

Medication Policy & Supporting Pupils with Medical Needs at School

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This policy applies to the staff of The Llewellyn School, medical professionals working in the school, parents, and governors of the school and staff/trustees of Louie's Helping Hands Charity.

Introduction

The Llewellyn School supports pupils with special educational and medical needs. These pupils have the same rights of admission to the school as other pupils and cannot generally be excluded from the school for medical reasons.

The Llewellyn School will accept responsibility for managing and administering medicines either orally or via an enteral feeding tube e.g. gastrostomy or nasogastric tube or in an emergency situation if the medication is prescribed and there is a need for it in accordance with prior consent from parents.

Managing Medicines in School

Staff of The Llewellyn School support the welfare of pupils with medical needs by administering medication alongside any additional needs they may have e.g. enteral feeding, tracheostomy care, ventilation needs following appropriate training.

Administration of medication is identified as a requirement on the job description of Teaching Assistants if there is a need for its dependant on the pupil in question. There is full insurance cover provided for staff who are acting within the scope of their employment. Therefore, designated members of staff may be expected to administer medication on a regular basis, following the appropriate training and evidence of competency.

(Note - Although teachers are not contractually required to administer or supervise medication, or support a pupil's medical needs, they are expected to ensure the welfare of pupils whom they have responsibility for, by managing and supervising the administration of medication - unless they have opted out by agreement with the Head of School).

Administration of medication

All matters to do with medication are confidential.

The storage and administration of pupil's medication always follows the school's protocols. Staff who administer medication must have the necessary training before they do so.

If a pupil does not like taking medicine willingly an assessment must take place with the Head of School and the Medical Team who will discuss the situation with parents and if necessary, contact the pupil's GP or Paediatrician. A plan will be drawn up as to how this situation will be managed. If a member of the medical team is not on site, then the school will contact the on-call school nurse/SLT for advice.

Medication consent forms and medication record forms are essential to the safety of the system. The name, dose and time for each medication are listed individually on Medication Consent forms (1 per medication).

Each pupil requiring medication has their own medication record form which lists the medication, dose, route, and time as well as pupil's name and D.O.B.

Medication must come in its original package and must have the original label, both as supplied by the pharmacy. The label must state the following: pupil's name, name of dispensing pharmacy and date of dispensing name of medication and dose/frequency. If any of these details are missing, no member of staff should administer the medication.

Where administration of this medication is essential to the welfare of the pupil, then the school medical team will seek further advice.

In the absence of the school nurse who will normally administer the medication each day, training has been given for additional teaching assistants to administer this. If they are also unavailable, the parents or guardian of the child will be informed.

Transporting of medication

Parents and staff are requested to write in the home schoolbook, email or telephone school / nurse or speak directly to member of staff at school when they are sending medication into school.

Parents and staff are asked to ensure that they notify each other and the escorts and taxi drivers that a pupil is carrying medication.

Parents are asked to directly hand the medication to the staff member taking charge of their pupil or to the taxi driver/ escort if appropriate to then be handed to staff member on arrival to school. Parents are asked to notify the school that medication is being sent in with the pupil.

At the end of the day the medication should be handed over to the parents or to the escort for safe delivery home unless it has been agreed for the medication to remain in school for continual use.

Procedures for receiving and storing medication

On arrival of medication at school the named member of staff looking after the pupil will either hand the medication to a member of the school medical team who will record and lock away; or in their absence they will need to record and sign medication into the file and lock into medical cabinet located in medical room.

Staff must make sure all medication is labelled with the pupil's name, dose, and frequency of administration. Also, the expiry date must be checked upon receiving medication.

All medicine except for inhalers must be kept in a locked cupboard or fridge, and the keys must be kept in a named place, always.

Inhalers should be stored in the pupil's classroom and spare inhalers in the medical room.

Expiry dates must be checked with awareness of end of use so parents can be given written notice for replacement requests.

Parents are responsible for the disposal of date-expired medication. School staff should not dispose of medicines - parents should be sent home or should collect medicines held at school at the end of each term.

