



Family Nursing & Home Care

Standard Operating Procedures for the Registered Nurses on Mont a l'Abbé Primary and Secondary School Sites

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Document profile

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Author	Community Children's Nursing Team
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Contents

Introduction	1
Principles	1
Nursing Assessments	2
Care Plans	3
Delivery and Personal Care	4
Continence Assessment	5
Off Site	6
Immunisations	7
Planning and Delivery of Mont à L'Abbé Paediatrician Clinics	8
Height and Weight Monitoring	9
Record Keeping	10
Nurses Delegating Care to Non-Registrants	11

Appendices

- Appendix 1 - Competence in Clinical Skills (Non-Registrant in a Family Nursing & Home Care Community Nursing Team)
- Appendix 2 - Competence in Clinical Skills (Non-Registrant not in a Family Nursing & Home Care Community Nursing Team)

Introduction

These standard operating procedures (SOPs) have been developed to guide the practice of Registered Nurses working on the Mont a L'Abbe primary and secondary school sites. They also provide a framework for the provision of safe and effective care.

Principles

- these standard operating procedures do not replace professional judgement which should be used at all times
- a clear rationale should be presented in support of all decision making
- practice should be based on the best available evidence
- appropriate escalation when care needs have this requirement
- where care is delegated to a Non-Registrant, the Registered Nurse remains accountable for the appropriateness of the delegation and the overall outcome of the delegated task
- the safeguarding of children and young people underpin these SOPs
- it is acknowledged that children and young people with additional/complex needs are more at risk of harm

Please note other standard operating procedures are available including those that are part of policy and guideline documents

Nursing Assessments

Purpose

All children referred to the Mont à L'Abbé nursing caseload need to have a comprehensive nursing assessment. This will identify their care needs and minimise risk to their health and wellbeing and to those around them.

Scope

Assessment of care needs by the Registered Nurses working at the Mont à L'Abbé school sites.

Core Requirements

- Children admitted to Mont à L'Abbé, nursing caseload will require a written referral from the Community Children's Nursing Team (CCNT), a professional at the Child Development Centre, or the School Nurse Team.
- Where there is a concern about a child's health needs raised by a member of the school nurse staff, a written referral should be made to the CCNT for allocations and clinical decision making by the CCNT Team Lead or deputy in liaison with the registered nurse at Mont à L'Abbé.
- Triggers for assessment include:
 - Nursery entry
 - School entry at any of the year groups.
 - Deterioration in a child's condition already known to the registered nurse.
 - Identified nursing need in a child at school previously not on the nursing caseload.
 - At the school or family's request where they think there is nursing need.
- The registered nurse will complete a Primary Nursing Assessment or **School Nurse Health Assessment at school entry**. It is the responsibility of the nurse at MAL to decide which one is most appropriate.
- **NB** for a child on the Children's Palliative Care Pathway, the Holistic Needs Assessment will be in place and the Named Nurse for Palliative Care must be informed if there are additional details for the nursing need to be met in school. The Holistic Needs Assessment will be amended accordingly.

Care Plans

Purpose

Following assessment, a plan should be developed to meet the care needs of the child; minimising risk as far as is reasonable practicable.

Scope

The planning of care for children on the Mont à L'Abbé school nursing caseload, care delivery and evaluation.

Core Requirements

- The registered nurse will write a nursing care plan using the information from the assessment and this will be agreed by the child (where appropriate) and the family.
- The registered nurse will deliver the nursing care required by a child within their role and responsibilities.
- Where it is appropriate and in the child's best interests, the registered nurse will train and delegate care to school staff, ensuring competency is achieved and maintained. Care will be delegated as per the 'Nurses Delegating Care to Non-Registrants' standard operating procedure.
- Where care is delegated, the Care Plan used will be "Supporting Delivery of Care."
- Care plans will be evaluated following every school half-term.

Delivery of Personal Care

Purpose

At Mont à L'Abbé School it is expected that daily personal care is provided to an individual child as required, by school staff as part of their school plan to enable access to education. However, the registered nurse will assist in personal care when there is a need to do so. This includes, assessment of pressure areas and skin integrity, assessment of a stoma, giving advice on positioning of the child for personal care, assessment of a child's personal care in order to inform risk assessment.

