

## TRANSCRIPT: School nurse

Linda Ebdon

The education staff are not medical people, so I like to think the role of the school nurse is to help educational staff to feel confident and comfortable in looking after the children, while they're in school.

I'm based here but I also cover three other special schools, so I can't be here all the time. So, it's very important for me to know that if I'm not in school, educational staff know exactly what they should be doing. So, if we've got half-a-dozen children with gastrostomy feeds, for instance, and they all need to be fed at between twelve and one, I can't do them. So, it's very important for educational staff to know how to do a gastrostomy feed and how to administer medication, if a child needs it.

I do personal care plans for the children with the more complex health needs and it explains what the educational staff should do in relation to each condition and how that will impact on the daily care of the child.

I do training for staff for the epileptic children *so that if they take the children out of school, then the children are safe and they can have their medication, if needed.* We have emergency medication, which helps with the child who's in a fit and also to prevent them having further fits and going into *status epilepticus and then eventually going into hospital.*

With things like oxygen, I will arrange for the respiratory nurse to come in and do the training with staff so that they feel comfortable in administering it.

What we aim for here, is to meet as many of the medical needs as possible, so the parents don't have to go all over the place to get their children seen. So we have paediatricians who do clinics in school. We have a dietician who comes and does a clinic, which will look at the child's nutrition. We have a continence nurse who does a clinic, who will look at the continence needs. We have an orthoptist who comes into school to do vision testing. We have a chiropodist who comes into school to look at their feet, if necessary. So we try and look at the child as a whole, which is both beneficial to the child and to the parent, I think.

We have a community paediatric nurse team who I can call on if I'm concerned about anything and they'll also come into school, if necessary. But there's also the community learning disabilities team, who we liaise with very closely, so if there's a problem with behaviour then the community learning disabilities nurse will go and visit the family at home and does a one-to-one session with children in school as well. She also does a sleep clinic here, 'cause sleep's quite an issue for a lot of the children, to look at specific sleep problems.

It's really crucial to involve the parents in all of this and we listen to parents because they know these children better than anybody.

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