Emergency medication will also be stored in the locked medicine cabinet.

Medication Consent Forms

Medication Consent forms are obtainable from the Medical Team/SLT on request. See appendix A Consent will be gained from parents for trained staff to administer medication for their pupil. Each medication will be listed on consent form stating: Names of medication, dose, times to be given, route, duration of medication signature and printed name of parent, and date.

If there are any changes to medication, new medication consent forms must be completed and signed by the parents.

For "one-off medication", such as antibiotics, written instructions from the parents must be obtained (usually a note written in the home/schoolbook or email). If needed for more than 1 day a medication consent form should be completed for further doses. A member of the medical team or the school nurse will make sure this dose is administered and will complete a medication record chart which will then be stored in medical notes.

Medication Record Forms

The medication record forms are stored within the medications folder in the medical room. See appendix B. The medication record forms are completed, amended, signed, and dated by members of the school medical team.

These forms are for school purposes only.

They indicate the pupil's name, date of birth, allergies, photograph, the name of drug, dose, times to be given and route and any additional information needed.

Staff must not use Tippex or other correction fluid on the medication record forms - these are legal records, and they must not be tampered with. It is a legal requirement to store medication record forms for two years. These will be filed and stored in the medical room. Black pen only should be used to sign the medication record form.

At the end of the school day, the staff responsible for administering medication have the responsibility to check that all medication and feeds have been given and all signatures have been recorded.

Administration of medicine

Staff may only give medication to a pupil if they have received the necessary training and have been deemed competent to administer medication in school.

Staff can only give authorised medication to a pupil.

Before administering, all medicine must be checked against the medication record form, ensuring the correct medicine/dose/route/time and the name of the pupil along with the medication expiry date. Dates of opening must be recorded on the bottle, and this must be taken into consideration when checking expiry dates.

All medicine must be prepared IMMEDIATELY before giving it to the pupil and signed for by the person administering the medication, immediately after on the medication record form.

Pupils need to be encouraged to take their medication. If a pupil spits out or refuses to take the medication, the school medical team or in their absence a member of the senior management team must be informed immediately. Parents may then need to be notified to discuss further plans for administration.

This will also have to be indicated on the medication record form (see key on the medication record forms) also to be recorded in the medical notes.

Spillage must be recorded on a school incident form and the medical team, and a member of the senior management team informed. Parents should also be informed.

Pupils should have their own syringes for medication stored separately in a named container. These should be washed in warm soapy water after use, rinsed and allowed to air dry.

Errors

If errors occur, e.g. overdose, wrong medication administered or medication forgotten, staff must inform a member of the school medical team and a member of the senior management team immediately.

The member of staff involved must complete a record in the school incident record book as well as recording in the pupil's notes if appropriate.

Parents must be informed of any errors immediately by the School Nurse, medical team, or member of the senior leadership team.

Medical advice if needed must be sought immediately from the school medical team, or by telephoning the pharmacist, or by telephoning NHS Direct on 0845 4647 or 111

School Outings

Medication needed for an outing must be taken in its original container the above procedures should be followed for administration of the medication.

Emergency medication and equipment such as suction machines, ventilators, replacement gastrostomies/ tracheostomies are always to accompany the pupil when off site.

First aid kits, journey planners and individual medical cards should always also accompany pupils off site.

Non-Prescription Medicines

School Staff should never give a non-prescribed medicine to a pupil unless there is specific prior written permission from the parents and agreement from the Head of School.

If this is the case

- Staff should check that the medicine has been administered, without adverse effect to the pupil in the past, and that parents have certified this is the case.
- The medication must be in its original container with the manufacturers name and guidelines. An expiry date must be present.
- When administering non-prescribed medication to a pupil the above procedures should followed and parents informed.
- When the school nurse is on a site, an additional consent form will give to parents to enable the nurse to administer paracetamol, ibuprofen and Piriton if required, where consent has been given. This is in line with the nurses PIN and NMC code of conduct. If the nurse is not on site, these are not given unless they are prescribed by a GP and are child specific medications with an additional consent form.

