

Occupational therapy long-term ventilation (LTV) information pack for

..... (insert name)

This pack gives information to enable children requiring LTV to participate in daily life. The pack is tailored to meet your needs and those of your child. The suggestions contained in this pack are not all the available options, and information printed was correct at the time of going to press. If you have any questions, please contact your occupational therapist.

This information pack has been given to you by your occupational therapist and is for your personal use only. Please do not copy or post this for anyone else. They can ask their therapist for this advice too, if they need it.

Contact us

If you have any questions or concerns about occupational therapy for children requiring LTV, please contact the Occupational Therapy Department at Evelina London Children's Hospital, **t:** 020 7188 9427, Monday to Friday, 8.30am-4.30pm.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** www.evelinalondon.nhs.uk/leaflets

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch. **t:** 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day. **t:** 111

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A list of sources is available on request



Role of occupational therapy in long-term ventilation (LTV)

Occupational therapy can help babies, children and young people learn and play, so that they can develop, and reach their full potential. Occupational therapy enables them to participate in daily life to improve their health and wellbeing. Daily life is made up of many activities (or occupations). Occupations for children or young people may include self-care (such as bathing, eating a meal, or toileting), being productive (such as going to nursery or school) and leisure (for example, playing with siblings/friends or doing hobbies).

Specifically within the LTV team, the hospital occupational therapist will advise and support with:

- making sure medical equipment can be safely and securely transported to enable you and your child to access your community.
- assessing and providing advice on how to manage daily self-care occupations with ventilation equipment.
- assessing your child's development and providing a therapy programme, where needed, to support you to play with your child or engage them in occupations while developing/maintaining important physical or cognitive skills.
- linking you up with your community teams by making referrals as required.
- assessing the home environment to make sure it is suitable in meeting your child's LTV needs. The occupational therapy team assesses the safety of the home environment from an access and equipment point of view. Your occupational therapist will screen your property through interview with you. A home visit may be carried out if we think it is needed clinically. Occupational therapy do not have a role in offering you alternative accommodation.

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Trolleys for children requiring long-term ventilation (LTV)

This leaflet suggests styles of trolleys that can meet the needs of children requiring LTV. If you have any further questions or concerns, please contact your occupational therapist. Please note: this list does not cover all trollies that are available, and is provided as a rough guide only. Estimated prices were current at the time of going to press.

Argos

Home tea trolley



Key features and weight capacity:

2 fixed shelves with 4 raised sides
4 lockable castors
Total load capacity: 80kg

Price estimate: £20

Bristol Maid



Key features and weight capacity:

2 fixed shelves with 3 raised sides
4 lockable castors
Maximum load per shelf: 40kg

Price estimate: £185.85

Ikea

Udden kitchen trolley



Key features and weight capacity:

3 fixed shelves, top shelf with 2 raised sides,
lowest shelf wire only
2 castors
Total load capacity: 34kg

Price estimate: £50

Contact us

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Disclaimer

While we take every care to make sure that our list of buggies is accurate, we cannot guarantee its completeness and correctness. We accept no liability for outcomes resulting from your choice of buggy provider.

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Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.

t: 020 7188 3003, Monday to Friday, 10am-5pm **e:** letstalkmedicines@gstt.nhs.uk

Your comments and concerns

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t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

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NHS website

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Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, please get in touch.

t: 0800 731 0319 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk/membership

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Community access for children requiring long-term ventilation (LTV)

Getting out and about in your community is good for you and your child's wellbeing. This leaflet gives recommendations to meet the needs of children and young people requiring LTV when accessing their community. If you have any further questions or concerns, please do not hesitate to contact your occupational therapist.

Buggy

Your child's buggy will need to carry the weight of your child, and the medical equipment your child needs. Your current one may meet all these needs and should be assessed by your occupational therapist. It is important to consult the manufacturer to confirm the weight capacity of any buggy before considering buying one.

