

Optional Annex to Role Profile for Special Schools

This document may be attached to any Teaching Assistant/HLTA role profile where there will be a requirement for the postholder to be trained to assist in the medical/care needs of pupils. Schools must liaise with the relevant health care professional regarding which of the procedures outlined below can/cannot be delegated to staff. Any that cannot be delegated should be removed from the list before attaching the Annex to the role profile.

Supporting Pupils with Medical Conditions in Special Schools

Extract from the Lancashire County Council document '*Supporting Pupils with Medical Conditions in Special Schools*' (April 2023):

The following advisory list of interventions may be safely taught and delegated to non-health qualified staff following a child-specific assessment of clinical risk. The tasks listed below have been identified by the Royal College of Nursing as tasks that can be safely delegated.

All staff must receive sufficient and suitable training (and appropriate refresher training) from professionals identified by the health provider and demonstrate that they possess the necessary level of competency and confidence before they undertake any activity relating to supporting an individual in managing their medical condition. This training must be arranged and coordinated by the school and training should be kept up to date.

In Mayfield School, you may be required to undertake any of the procedures below, following appropriate training:

- Administering medicine in accordance with prescribed medicine in pre-measured dose via nasogastric tube, gastrostomy tube, or orally
- Bolus feeds via a nasogastric tube
- Bolus or continuous feeds using a pump via a gastrostomy tube
- Management of Tracheostomy care including suction using a suction catheter, and unplanned tracheostomy changes in line with the child's risk assessment and emergency plan within the child's care plan
- Oral suction with a Yankauer Sucker. Oral suction is determined as a targeted activity only in cases where oral secretions are being removed in the mouth. This does not relate to deep suction.
- Injections (intramuscular or subcutaneous). These may be single dose or multiple dose devices with pre-determined amounts of medication to be administered as documented in the individual child's care plan.
- Administration of adrenaline auto-injectors
- Catheterisation - including Mitrofanoff and Supra Pubic
- Care of Mitrofanoff-intermittent catheterisation where the bladder is re- directed through a hole in the abdomen.
- Stoma care including maintenance of patency of a stoma in an emergency situation once stoma has been well established for more than 6 months and there have been no problems with the stoma
- Inserting rescue medication using a pre-packaged dose of a prescribed medicine, for example, rectal diazepam.
- Administration of buccal or intra-nasal Midazolam and Hypo stat or GlucoGel
- Emergency treatments covered in basic first aid training including airway management, assistance with inhalers, cartridges and nebulisers - Please note, this only relates to pupils who are usually have a stable respiratory system

- Assistance with prescribed oxygen administration including intermittent oxygen saturation monitoring.
- Blood Glucose monitoring as agreed by the child's lead nursing/medical practitioner i.e., GP, Paediatrician, or paediatric diabetes nurse specialist.