Calpol (Liquid Paracetamol)

Paracetamol is a widely used drug for controlling pain and reducing temperature. Despite its prevalence, it can be very dangerous if taken inappropriately. Overdose requires immediate medical attention.

Although a pupil who is unwell should be at home it is sometimes appropriate to give paracetamol at school.

This can be done currently if the pupil has a bottle of prescribed paracetamol with them with required details on the label (as previously stated for any other medication) it is then to be recorded on the individual's medication record form. If needed to be given due to pain or high temperature parents are to be informed and a plan put in place for collection or monitoring of the situation.

The pupil will need a completed medication consent form as with any other medication and all procedures as previously stated are to be followed.

If paracetamol is required prior to midday, the parent must be contacted to confirm whether the pupil may have been given a dose of paracetamol before coming to school.

There should be at least four hours between any two doses of paracetamol containing medicines. No more than four doses of any remedy containing paracetamol should be taken in any 24 hours.

Parent to have written information sent home in home schoolbook/ email confirming when the pupil had paracetamol and the dose, so they know for the rest of the day.

Many non-prescription remedies such as, but not limited to, Beechams Powders, Boots Pain Relief Syrup for Pupils, Lemsip, Night Nurse, Vicks Cold Card, etc. contain paracetamol. If paracetamol is taken soon after taking these remedies it could cause an unintended overdose.

Use of food supplements

Some pupils are prescribed food supplements for example Maxijul/Seravit from the dietician or food thickeners such as Thick n' Easy which is prescribed by SALT.

Parents should fill in school consent forms stating quantities to be given and times due.

This should be recorded on a medication record form and administered by trained staff.

Borderline Substances

The following borderline substances may be applied by school staff during the normal day to day care of a pupil. These include but are not limited to, sunscreen, emollients/barrier creams, e.g. E45, Vaseline, Sudocream, Metanium, toothpaste and Lipbalm, etc. IF they have previously been used on the pupil with no adverse reactions.

It is the responsibility of the parent to provide instructions as to the application and to ensure they are clearly labelled with the pupil's name. Parents are also responsible for ensuring any products are in date.

These items are only to be used on the pupil for which they were supplied.

Enteral feeding

To support pupils who, require Enteral feeds during the school day, some members of support staff are trained to administer either bolus or pump feeds via either a Gastrostomy, Jejunostomy or Nasogastric tube as required.

To provide safe and accurate administration of Enteral feeds the following principles must be maintained.

The storage and administration of pupil's feeds always follows the school's procedures

Procedures are regularly reviewed and updated dependant on recent legislation and guidelines.

Staff who administer feeds all have the necessary training before they do so. There is a robust system in place to ensure the competency of staff is regularly assessed.

Feeds can only be administered if parental consent has been given via the consent for administration of feeds in school form, which will be stored in the pupil's medical notes.

Procedures for the Administration of Enteral Feeds

Bolus feeds

Staff can only give the feed prescribed for that individual pupil.

Before administering, all feeds must be checked against the consent form and record chart, ensuring the correct feed, amount, and time along with the expiry date.

The medical team members are responsible for compiling the daily regime feed chart.

The equipment is to be prepared including feeding sets, syringes and extension sets (these items are for the individual pupil only and should always be stored when not in use in the pupil's named container) in the medical room.

Strict hygiene is to be observed, including hand washing and the wearing of gloves throughout the procedure.

The extension set must be primed with water/ feed (dependant on individual regime) and attached to the Mic-key or Mini button.

The feed and flushes should be given following the pupil's individual regime/ care plan, amount of feed/flush and duration to be given.

For naso-gastric tube feeding the tube needs to be aspirated and tested with PH paper to verify correct position/placement prior to flushing. This may require additional training.

After the feed is finished the tube should be flushed with water as directed in the feeding regime. The extension set is then detached and washed in warm soapy water until tubing is clear along with any re-usable syringes and stored in the pupil's named container.

Pump feeding

Staff can only give the feed prescribed for that individual pupil.

