and Wellbeing Education for Students

See Education Policy

# 7. Healthcare Infection Control

See Infection Control Policy and Procedures

# 8. <u>Safeguarding, including Child Protection</u>

See Safeguarding Policy

# 9. Behaviour Management

See Behaviour Management Policy