Whatever style of buggy you use, it is essential that your child is always strapped in securely using the harness provided.

If you do not currently own a buggy, or have concerns about your current buggy, your occupational therapist can discuss appropriate buggy options with you.

Wheelchair/Specialist buggy

Older children, and sometimes babies, may require a wheelchair or specialist buggy with more postural support. Your occupational therapist will assess your child and provide recommendations, and can liaise with local wheelchair services as appropriate.

Vehicle travel

Your vehicle will need to carry your child's buggy or wheelchair, medical equipment, car seat and other passengers.

Oxygen

The British Compressed Gases Association has produced a leaflet regarding travelling with medical oxygen in a vehicle. It is recommended that you read this document before making journeys in a car. Guidance can be found on their website, [w: www.bcga.co.uk](http://www.bcga.co.uk) (search for Transport matters).

Car seats

In most cases, a standard car seat will be appropriate, but if your child has specific postural needs, please speak to your occupational therapist. It is generally recommended that your child travels facing backwards for as long as possible. Always consult the manufacturer's guidelines to make sure the car seat is correctly installed and used. The manufacturer will state if their car seat is compatible with your car make and model.

The In-Car Safety Centre can provide advice on travelling safely in cars, **t:** 01908 220909, **e:** info@incarsafetycentre.co.uk **w:** <https://incarsafetycentre.co.uk/>

In some cases, your occupational therapist and nursing team will ask to assess your child on the ward in their car seat. It is recommended that this assessment takes place before home leave and discharge.

Restraining medical equipment in vehicle

If you are involved in an accident you could be injured by unsecured items being thrown around inside your vehicle. Make sure medical equipment is located within easy reach of the caregiver, and is securely stowed or fixed down on the floor. Medical equipment includes, but is not limited to, ventilator, oxygen, portable suction etc. Make sure the ventilator screen can be easily seen by the caregiver to read. In-Car Safety can provide advice on securing medical equipment and have tethering options available that can be used for securing medical equipment.

Blue Badge parking scheme

If your child needs to be close to a vehicle to transport medical equipment and you live in the UK, you can apply for a Blue Badge. For further information go to, **w:** <https://www.gov.uk/apply-blue-badge>

You can apply for a Blue Badge online by visiting the above website or directly via some councils. The Blue Badge scheme clearly states: 'A parent or guardian must apply on behalf of a child.'

If you need to carry around medical equipment because of your child's condition, you should list it. The list of medical equipment referred to within the scheme includes 'ventilators, suction machines, feed pumps or oxygen administration equipment'. Further supporting information can be found at, **w:** www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/help-for-disabled-travellers1/blue-badge-scheme/applying-for-a-blue-badge/

Contact us

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Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.

t: 020 7188 3003, Monday to Friday, 10am-5pm **e:** letstalkmedicines@gstt.nhs.uk

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Buggies for children requiring long-term ventilation (LTV)

This leaflet gives information about buggies that meet the equipment needs of children requiring LTV. Your occupational therapist has selected a choice of buggies which will meet your child's needs indicated by ☒ tick box. If you have any questions or concerns, please contact your occupational therapist. Please note: this list is not all the options that are available, and is provided as a rough guide only. Estimated prices were correct at the time of going to press.

IMPORTANT: In the event of an unsuitable buggy being purchased, you may not be able to reclaim a refund and this may delay discharge. Please discuss your buggy preferences with your occupational therapist before you buy to make sure it is suitable.