Before administering, all feeds must be checked against the consent form and record chart, ensuring the correct feed, amount, and time along with the expiry date.

The equipment is prepared including the pupil's individual feeding pump, feeding sets, syringes and extension sets (these items are for the individual pupil only and should be stored when not in use in the pupil's named container) in the medical room.

Strict hygiene is to be observed, including hand washing and the wearing of gloves throughout the procedure.

The extension set must be primed with water and attached to the Mic-key or Mini button. • The tube should be flushed with water as directed in the feeding regime. For nasogastric tube feeding the tube needs to be aspirated and tested with ph paper to verify correct position/placement prior to flushing.

The giving set must be primed with milk before attaching to the pump.

The pump rate and dose should be checked against the individual feed regime chart

After the feed is finished the tube should be flushed with water as directed in the feeding regime and the extension set is then detached and washed in warm soapy water until tubing is clear along with any re-usable syringes and stored in the pupil's named container in the medical room. This is all done on an individual pupil basis.

Where needed i.e. jejunostomy care equipment / syringes etc can be sterilised in Milton or steam sterilizer

Dealing with problems

Listed below are the most common problems:-

- site red/infected Keep stoma clean and dry. Can be cleaned with gauze and cooled boiled water. Inform parents in home/school book. Refer to Pupil's Community Nurse if concerned.
- Blocked tube If blocked do not attempt to feed. discuss with family or Pupil's Community Nurse for advice.
- Tube falls out - this requires immediate action. Each pupil has an emergency tube. Please refer to the pupil's emergency care plan in their notes and act accordingly.
- Difficulties tolerating Enteral feeding (for example, retching, vomiting or loose stools) this should be reported to the school medical team and parents and possibly then on to the pupil's community nurse team and dietician.
- Additional water may be required in hot weather. This should be discussed between the medical team and the parents/ dietician.
- Training can be arranged on the pupil's pumps directly from the companies if needed. All supplies for enteral feeding are currently sent in from home and stored in the medical room.

Emergency medication

Staff who are trained to give emergency medication in the event of a prolonged seizure, diabetic attack, asthma attack, anaphylaxis reaction may do so by strictly following the individual pupil's emergency medication care plan. These can be found in the pupil's medical notes or within the bum bag that has the emergency medication in.

Administration will be recorded on appropriate medication record form and parents should be informed.

Changes to the care plans can only be made at the direction of the Lead Consultant in liaison with the School Medical Team. It is the responsibility of parents to contact the Lead Consultant regarding any amendments to the care plan. A copy of the hospital care plan will be in school as well as a school care plan.

A pupil 's emergency medication should be available to them at all time. However, if for any reason a pupil's medication is not brought into school with them there is no reason for their exclusion. However, parents should be informed, and possible emergency medication should be brought into school at the earliest possible time. The School Medical Team and Head of School should also be informed.

If a pupil has a seizure and their emergency medication is not available an ambulance should be called if the seizure lasts over 2 minutes.

Epilepsy

To support pupils with Epilepsy, some members of support staff are trained to administer emergency medication. (Rectal Diazepam or Buccal Midazolam)

To provide safe and accurate administration of emergency medication, the following principles must be maintained:

- The storage and administration of pupil's medication always follows the school's procedures.
- Procedures are regularly reviewed and updated dependant on recent legislation and guidelines.
- Buccal Midazolam is a controlled drug. Buccal Midazolam should be stored in the locked medication cabinet within the medical room. Although not a legal requirement it is always good practice for controlled drugs to be accounted for.
- Medication can only be administered if parental consent has been given and a Care Plan has been completed Medication must come in its original package and must have the original label both as supplied by the Pharmacy.
- The label must state the following: - pupil's name, date, name of medication, dosage and clear instructions for use.
- Buccal Midazolam should be signed out of the room, when taking it out and signed back in when returning it. The record sheet will be in the medical room, in the medication file below the medication cabinet.
- The buccal midazolam will be kept in a named emergency pack in the cabinet with the pupil's information and care plan within, for ease when taking the pupil off site.
- Whenever a pupil goes off site their medication must go with them and kept with the pupil for use in an emergency.

