

Policy and Procedure for the safe administration of emergency medication for students of the CRC School while in transit to and from school

This policy applies to the administration of prescribed Midazolam Buccal Liquid (MBL) as a rescue medicine in the event of a student having a prolonged seizure of 5 minutes or more on a bus when there is no nurse/clinician present.

- This policy applies only to students who have been prescribed MBL as a rescue medicine by their Neurologist/Paediatrician/General Practitioner and whose parents have given consent for it to be administered in an emergency situation, such as on the school bus. **APPENDIX A**
- Parents must agree to the administration of the prescribed medication. They must also agree to the follow up procedure of their child being brought to hospital. **APPENDIX B**
- No staff member can be required to administer the medicine; they must be willing and happy to do so. Any staff member happy to administer MBL must have undergone specific training in the safe use of the medication. **APPENDIX C**
- Administration of MBL must be recorded and signed by the person administering the drug on the record sheet provided. **APPENDIX D**

Storage of Midazolam Buccal Liquid:

- It is the responsibility of the parent/guardian to ensure that the MBL is in the student's schoolbag every morning.
- The medication should be stored in a clear lunchbox, marked with the student's name, in the student's schoolbag.
- The medication may not be stored on the school bus.
- A copy of this policy and an administration record form will also be stored in the lunchbox.

Procedure for trained staff to administer Midazolam Buccal Liquid:

- When an emergency occurs and the administration of MBL becomes necessary, all staff must be trained in and adhere to these guidelines.
- If a child is having a seizure on the school bus, the bus must pull over and stop.
- Note the time
- If the student is having a seizure in a wheelchair or car seat, allow them to remain seated – this is safer than moving them which could lead to injury.
- If the seizure lasts 5 minutes, administer the MBL as trained.
- As soon as a decision is made to administer the MBL, ask the driver to call an ambulance (112/999)
- Once the MBL has been administered, stay with the student and observe whilst waiting on an ambulance.
- Do NOT give a second dose of medication.
- Once the seizure is over, the student can be moved into the recovery position if necessary. Stay with the student and reassure whilst waiting for the ambulance.
- The student MUST be taken to hospital by ambulance once MBL has been administered.
- An incident form must be completed once the event is over and the event reported as soon as is practical to the school principal.

WHAT TO DO IF SOMEONE HAS A SEIZURE

1. Stay calm.
2. Note the time.
3. Clear a space around the student, remove or move objects if necessary.
4. Place something soft under the student's head.
5. Loosen tight neckware.
6. Remove glasses.
7. Turn the student on his/her side, if possible.
8. Reassure the student and stay with them.
9. Allow the seizure to run its course.
10. Follow MBL guidelines where applicable.

WHAT TO DO IF THE PERSON HAS A SEIZURE WHILE IN A WHEELCHAIR

1. Apply the brake and ensure the chair is secure.
2. Don't restrain the person or attempt to stop the seizure.
3. Note the time.
4. Allow the person to remain seated in the wheelchair during the seizure – this is safer than moving him/her which could lead to injury.
5. Move objects that could cause injury to the person.
6. The seat belt or harness should prevent falling from the wheelchair. If there is no belt you may need to support (not restrain) the person to prevent them from falling out of the wheelchair.
7. Cushion the head area and support it. A rolled up coat/cushion will suffice in the absence of a head rest.
8. At the end of the seizure the person can be moved from the wheelchair and placed in the recovery position if there is concern about his/her breathing.

WHAT TO DO IF THE PERSON HAS A SEIZURE WHILE IN A CAR

1. Stay calm.
2. Pull over, if safe to do so.
3. Note the time.
4. Don't restrain the person or attempt to stop the seizure.
5. Allow the person to remain seated during the seizure – this is safer than moving him/her which could lead to injury.
6. Move objects that could cause injury to the person.
7. The seat belt or harness should prevent falling.
8. Cushion the head area and support it. A rolled up coat/cushion will suffice in the absence of a head rest.
9. At the end of the seizure the person can be moved from the car and placed in the recovery position if there is concern about their breathing.

SEIZURE MANAGEMENT PLAN AND TREATMENT PROTOCOL FOR THE SAFE ADMINISTRATION OF PRESCRIBED BUCCAL MIDAZOLAM AS AN EMERGENCY MEDICATION

APPLICABLE: **ONLY TO PERSONAL ASSISTANT STAFF TRAINED IN THIS TREATMENT PROTOCOL AND PROCEDURE AND WORKING WITH NAME XXXXXX , ADDRESS XXXXXXXX**

THIS PROCEDURE IS VALID FROM XX/XXX/XX TO XX/XX/X

DEFINITION

Medications: Medications are defined as all prescription medications, over the counter medications, vitamins, supplements, and complementary therapies, not restricted to aromatherapy, homeopathy and herbalism.

Epilepsy: A tendency to experience recurrent disruption of normal brain activity which originates in the brain itself rather than any other cause. (1)

Seizure: Seizure is an intermittent stereotyped disturbance of consciousness, behaviour, emotion, motor function and perception or sensation. They take many forms because the brain controls a wide range of function in the body. Intelligence personality, mood, sensation, movement and consciousness may be disrupted during a epileptic seizure. The level of disturbance is dependent on the type of seizure.(1). There are two main types of seizure, Partial and Generalised

A) Partial Seizures: Are defined as three kinds.