Scope

Registered Nurses working on the Mont a L'Abbe school sites. Assessment of care needs and where required, supporting school staff to deliver safe personal care. This SOP also includes delegation of care.

Core Requirements

- The registered nurse will be involved in the "changing rota" when there is an assessed nursing need e.g. protection of airway. The registered nurse will be named on the changing rota following discussion with appropriate school staff.
- The registered nurse will provide oral feeding to a child where it has been discussed and agreed for them to do so with the Speech and Language Therapist and only where a Speech and Language Therapy assessment and feeding plan is in place.
- Delegation of care to school staff will be for a named child only. All delegation will be undertaken as per the SOP for 'Nurses Delegating Care to Non-Registrants'

Contenance Assessment

Purpose

All children with continence issues need to be assessed at least annually with a view to promoting continence rather than containing the problem.

Scope

This SOP encompasses the recording of continence assessments on EMIS, the development of toileting plans and the issuing of a 'voucher' where continence products are required.

Core Requirements

- The registered nurse will carry out annual continence assessments, as required, with consent from the parent. Assessment will be recorded in EMIS. Only these two codes must be used on EMIS. "Contenance Care and Advice" and "Contenance Assessment".
- The outcome of the assessment will be fed back to the parent and this communication will be recorded in EMIS.
- Where a toileting programme is required in school, this will be drawn up by the registered nurse, in discussion with the parent and delivered in participation with identified teaching and teaching support staff at school.
- Where a child has a toileting plan in place, the plan will be evaluated every term "Autumn, Spring and Summer", and feedback given to the parent and school staff involved with the individual plan. Any changes needed to the plan will be made by the registered nurse and communicated to the identified school staff for implementation.
- Where continence products are required, the registered nurse will prepare a new Pharmacy Locale Product Voucher, using the information gained from the assessment. One copy of the voucher will be given to the parent, one copy emailed to New Era and one copy will be scanned or attached onto the child's record on EMIS, along with the continence assessment.
- Each stage of the continence programme will be documented in the child's record on EMIS.

Off Site

Purpose

There is generally only one registered nurse on site at each school therefore any plans for being 'off site' need to be anticipated so cover can be arranged.

Scope

Any requirement for the Registered Nurse on either school site to be 'off site' during the school day. 'Off site' requirements may include:

- School trips
- Training
- Collecting products/equipment
- Medicines collection or delivery or administration
- Safeguarding meetings

Off-site will **exclude** escorting a child from school to Accident and Emergency, or escorting/attending outpatient hospital appointments with children from MAL

Core Requirements

- Any requirement for the registered nurse to be off site requires discussion with a line manager **first**:
 - Safeguarding – discuss with School Nurse Team Lead.
 - Nursing Care delivery – discuss with Community Children's Nursing Team Lead.
- Team Leads will negotiate off site care, as appropriate, with the registered nurse.

Immunisations

Purpose

Registered Nurses based at the Mont à L'Abbé school sites are well placed to support the delivery of immunisations to children at the two school sites.

Scope

This SOP covers the training requirements for nurses who deliver immunisations to children, training requirements for the Mont à L'Abbé based nurses who will support this delivery, organisational and administrative requirements for the delivery of immunisations and liaison.

Core Requirements

- Immunisations are only to be administered by a School Nurse who has completed the following training:
 - immunisation training programme
 - anaphylaxis
 - PGD
 - basic life support
- Before administering any immunisations, the registered nurse must be fully signed up to the relevant PGD's
- Mont à L'Abbé based School Nurses will **assist** in the co-ordination of the immunisation programme and **support** the child during the process
- To provide this support, the Mont à L'Abbé school based nurses will complete the following training:
 - anaphylaxis
 - PGD
 - basic life support
- The Mont à L'Abbé based nurses will sign up to the Adrenaline PGD and act as second nurse who can administer Adrenaline should this be required for the emergency treatment of anaphylaxis
- Liaising with the School Nursing Team Leader/School Nursing Assistant to confirm dates and inform parent/carer of immunisation dates
- Collating of information from consent forms and informing the School Nursing Team Leader/School Nursing Assistant
- Following up missing consent forms, liaising with parents and promoting immunisation uptake
- Liaising with parents post immunisation and recording any discussion on EMIS
- Reporting any adverse reactions to the School Nursing Team Leader/Paediatrician/Head of Public Protection/Completion of Yellow Card

Planning and Delivery of Mont à L'Abbé Paediatrician Clinics

Purpose

Some children cannot access the out-patients clinics at Jersey General Hospital and therefore require to be seen by a Paediatrician during school hours on the school site.