Procedures for the Management of Epilepsy

- All relevant school staff are aware of pupils with Epilepsy and their individual Emergency Plan.
- The medical team are responsible for producing and maintaining the School's Emergency Treatment Plan, following the care plan from the Lead Consultant.
- The medical team is responsible for disseminating information to school staff.
- In the event of a pupil having a seizure appropriate First Aid is commenced.
- A trained member of staff should be called and if more assistance required an emergency call out given.
- Protect the pupil from injury and note the time of onset of seizure.
- Collect the pupil's emergency medication pack and refer to the pupils' individual care plan. Stored within the emergency bag or the pupil's notes
- If no medication is required record time, length, and description of seizure in the pupil's home/schoolbook or seizure diary.
- When possible, place pupil in the recovery position.
- If in any doubt an Ambulance should be called.
- If emergency medication is given it should be recorded on the pupil's medication record in the medication record file stored below the medication cabinet in the medical room. Care plans and medical notes would need to be updated to reflect the administration of emergency medication. Community nursing team may also need to be informed.
- If a pupil is given emergency medication an ambulance must be called unless it states otherwise in the Care Plan. Parents must also be informed.
- Supply of emergency medication will then to be requested to keep stock levels at an adequate level in school
- If the emergency medication has expired, is not present in school, or the pupil does not have a care plan, then an ambulance must be called if the seizure lasts 2 minutes or longer. If a pupil's

seizures are increasing in frequency/duration, the Medical Team will advise parents to discuss these changes with the Lead Consultant.

- Only a trained member of staff can administer Rectal Diazepam, Buccal Midazolam or other emergency medication. These do need to be double checked prior to giving (the witness does not have to be trained).
- As with all medications, it can only be administered to pupils for whom it has been prescribed and for whom written instructions have been obtained.
- If a pupil's emergency pack is required to be taken off site, the member of staff responsible for medication should fill out and sign the record sheet (the record sheet is kept in the Medication folder in the medical room) to indicate they have the pack, once returned to the Medical Room the pack should be signed back in.
- A pupil may only go off site if there is an accompanying member of staff trained to administer Buccal Midazolam.
- A list of Expiry dates of Emergency Medication is kept by the school nurse in the Medical Room. At least one month's notice is given to parents to ensure they have time to order new supplies.

Asthma

To support pupils with Asthma some members of staff are trained to administer emergency medication (Salbutamol inhaler via Spacer device).

To provide safe and accurate administration of emergency medication, the following principles must be maintained:

- The storage and administration of pupil's medication always follows the school's procedures
- Procedures are regularly reviewed and updated dependant on recent legislation and guidelines.
- Staff who administer emergency medication all have the necessary training before they do so.
- Medication can only be administered if parental consent has been given.
- Medication must come in its original package and must have the original label both as supplied by the Pharmacy.
- The label must state the following: - pupil's name, date, name of medication, dosage, and clear instructions for use.
- Prescribed salbutamol must always be available and in easy reach

Procedures for the Management of Asthma

- All relevant school staff are aware of pupils with Asthma and their individual Emergency Plan/Asthma card.
- The school medical team and head of school are responsible for producing and maintaining the School's Emergency Treatment Plan and disseminating information to school staff in conjunction with guidance from the pupil's hospital consultants/ team
- In the event of a pupil having difficulty in breathing/an Asthma attack, appropriate First Aid is commenced.
- A First Aid trained member of staff should be called and if more assistance required an emergency call out given.
- Refer to the pupil's emergency asthma care plan and administer prescribed inhaler.
- If in any doubt an Ambulance should be called.
- If an inhaler is required again in less than four hours from previous dose, the parent should be contacted to collect the pupil so they can be reviewed by their GP or an ambulance called (depending on severity of symptoms).