Simple partial often called an aura involved a perceptual change while the person is alert.

Complex Partial: Person will experience altered awareness but loss of consciousness may not be apparent, unusual behaviours may present e.g. lip smacking, plucking, these will have an individual pattern

Secondary generalization: Activity begins in one area of the brain and then spread to become a generalized seizure as described below

B) Generalised Seizure: there are 5 well defined types of generalized seizures

Myoclonic: Brief jerking movements that involve the upper body

Absences: Person stares unblinking and cannot be recalled to attention. Often seen in children.

Atonic: Person falls limply to the ground, sometimes called a drop attack

Tonic: Person goes stiff and falls but no jerking movements or convulsions present, previously called petite mal

Tonic Clonic Person goes stiff, falls to the ground, jerking movements follow and then a period of limpness, previously known as grande mal.

A person may experience a single type of seizure or may experience any combination of these. (2)

Serial Seizures: Seizures occurring one after another with or without recovery in between.(2)

Prolonged Seizures: Seizures lasting 5 mins or 2 mins longer than usual. (2)

Status Epilepticus: Any one seizure or repeated seizures lasting for 30 mins from which the person does not fully regain consciousness. (2)

Midazolam Buccal Liquid ('Epistatus'): Is a short acting medication that can be used for the emergency management of seizures when prescribed by a person's neurological consultant. It can be given into the nose or mouth. Thus it is easy to give and the dignity of the person is protected in so far as is possible (3)

Procedure

This procedure document applies to the administration of prescribed Midazolam Buccal Liquid as a rescue medication in the event of XXXXXXXX having serial or prolonged seizures or status epilepticus.

For this procedure to be put in place

- The Coordinator / Service manager will identify the level of support required with Medication
- This assistance will be provided to XXXXX for whom there is a comprehensive individual service agreement which clearly includes this task and the local policy and protocols which guide it.
- Only Registered Nurses, and personal assistants that have undergone specific training in the safe administration of medication can carry out this procedure
- In line with best practice in this area each individual who is prescribed Midazolam Buccal Liquid will have an individual treatment protocol for the administration of Midazolam Buccal Liquid which contains the prescription and provides clear guidelines for administration by trained staff and is completed by the persons Consultant Neurologist/ Pediatrician/ General Practitioner.
- Administration of medications must be recorded by the signature of the person administering on the Administration of Midazolam Buccal Record.
- It is the responsibility of the personal assistants who are involved to ensure that they have the necessary knowledge and practical skills to carry out this task safely and to report any concerns to their manager.
- It is the responsibility of the manager to ensure the personal assistants are fully trained and are familiar with this policy and protocol and the details of the individual service agreement.

PROCEDURE FOR TRAINED STAFF TO ADMINISTER MIDAZOLAM BUCCAL LIQUID :

1. When there is an agreement in place that will allow trained staff to administer **Emergency** PRN medications these staff must consult the written instructions on the Treatment Protocol and adhere to them in the event of an emergency situation arising.
2. The treatment protocol and emergency medication must be carried by the person/ personal assistants in an accessible pocket or bag when the service is not being provided in the home setting, and stored in an agreed accessible location recorded on the Service Agreement, when at home.
3. The treatment protocol must **not be more than one year old**.
4. If there is any discrepancy or doubt the medication must be with held and emergency service called immediately.
5. Once the medication has been given stay with XXXXXXXX and observe.
6. The medication should start to take effect within 5 minutes.
7. Do not repeat the dose if the seizure does not stop unless the treatment protocol clearly directs this.
8. Once the person enters the recovery stage they may be drowsy and or confused about what has happened. They may need reassurance and to be assisted to a place they can rest.
9. A friend or family must be contacted immediately.
10. An incident form should be completed detailing the event and noting any vomiting if it occurred.

PROCEDURE FOR RECORDING THE ADMINISTRATION OF MIDAZOLAM BUCCAL LIQUID

1. When the medication has been given as per the treatment protocol, a clear accurate and immediate record will be made by the administering staff completing the Administration of Midazolam Buccal Liquid Record
2. The Administration of Midazolam Buccal Liquid Record signed in blue/black pen.
3. Completed Administration of Midazolam Buccal Liquid Record should be filed in the persons file.

4. Administration of Midazolam Buccal Liquid Record should be retained for the lifetime of the person plus 10 years
5. White correcting fluid should never be used on Administration of Midazolam Buccal Liquid Record
6. The manager must be informed of each incident where Midazolam Buccal Liquid was administered as soon as possible following the event.
7. Details of each event on the Administration of Midazolam Buccal Liquid Record will be reviewed by the manager to identify possible trends in triggers or changes in seizure patterns and will highlight these to the person or family as appropriate.
8. Where these changes are observed by the person or family will be encouraged to seek advice on management strategies or medication changes for the future.