Scope

Identification of students requiring a review by the Paediatrician and administrative arrangements before and after clinics.

Core Requirements

- Identify students requiring clinic at school (those who cannot access out patients at JGH).
- Liaise and negotiate date for clinic with Paediatric Secretary.
- Arrange clinic times with parent/guardian of identified student.
- Send letters/emails of confirmation date and time with Paediatric Secretary and parent/guardian.
- Follow up post clinic: update care plans; complete referrals; liaise with relevant professionals/parents/guardian.

Height and Weight Monitoring

Purpose

The 'Healthy Child Programme' (DoH, 2009) advocates that children's height and weight is reviewed at certain key times. Outside of these times, height and weight monitoring may also be required where need is identified

Scope

Height and weight monitoring in Reception and Year 6 as per the Jersey Child Measurement Programme and at other times where there is assessed need. It also includes training requirements and approved equipment.

Core Requirements

- All children in Reception and Year 6 to be offered a height and weight review in line with the Healthy Child Programme (DoH, 2009)/Jersey Child Measurement Programme
- Mont à L'Abbé School Nurses will support those children during the child measurement process
- Staff must be appropriately trained to undertake height and weight measurements using the approved equipment.
- Only approved equipment will be used (Leicester Height measure and calibrated weighing scales)
- Outside of the child measurement programme, the Mont à L'Abbé School Nurses will also monitor the height and weight of any child for:
 - dietetic purposes
 - safeguarding purposes
- Discuss with parents to gain consent prior to measuring their child's height and weight
- Use approved and appropriate equipment depending on the child's need and ability
- Record results on EMIS
- Report concerns to the appropriate professional where deemed necessary – e.g. Dietician, GP, Paediatrician
- Provide written and verbal feedback to parents and where required, give advice and support as appropriate to needs

Record Keeping

Purpose

Record keeping is an integral part of the child's care. Family Nursing & Home Care have a range of policies and procedures to support good recordkeeping practice.

Scope

This SOP covers recordkeeping, training and information security including the safe storage of electronic devices.

Core Requirements

- EMIS electronic records will be kept up to date in accordance with NMC guidance
- Secure storage of electronic devices will be maintained in order to ensure client confidentiality, staff should follow all relevant local policies e.g. Mobile Device Policy, Data Protection Policy, Record Keeping Policy
- Records should meet the requirements of the Family Nursing & Home Care (FNHC) Record Keeping audit criteria.
- Mont à L'Abbé school based nurses will attend Record Keeping Training where this is identified as a requirement for their ongoing professional development

Nurses Delegating Care to Non-Registrants

Purpose

To provide guidance for nursing staff at the Mont a L'Abbe School sites who are delegating care to non-Registrants and assessing the competence of non-registrant staff to perform specific interventions.

Scope

Appropriate delegation and the assessment of the competence of non-registered staff by Registered Nurses. This SOP differentiates between non-registrants working in a Family Nursing & Home Care community nursing team and those who don't. It has been adapted specifically for use when delegating to Education Department staff.

Core Requirements

- NMC registrants should be clear about the principles of accountability and delegation and should refer to The Nursing and Midwifery Council's (NMC) code (2015) in relation to this. The Royal College of Nursing also provides guidance on accountability and delegation.
- Delegation of care must always be in the child/young person's best interests.
- Prior to delegating care, the Registrant must ensure that the non-registrant has the necessary skills and competence to safely perform the delegated task/s.
- Prior to the assessment of competence, the non-registrant must have received appropriate training that includes theoretical and practical components.
- Full records of training (including dates) should be recorded and sent to the Family Nursing & Home Care Education and Development Department.
- The assessment of competence should be documented, ideally against recognised standards e.g. National Occupational Standards (www.skillsforhealth.org.uk) and should include assessment of the non-registrant's knowledge as well as of their practical skills.
- Wherever possible, QCF accredited modules (or similar accredited vocational training) should be utilised and Nurses should encourage other organisations whose staff they may be delegating care to, to consider this training.
- The Registrant remains responsible for developing a care plan for the delegated care. This plan should be explicit regarding the expectations of when the non-Registrant should report deviations from acceptable parameters e.g. blood sugar levels above or below a certain level.
- Where care is delegated the Care Plan used will be "Supporting Delivery of Care."
- Care plans will be evaluated following every school half-term.
- The non-registrant must have access to this care plan.
- Care plans must explicitly indicate that the care can be delegated to a non-registrant and the frequency for review by a Registered Nurse. When review of the child/young person's care needs takes place, the Registrant must give consideration to whether or not delegation of the care is still appropriate and in the child/young person's best interests.
- It is important that the Registrant recognises that they are delegating part of the child/young person's care to a non-registrant but they are not delegating ALL of the

