

St Helena Corporate Parenting Policy 2019



"Working together to promote the well-being and safety of vulnerable children and adults in the community of St Helena"

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Approved by: *[Signature]*

Date: *02/02/2021*

Date of Implementation:

Date of next review due: July 2021

Introduction

The St Helena Government (SHG) strives to provide and deliver services that are robust, inclusive and meets the needs of its citizens. It views the children of St Helena extremely important, as they will be the future of the island.

In an effort to ensure that the children of St Helena are safeguarded and thrive, it has recognised the need to work in partnership and particular, look at the way in which it cares for looked after children that are brought into its care. This is underpinned by the Welfare of Children's Ordinance and the UK Children's Act 1989.

Children that are brought into care and in need of services, must have services that support them to be resilient, complete education and gain fulfilling employment opportunities. To ensure that looked after children and care leavers achieve, the SHG intend to fulfil their duties as a 'corporate parent'.

SHG recognise the responsibilities of the role of a corporate parent and agree as an organisation to complete this task to the best of its ability.

The elected members have chief responsibility for looked after children and care leavers. As such, when a court order is made, elected members will seek to have some understanding of the

said child's plan. This will fall in particular but not solely to the 'Children's Champion'.

The wider responsibility of corporate parent seeks other partner agencies to work together to ensure that looked after children and care leavers are safeguarded, supported with any emotional, physical, cultural and religious needs. Their educational attainment will be seen as a priority which will be continually supported to achieve good outcomes.

Who is this policy for?

This policy is to read by all elected members and all staff who work for services that are responsible for delivering to looked after children and care leavers on behalf of the SHG.

What are SHG's key responsibilities?

SHG will have oversight of all the services that deliver to looked-after children and care leavers to ensure that the staff group are DBS checked, have the relevant qualifications for their post and adequate training to deliver high quality services.

SHG will sign up to and promote the 'Care Leavers Charter' to demonstrate its commitment to children that have been through the care system and endeavour to see that they have relevant support to become positive contributing citizens of St Helena.

When will this policy be reviewed?

This policy will be reviewed every two years by SHG to give continued endorsement, amend or update as required. The next review will be in July 2021.



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MEDICATION POLICY

Policy Statement

EVCH believes that every service user has the right to manage and administer their own medication if they wish to and will provide support and aids to enable safe self-administration wherever possible. However, to ensure their safety, and the safety of other residents, all service users will be assessed on a regular basis and will only be considered for self-administration if considered safe to do so.

Aim of the Policy

Records will be kept of all medication prescribed to service users who self-administer and a secure area will be provided in the service user's room for the storage of self-administered medication, including non-prescription and alternative remedies.

- 1) All medication within the home must be safely stored away, including non-prescription medication, alternative remedies and self-administered medication. A lockable metal drug cabinet are provided for this purpose. The keys to the cabinet should always be kept by the appropriate trained staff member. The cabinet should never be left unlocked or unattended at any time.

- 2) All incoming medication should be recorded in the stock record. Controlled drugs should be recorded in the controlled drugs register. Incoming medication without a clear label stating name of patient, name of medication, expiry date, strength, dose, frequency of administration, start and finish times, should be referred to the community pharmacist. Stock should be checked weekly by Senior Carers in charge with



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particular attention paid to expiry dates. Medication should always be kept in its original packaging with the service user's name clearly visible.

- 3) Medication should be administered by a designated, appropriately trained member of staff.
- 4) A separate record should be kept for each service user which should be signed and dated by a qualified prescriber. Staff should carefully check the identity of each service user to ensure that the correct record is being used and that the correct medication is being given to the correct person. Staff should also check the medication name, the strength of the medication, the dosage instructions and the expiry date. Controlled drugs should always be double-checked by a second suitably trained member of staff. Complex dosage calculations should also be double-checked.
- 5) All drug errors must be reported to the Senior Carer in charge without delay.
- 6) Staff should always be aware of the medication being taken by individual service users and should report any change in condition that may be due to medication or side-effects immediately to the Senior Carer in charge. The Senior Carer in charge should then discuss the case with the prescriber, with another prescriber or with the community pharmacist.
- 7) All unwanted or surplus medication should be returned to the community pharmacist for disposal and a receipt obtained. When a service user dies all their medicines should be retained for at least seven days before disposal.



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8) All staff will be offered training covering basic information about common medicines and how to recognise and deal with medication problems. Additional training will be offered to those fulfilling the Responsibility role.

Homely Remedies

EVCH understands a homely remedies is referring to a medicine that can be bought over the counter to treat minor symptoms for short periods only (e.g. headache, cough, indigestion). It is the policy of EVCH that a small supply of such remedies from a limited approved list may be kept as stock for use as required on a short term basis, provided that written permission is first obtained from a service user's GP, or from a GP practice clearly stating which medicines are considered acceptable and for how long they can be given.

All homely remedies should be:

- Stored in a locked medicine cupboard
- Administered by qualified staff or designated persons only in accordance with advice given on the information sheet included with each medicines
- Entered in a stock record book and have a marked expiry date
- Only given on a short term basis, no service user being given any one domestic medication for more than [insert number] consecutive days without seeking the advice of the service user's GP.

It is the policy of Ebony View Residential Care Home to keep this list as small as possible and new medications should only be added by agreement with a GP and pharmacist. Where a service user or their relatives requests the use of a remedy not on the domestic medicines list, the request should be referred to the service user's GP.



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Staff should be aware of the possible side effects of all medications on the domestic medicines list and watch out for such side effects in any service user using domestic medicines, whereupon medical advice should be sought immediately. The Ebony View Residential Care Home staff should also note whether a GP has excluded any service user from receiving any homely remedies.

Non-Compliance with Medication

Most residents in care homes are prescribed some form of medication at some time as part of their treatment by their doctor. EVCH believes that the correct and effective administration of such medication is essential for the health and well-being of its residents and, in this regard, EVCH believes that it is an important part of the care given by the home that self-medicating residents are enabled to take their medication as prescribed and that non-self-medicating residents are administered their medication by staff effectively and as prescribed.

However, EVCH also understands that there are circumstances whereby some residents may fail to comply with their prescribed treatments, self-medicating residents failing to take their medication as directed or non-self-medicating residents refusing their prescribed medication, or failing to swallow it and then disposing of it. In such cases EVCH is clear that it has no right to force non-compliant residents to take their medication but that it does have a duty to monitor non-compliance and refer all such cases back to the original prescriber, to the service user's GP and/or to the service user's key worker.

Reviewed: 08/07/2020



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Signed:

Hercules *Dave*

Next Policy Review Date: 01/07/2021