References

- (1) Explaining Epilepsy, Brainwave The Irish Epilepsy Association, www.epilepsy.ie , Accessed 6/5/2010
- (2) Seizures, Brainwave The Irish Epilepsy Association, www.epilepsy.ie , Accessed 6/5/2010
- (3) Epistatus Information Leaflet, NHE Ayrshire & Arran, Leaflet reference CH05/002/CC, April 2007

This policy was ratified on 01/10/24

By

APPENDIX A

TREATMENT PROTOCOL FOR THE ADMINISTRATION OF MIDAZOLAM BUCCAL LIQUID

Staff can administer Midazolam Buccal Liquid as an emergency medication as directed by the person's Consultant Neurologist/ Paediatrician/General Practitioner on this protocol.

Before Giving Always Check When Midazolam Was Last Administered

Check expiry date – start of shift/replace as appropriate. Store in secure environment at room temperature

<u>Name</u>	<u>Address</u>
<u>Date of Birth</u>	
<u>Emergency Contact Details Name</u>	<u>Telephone Number</u>
<u>Relationship to Service User</u>	<u>Mobile Number</u>

Prescription For Midazolam Buccal Liquid

When Should Midazolam Be Given <i>Specify type of seizure and at what stage/time during seizure it should be administered</i>
What Dose Should Be Given Initially? <i>Specify Name of medication, dose and amount in mls (E.G. 10mgs/1ml)</i>
If the Staff member is unable to insert the syringe into the persons mouth in order to administer the Dose what action should be taken? <i>Specify: e.g. Administer nasally or call an ambulance. *Please note that Buccolam cannot be administered nasally.</i>

CALL AN AMBULANCE

1. If the seizure is different from the normal for this person
2. If the seizure lasts longer than the normal for this person and Buccal Midazolam has been administered
3. If the person has an obvious injury as a result of the seizure or you are concerned
4. If you are concerned about the person's breathing or colour
5. If a tonic clonic seizure follows another without full recovery in between

Do Not Administer More ThanOf Midazolam In 4 Hours Or More ThanOf Midazolam In 24 Hrs

This Treatment Protocol is agreed by:(Name of Prescribing Medical Practitioner)

Signature of Prescribing Medical Practitioner :..... Date :
.....

Method Of Administration

1. Remove the medication from its packaging and remove the child resistant cap by pushing it down and turning it anticlockwise
2. Insert the 1 ml syringe into the hole in the top of the bottle and turn upside down
3. Pull the plunger out slowly until the syringe contains the prescribed dose for the person turn the bottle upright
4. Check that the medication liquid is clear
5. Remove the syringe from the bottle and replace the bottle lid
6. Gently insert the syringe into the persons mouth between their cheek and gums
7. Slowly push the plunger of the syringe down until the syringe is empty
8. If the person is on their side use the cheek nearest the ground. If seated either cheek can be used and if possible tilt the head slightly to the side.
9. Note the time that you have given the medication and record event and administration on attached record.

Emergency Contact

Please Inform; _____ that Midazolam Was Given: Tel.: _____

Seizure Management Plan For _____

<p>Seizure Classification / Description</p> <p><u>Describe what normally happens when.....has a seizure</u></p>	
<p>How often do seizures occur? (daily, day, night etc.)</p>	
<p>Possible Seizure Triggers</p>	
<p>Possible Seizure Warning Signs</p>	
<p>How long does a Seizure normally last</p>	

<p>Describe the Persons Usual Recovery from a Seizure</p>	
<p>Describe the Persons Usual Response When given Midazolam Buccal Liquid</p>	
<p>This Seizure Management Plan was drawn up in conjunction with 's Prescribing Medical Practitioner</p>	<p>Name of Prescribing Medical Practitioner (Block Capitals Please)</p> <p>_____Tel</p> <p>_____</p> <p>Signature of Prescribing Medical Practitioner</p> <p>_____Date</p> <p>_____</p>

DAILY SEIZURE MEDICATION

Medication Name	Dose	Times Due (Write in actual times)					Comments
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APPENDIX B

We, the parents of, a student of the CRC School agree to the administration of Midazolam Buccal Liquid in the case of our child having an epileptic seizure which has lasted more than five minutes. I understand that the medication will only be administered by a person who has received specific training in the safe use of this medication. I understand that following the administration of medication, an ambulance will be called and my child will be taken to hospital for closer observation.

Signed Date

Signed Date

Appendix C

I,, am willing to administer the prescribed dose of Midazolam Buccal Liquid as a rescue medicine in the event of a student having a prolong seizure of 5 or more minutes on a bus or when there is no nurse or clinician present.

I have undergone specific training in the safe use of the above medication.

I understand that following the administration of medication I MUST

– record the administration of the drug on the record sheet provided

- Ring an ambulance***
- Contact parents to inform them of the event***
- Complete an Incident / accident form as soon as is practicable.***

Signed

Date

APPENDIX D

Record of Administration of Midazolam Buccal Liquid

Name _____

Record Commenced On Date _____

Day and Date					
Initial Dose Given? How many mls?					
Signature of Administering Staff Member					
Outcome					
Was the Emergency Contact Listed on the Treatment Protocol Informed?					