

## **Policy Guidelines for Care and Usage of Percutaneous Endoscopic Gastrostomy Tubes (P.E.G)**

### **Introduction**

In accordance with St. Vincent's School Mission Statement, we commit ourselves to "continuously strive to provide a Quality Education in a happy, safe, learning environment so that all pupils will reach their potential". To this endeavour, it may be necessary to support pupils with feeding needs. When the administration, care and usage of PEG Tubes is required to facilitate a fully inclusive environment, every effort will be made to accommodate the needs of the pupils.

### **Rationale and Background**

The purpose of this policy is to outline the specific procedure involved when supporting a child with individualised feeding needs i.e. Percutaneous Endoscopic Gastrostomy Tubes (PEG) for children within St Vincent's Special School.

This policy is formulated following generalised training with Nutria and TCP Home Care and consultation with the Multi-Disciplinary Team and parents. When a child who requires a PEG feed commences in School specific training individualised to the needs of the child should be delivered by the appropriate health professional to the appropriate SNA staff.

Where a care need has a specialist nature, e.g. peg-feeding, training should be provided to the SNA. Once this training has been received it is the SNA's duty to attend to the care needs of the child.

This policy applies to all SNA staff involved in the care of children who are being fed via PEG.

The purpose of these guidelines is to outline the procedures involved in supporting students who require PEG feeding in school.

To ensure the care needs of students are properly managed in school

A small number of students require this support and it is the responsibility of the referral agency and parents to ensure that staff members are made aware of the particular needs of the child. SNA training is made available through the Board of Management to ensure the correct procedures are followed in school.

### **Definitions**

**PEG Tube** – a gastrostomy tube which is placed endoscopically through the abdominal wall and through which liquids may be fed to a child. Some children may have an external tube through which liquids are fed and some have a smaller button in the abdominal wall through which food is directly administered.

**Bolus feeding** – refers to a volume of feed given over a limited time at regular intervals through the PEG tube.

**Continuous feeding**-continuous feeding refers to administering an enteral feed continuously using a feeding pump.

**Enteral feed**- enteral feeds are commercially prepared, pre-packaged and sterile to reduce the risk of microbial contamination. Feeds are administered on either a continuous or bolus basis depending on the nutritional requirements of the child.

**Flush** – a quantity of water fed through the tube before and after the administration of food or medication.

**Stoma**- A Stoma is surgically created it is a Small opening on the surface of the abdomen.

### **Responsibilities and roles**

It is the responsibility of parents to inform school staff of the need for specialist feeding arrangements for their child. A full explanation of the procedure as it applies to the child should be provided in writing from a health professional.

It is also the responsibility of the parents to provide all equipment, food, water and medication to the school for this procedure.

It is the responsibility of the SNA staff working with the child to adhere to these guidelines and to report any difficulties or issues arising to the Principal. It is the responsibility of the Principal to ensure parents have been informed of any difficulties as appropriate.

Peg Feeding is known as a CLEAN procedure and is not a STERILE procedure and therefore it is possible to support PEG feeding both at home and in school.

### **Routine Care**

Ensure that parents have supplied all the equipment and feeds to the school.

Store the Enteral supplies safely and appropriately in a specific Locked press in the classroom.

Maintain the necessary equipment within an appropriate area and notify parents in advance when stocks run low.

A suitable discreet place should be sought to administer the feed and give an element of privacy to the child.

At all times, SNA's should engage in appropriate infection control measures i.e. hand washing, use of disposable gloves etc. to minimise the risk of cross infection.

Observe the stoma site and immediately report any signs of infection, soreness or leakage to the Principal, class teacher and parents.

Individualised guidelines regarding feeds and flushes that are specific to the needs of the child will be supplied by the parents in conjunction with the appropriate healthcare professionals.

### **Administering of feed**

To administer the feed follow the individual guidelines specific to the child.

SNA staff to prepare feed and all relevant equipment needed for each scheduled feeding time.

SNA staff should carry appropriate infection control measures i.e. hand washing before and after each feed.

Dispose of syringes in an appropriate manner, purple syringes may be included in general waste and clear syringes to be put in sharps bin or returned to parents for disposal.

Follow manufacture guidelines for cleaning purple syringes

Any changes to the procedure – amounts, content of feed, timing, etc should be notified by parents to the SNA's involved. Details should be provided in writing and filed within the school.

Requests for medication to be administered through the tube should be made as with other forms of medication in school (See Administration of Medication Policy)

A record of each feed should be kept within the designated area and filed at the end of year in the student's file. SNA staff should sign the daily feed chart after each feed.

Arrangements should be made for discreet feeding outside of school when on school trips.

**In the event of damage or emergency:**

Observe the stoma site and immediately report any signs of infection, soreness or leakage to the Principal and parents.

Report any damage to the tube to parents.

If the tube is pulled out or otherwise seriously damaged and unusable for use, SNA staff should refer to each child's individual plan and risk assessment.

**Ratification**

This policy was ratified by the Board of Management on 9<sup>th</sup> October 2019

**Review**

This policy will be reviewed each year in preparation for the students returning to school in September to ensure the care needs of that cohort of students will be met.