- While waiting for the ambulance to arrive, if the pupil is experiencing severe breathing difficulties, the prescribed dose of Salbutamol can be repeated every few minutes as required. 2.
- As with all medications this can only be administered by a trained member staff in conjunction with a signed medication consent form and appropriate guidance from doctors. Following all procedures previously stated. All medications given to be recorded in the pupil's medication record form and medical notes to be updated accordingly.

Allergy/Anaphylaxis (EpiPen)

- To support pupils with Allergies some members of support staff are trained to administer emergency medication (EpiPen, Salbutamol inhalers and antihistamine). To provide safe and accurate administration of emergency medication, the following principles must be maintained:
- The storage and administration of pupil's medication always follows the school's procedures.
- Procedures are regularly reviewed and updated dependant on recent legislation and guidelines.
- Staff who administer emergency medication all have the necessary training before they do so.
- Medication can only be administered if parental consent has been given.
- Medication must come in its original package and must have the original label both as supplied by the Pharmacy. The label must state the following: - pupil's name, date, name of medication, dosage, and clear instructions for use.
- Emergency Medication packs must always be available for use for pupils with risk of Severe Allergy. These will be made up and monitored by the school nurse or medical teaching assistant.
- Procedures for the Management of Allergies
- All relevant school staff are aware of pupils with Allergies and their individual treatment plan
- The school medical team are responsible for producing and maintaining the School's Emergency Treatment Plan and disseminating information to school staff in conjunction with guidance from the pupil's hospital consultants/ team.
- In the event of a pupil having suspected exposure to an allergen, appropriate First Aid is commenced.
- Refer to the pupil's emergency pack and administer the appropriate medication, ie antihistamine for mild symptoms and Epi-pen for severe reaction and prescribed inhaler.
- If in any doubt an Ambulance should be called. If the Epi-pen is given an ambulance must be called.
- While waiting for the ambulance to arrive, if the pupil is experiencing severe breathing difficulties, the prescribed dose of Salbutamol can be repeated every few minutes as required if appropriate. First aid procedures and protocols to be followed along with guidance from the 999-emergency call
- Each pupil with risk of severe allergic reaction always has an Epi-pen on them and if indicated antihistamine and inhaler also. Their individual care plan will also be with them and in their notes. There is a spare Epi-pen for each pupil in the Medical Room.
- Pupils with mild allergy reactions will have the antihistamine stored in the medication cabinet in the medical room.
- Only a trained member of staff can administer emergency medication although the medication does need to be doubled checked prior to administration (the witness does not have to be trained).
- As with all medications this can only be administered by a trained member staff in conjunction with a signed medication consent form and appropriate guidance from doctors. Following all procedures previously stated. All medications given to be recorded in the pupil's medication record form and medical notes to be updated accordingly.

- A list of Expiry dates of Emergency Medication (Epi-pens) is kept by the school medical team in the Medical Room.
- At least one month's notice is given to parents to ensure they have time to order new supplies.
- Parents are responsible for checking the expiry dates and contents of any emergency packs that they may keep for travel or for use at home

Diabetes

- To support pupils with Diabetes some members of support staff will be trained to test blood glucose and administer Insulin.
- To provide safe management of a pupil with Diabetes the following principles must be maintained:
- The storage and administration of pupil's medication always follows the school's procedure.
- Procedures for the care of pupils with diabetes will have been set up in partnership with The Community Nursing Team and are regularly reviewed and updated.
- Staff who administer insulin and test blood glucose all have the necessary competency training before they do so.
- There is a robust system in place to ensure the competency of staff is regularly assessed.
- An individual Health Care Plan will be devised for pupils with Diabetes in agreement with parents, Paediatric Consultant, School and Pupil's Community Nursing Team and will be regularly reviewed.
- Emergency packs have been developed for pupils with Diabetes which must always be available.