- ☐ Ventilatorkg (x1 x2) ☐ Portable oxygenkg ☐ Portable suctionkg
- ☐ Tracheostomy boxkg ☐ Consumableskg ☐ Feedkg
- ☐ Other essentials

Total medical equipment weight kg

☐ Bugaboo Donkey 2 (mono)



Key features and weight capacity

Carrycot or seat

Seat: World- or parent-facing

Weight capacity under-seat basket: 10kg

Other: Side luggage basket: 10kg

Price estimate: £1,179

☐ Mountain Duet V3 (as single)



Key features and weight capacity

Carrycot or seat

Seat: World- or parent-facing (note: must be specified when ordering as parent-facing seat is an extra £169)

Weight capacity under-seat basket: 10kg

Other: Joey bag (accessory) 18kg

Price estimate: £499 (+/- £169)

☐ **Uppababy Vista (double)**



Key features and weight capacity

Seat: Parent-facing only with carrycot

Carrycot: 9kg (can carry medical equipment)

Weight capacity under-seat basket: 5kg

Price estimate: £1,069

☐ **Joolz Geo2**



Key features and weight capacity

Carrycot or Seat

Seat: World- or parent-facing

Weight capacity under-seat basket: 10kg

Other: Two 5kg side-packs can be attached (£31.50 each)

Price estimate: £849

☐ **Phil & Ted's Voyager**



Key features and weight capacity

Carrycot or Seat

Seat: World- or parent-facing

Weight capacity under-seat basket: 10kg

Price estimate: £599

☐ **iCandy (Orange, Peach, Lime)**



Key features and weight capacity

Carrycot or Seat

Seat: World- or parent-facing

Weight capacity under-seat basket: 10kg in all models

Other: iCandy lime: lightweight frame, total weight of buggy frame: 10kg

Price estimate: £589 - £999

☐ **Baby Jogger City Select**



Key features and weight capacity

Carrycot or Seat

Seat: World- or parent-facing

Weight capacity under-seat basket: 7kg

Other: Seat back mesh pocket: 1kg

Price estimate: £589

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t: 020 7188 3003, Monday to Friday, 10am-5pm **e:** letstalkmedicines@gstt.nhs.uk

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch. **t:** 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

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Adapted buggy board for ventilator

The Mini Lascal BuggyBoard can be adapted by a charity called MERU to carry one ventilator. This leaflet outlines the actions required if you wish to obtain an adapted buggy board. If you have any questions or concerns, please contact your occupational therapist.

IMPORTANT: Please note, in the event of the adapted buggy board being purchased where it is unsuitable to meet your child's ventilation needs, or if it is not compatible with your buggy, you may not be able to claim a refund and this may delay discharge from hospital. Please discuss your buggy preferences with your occupational therapist before you buy to make sure it is suitable.

Actions required to adapt Mini Lascal BuggyBoard:

1. Your buggy must be compatible with the Mini Lascal BuggyBoard. It is your responsibility to make sure your buggy is compatible.
To check compatibility, visit [w: www.buggyboard.info](http://www.buggyboard.info).
2. If your buggy is compatible, you can then buy the Mini Lascal BuggyBoard.
3. Your occupational therapist will need to complete a referral form to MERU, outlining the make of the ventilator your child has.
4. Wait for the referral to be completed and accepted.
5. You then need to post/deliver your Mini Lascal BuggyBoard to MERU for them to adapt.

If you send it by post, clearly label your Mini Lascal BuggyBoard with your name and contact details.

Based on a conversation with MERU in April 2019, it takes roughly two weeks from receipt of BuggyBoard for MERU to adapt the buggy board.

Prices available on request from MERU directly.

Useful sources of information

MERU

[w: www.meru.org.uk](http://www.meru.org.uk), [e: info@meru.org.uk](mailto:info@meru.org.uk), [t: 01372725203](tel:01372725203),
Unit 2, Eclipse Estate, 30 West Hill, Epsom, Surrey, KT19 8JD

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Get involved and have your say: become a member of the Trust

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t: 0800 731 0319 **e:** members@gstt.nhs.uk

w: www.guysandstthomas.nhs.uk/membership

Was this leaflet useful?