child/young person's care needs to a non-registrant. The child/young person still requires ongoing care/contact with a Registrant.

- EMIS should reflect the date/s when reassessment of competence of the non-registrant/s is due.

Delegating care to Family Nursing & Home Care Non-Registrants working in a community nursing team

- When the undertaking of a QCF type module has not be appropriate/possible, the document 'Competence in Clinical Skills (Non-Registrant in a Family Nursing & Home Care Community Nursing Team)' (appendix 1) should be completed for any non-registrants to whom FNHC Nursing staff are delegating an intervention, when they have been deemed competed to carry out the intervention. An electronic copy should be sent to the Education and Development Department and the original kept in the staff member's portfolio.
- Competence to carry out a specific intervention should be reassessed annually or more often if required.
- Once deemed competent to carry out a specific intervention, non-registrants working in community nursing teams do not have to have their competence re-assessed every time the care of a new child/young person is delegated to them. However, it is good practice to accompany the staff member the first time they undertake care for the child/young person to ensure that they are fully aware of the care required and how this is carried out.

Delegating care to a Non-Registrant not part of a Family Nursing & Home Care community nursing team

- **N.B.** *Care can only be delegated to a non-registrant who is not part of a Family Nursing & Home Care community nursing team if they are employed by the Education Department or other approved provider of care.*
- Before training and assessing the competence of non-registrants not working as part of a community nursing team, Registered Nurses must be aware of the position of the individual's employer/Head Teacher in relation to the delegation of the intervention and their requirements for the recording of competence.
- The nurse must gain written permission from the Non-Registrant's manager/employer to delegate the task. This should be done on the document 'Competence in Clinical Skills (Non Registrant not in a Family Nursing & Home Care Community Nursing Team)' (appendix 2)
- Wherever possible, staff being delegated to should be encouraged to undertake the appropriate accredited vocational training module.
- The document 'Competence in Clinical Skills (Non Registrant not in a Family Nursing & Home Care Community Nursing Team)' should be completed, when the non-registrant has been deemed competed to carry out the intervention.
- The original, fully completed 'Competence in Clinical Skills (Non Registrant not in a Family Nursing & Home Care Community Nursing Team)' document should be filed in the child/young person's care records.
- The assessment of competence must only be undertaken on a **child/young person-specific basis**.
- **N.B.** FNHC staff cannot 'sign off'/deem competent non-FNHC staff where an intervention is not being delegated by a FNHC Registered Nurse.
- Competence to carry out a specific intervention should be reassessed annually or more often if required.

Competence in Clinical Skills

(Non-Registrant in a Family Nursing & Home Care Community Nursing Team)



Following training and assessment of practice

Name: _____ **Designation:** _____

has been deemed competent on (date): _____ **to perform / undertake:** _____

Supervision, ongoing updating and re-assessment of competence will be provided by the delegating clinical area.

Signature of Assessor:

Name of Assessor (please print): _____

Date: _____

N.B. Re-assessment of competence to be undertaken at least annually.

Reassessment Date: ***To be initiated by:***

Having been deemed competent to perform the above skill(s), I agree to carry it/them out as taught and feedback any concerns I may have to the delegating Nurse/Health Visitor. I understand that I will be accountable for my practice and further agree to seek advice and support from a Registered Nurse/Health Visitor if I am uncertain about any aspect of the care I am providing.

Signature:

Name (please print): _____

Date: _____

Original, signed copy to be kept in the portfolio of the non-registrant who has been assessed. Education and Development Department to be informed electronically by the assessor of the competency achieved.