Tracheostomy

- To support pupils with a tracheostomy in situ some members of support staff will be trained to perform suction, tracheostomy changes and general care/ awareness of a pupil with a tracheostomy.
- The storage of any equipment needed must always follow school procedures.
- Suction machine / catheters and emergency tracheostomy replacement kit must always remain with the pupil.
- Spare suction machine to remain in the medical room.
- Only trained members of staff are to administer any suction needed.
- Strict hygiene is to be observed, including hand washing and the wearing of gloves throughout any procedure associated with a tracheostomy.
- A pupil with a tracheostomy must never be left on their own. A fully trained member of staff must always be with them. They should always have another adult present, if possible, if not doors to be left open so as not to be closed off.
- Some members of staff will have a basic level of tracheostomy awareness training, these members of staff however are not fully trained and cannot administered any care needed.
- If the pupil is to show any signs of breathing difficulties due to blocked tracheostomy or de-cannulation emergency protocol to be followed, these are kept in the pupil's medical notes but continually monitor observations looking out signs of distress, pale colour, blue colour around lips, intercostal/subcostal recession (sucking in of chest muscles), sweaty/clammy skin, noisy breathing, gagging
- In an emergency trained staff to follow procedures and change tracheostomy tube and call 999 if needed (unable to replace tube) and inform parents
- Follow Basic life support training if necessary

A pupil's care plan will state the suction catheter size and the length of insertion.

- To clear secretions from the tracheostomy:
- Make sure all tubes are attached to suction machine
- Attach correct suction catheter to the suction machine
- Insert catheter to the stated length
- Occlude port to commence suction
- Suction to be no longer than 5-10 seconds.
- Water will be needed prior to suctioning to clear the tubes to machine
- For more detailed information please refer to the pupil's individual care plan found in their medical notes.
- The medical team and parents are to work together to make sure equipment is supplied and serviced. This equipment is for single use only
- Currently all supplies that are needed are sent in from home via parents.
- Any waste should be disposed of in a yellow bin.

Ventilation

- To support pupils who, require some level of ventilation during the school day some members of staff are trained to be able to support this.
- If a pupil needs ventilation during the day an agreement/ care plan needs to be drawn up in agreement with staff at school and parents following guidance and individual care plans written by the lead consultant and community teams.
- Any training that is needed from specialist hospitals will be sourced and staff will attend.
- Pupils to bring ventilator into school along with all tubing and masks and power supply/ battery packs
- A copy of the pupil hospital care plan will be stored in their medical notes in the medical room.
- All equipment will be checked, and check recorded on arrival to school, any concerns being discussed with parents.
- Pupils on ventilator are not to be left alone at any time and only trained members of staff are to attend to their needs whilst on ventilator.
- If indicated and equipment is available oxygen saturations can be monitored along with heart and breathing rate and these are recorded.

Policy Reviewed by:	Suzy Hollett (HR Manager)
Date:	30/05/2022

Policy Verified by:	Sara Llewellyn (School Leader-CEO)
Date:	01/06/2022

Date for Next Review:	30/05/2023
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APPENDIX A

Medication Consent Form

Please complete this form for every medication your pupil needs.

Name:																												
DOB																												
Allergies																												
Instructions:																												
Date																												
Drug:																												
Dose:																												
Route:																												
Times:																												
Drug:																												
Dose:																												
Route:																												
Times:																												
Drug:																												
Dose:																												
Route:																												
Times:																												

The School will not be able to give your pupil medication unless you complete and sign this.

Pupils Name	
DOB	
Medication	
Dose to be given	
Time to be given	
Route and instructions	
Start date	
Finish date (if applicable)	
Reason	

Medication must be in the original bottle/packet and labelled by the pharmacy please

Name	Sign
Date	
Nurse Sign	Date

APPENDIX B - Medication Record Form

Please note this will appear in landscape when opened on the computer and will contain the pupil's photo along their details

APPENDIX C

Consent For The Administration Of Enteral Feeds In School

Name of Pupil	
Date of Birth	
Type / Name of Feed	
Route e.g gastrostomy, MIC-KEY	
Times to be given	
Amount	
Flush	

I give consent for the medical team/SLT to administer the feed as stated above to my pupil whilst in their care at The Llewellyn School

Name of

Parent/Guardian.....

Signature of

Parent/Guardian.....

Date.....

Seen by School Medical Team

Sign.....Name.....

Date.....