We want to make sure the information you receive is helpful to you. If you have any comments about this leaflet, we would be happy to hear from you, fill in our simple online form, **w:** www.guysandstthomas.nhs.uk/leaflets, or **e:** patientinformationteam@gstt.nhs.uk

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A list of sources is available on request

Use of extension leads in long-term ventilation (LTV)

Children with LTV needs will require medical equipment when discharged home. This equipment will require multiple plug sockets. Your occupational therapist will indicate by ticking the boxes ☒ which equipment applies to your child.

- ☐ Ventilator (x1 x2)
- ☐ Humidifier
- ☐ Saturations monitor
- ☐ Suction machine
- ☐ Feeding pump
- ☐ Lamp (for caregiver)
- ☐ Profiling cot
- ☐ Oxygen concentrator

If there are insufficient plug sockets, installation of additional plug sockets by a qualified electrician is recommended. This is the best solution and can often be done quickly, with landlords often approving this minor adaptation. It is recommended that all medical equipment is plugged into the main electricity supply.

In instances where it is not possible to fit additional plug sockets, an extension lead may be considered.

Please note, profiling cot and oxygen concentrator should be plugged into main electricity supply only.

The recommendations for an extension lead are as follows. It must:

- have a British or European safety mark.
- be 13A fuse (allows for large current to pass through). Some appliances use more power than others, so be careful not to overload your extension lead. It is the responsibility of the parent/guardian to make sure the extension lead is not overloaded by plugging in equipment that together exceeds the maximum current rating stated for the extension lead. One item should be plugged in per socket.
- be an 'inline' extension lead, not the plug-in cube type.
- be unwrapped – leaving extension leads coiled can cause them to over-heat.
- have surge protection.
- have switches for each socket.

Other considerations when using an extension lead are to be careful that they do not form a trip hazard and that wiring is not damaged by chafing. A risk assessment should be carried out by parents/care agency (if involved). Electrical extension leads should never be plugged into each other to extend them, as this is a serious fire risk. A simple rule is to have one extension lead per double socket, although if required and appropriately risk assessed by parents/guardians, it is possible to plug two extension leads into a double wall socket. Do not connect an extension lead to a damaged or faulty wall socket.

Please refer to the London Fire Brigade website for advice on electrics, in particular the section on cables, fuses and leads, [w: www.london-fire.gov.uk/safety/the-home/electrical-items/cables-fuses-and-leads/](http://www.london-fire.gov.uk/safety/the-home/electrical-items/cables-fuses-and-leads/)

This leaflet was developed after thorough consultation with Lane Fox Technical Services at St Thomas' Hospital, the Respiratory multi-disciplinary team and with the London Fire Brigade.

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Long-term ventilation (LTV) property guide

Information for parents/guardians of (insert child's name)

This leaflet explains features that a home will need in order to meet the needs of your child who requires ventilation, particularly if they are dependent on ventilation. Please note: this document does not contain all the options that are available, and is provided as a rough guide only. If you have any further questions or concerns, please contact your occupational therapist.

Remember that the occupational therapy or the Continuing Care nursing teams may want to assess a home to make sure it is safe for your child and meets their needs. When considering a new home, we advise that parents/guardians do not pay a deposit or complete any paperwork before it is assessed, as it may not be possible to reclaim money if the new home is considered unsuitable by health professionals.

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Property types?

Properties that may be suitable for your child are indicated by ☒ tick box:

- ☐ House with a room on the ground floor that can be turned into a bedroom
- ☐ Flat with x2 lifts access to floor flat is located
- ☐ Flat with x1 lift access to floor flat is located
- ☐ House/flat with internal stairs
- ☐ Ground floor flat
- ☐ Bungalow
- ☐ Other

General accessibility

Parking (if you drive)

Good availability of parking within easy reach of the property is desirable, but is **not considered essential**.

Access to and from property

Gates and doors, both internally and externally, should be a minimum of 77.5cm (30.5") wide. Your child may use a buggy/wheelchair and medical equipment will need to be carried, so door widths need to allow for this.

Steps or step-free?

It is not essential that the property has no steps. Please take photographs and seek advice from your occupational therapist. Adaptations, such as ramps, can be arranged if appropriate.

Internal staircase (if applicable)

If your child needs to be carried upstairs with medical equipment attached:

- the stairs should not be too steep
- the steps on the stairs must be evenly spaced
- there should be at least one handrail up the entire length (handrails can be added easily)
- the stairs should be wide enough to carry your child and their medical equipment.

Please note spiral staircases are **not suitable**.

Room where child/young person will sleep

- ☐ If assessed to require a care package, your child should have their own room, and not share with any other family members. This is to meet care needs of your child at night.
- ☐ There should be space for a single bed with space either side for standing. Space for a trolley to hold medical equipment, as well as a chair and a lamp for the caregiver will be needed on one side.
- There should ideally be enough room for the bed or cot to be away from a radiator or window.
- There should be 3-4 double plug sockets in the room, although if there are not enough these can be easily added. Take photographs and consult with your occupational therapist. Approved extension leads may be considered as an option if appropriate.
- The ceiling light should be bright enough to light up the entire room.
- There should be no mould or damp in the room. If there is, ask for the issue to be dealt with.
- Consider all of the rooms in the property and which room is best for your child's needs. For example, if getting to a bedroom upstairs is difficult, a room on the ground floor could be turned into a bedroom.

Storage requirements

- Cupboard for ventilator supplies - this must be dry and away from radiators.
- Storage for any other equipment your child needs.

Safety issues

- If there is evidence of mould or damp in the property, including condensation on the inside of windows, it is recommended that this should be resolved before you move into the property. This is particularly relevant for the room where your child will spend most of their time.
- When living in a property, it is recommended that the parents/guardians take responsibility to maintain repairs to avoid mould or damp in the property. Condensation on windows can be maintained through daily cleaning, ventilation of room and appropriate use of heating.
- Home oxygen (if applicable): The landlord or freeholder must be informed that your child will be using home oxygen and they should inform their insurer. A home oxygen assessment will be carried out. Please liaise with your respiratory clinical nurse specialist.

- There must be a reliable electrical supply. A pay-as-you-go meter is not recommended as it could cut out. This can be changed by contacting your electricity supplier.
- Smoke alarms must be installed in the property and can be easily added. Carbon monoxide alarms are recommended if there is gas at the property.

Minor adaptations

- If minor adaptations are needed, the landlord or freeholder should be informed before starting this work or signing a lease agreement/paying deposit.
- Common adaptations include:
 - installation (by a qualified electrician) of additional double plug sockets in the room where your child/young person will sleep
 - additional handrails for staircases
 - ramp access at the front door.
- In most cases, there will be no objection to minor adaptations, as many can be removed when you move out.
- The cost of any adaptations will need to be discussed with the landlord/freeholder and an agreement reached. Parents/guardians will need to be prepared to cover these costs to avoid a delay to hospital discharge.

These recommendations have been explained to me:

.....
(parent/guardian – print name)

.....
(occupational therapist - print name)

.....
(parent/guardian – signature)

.....
(occupational therapist - signature)

Contact us

If you have any questions or concerns about housing for children requiring LTV, please contact the Occupational Therapy Department at Evelina London Children's Hospital,
t: 020 7188 9427, Monday to Friday, 8.30am-4.30pm.

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Screening tool for parents/guardians of a child/young person (YP) requiring long-term ventilation (LTV)

Take this form, a measuring tape and camera to properties you visit. Tick the boxes ☒ for items you have seen in the property. Take photographs of the property, in particular when you see the camera icon .

Name of child/YP			Address	
Date of birth				
Completed by			Date of visit	
Present on visit				
Property: Access				
Property type	<input type="checkbox"/> house <input type="checkbox"/> bungalow <input type="checkbox"/> floor flat <input type="checkbox"/> x1 lift access to floor <input type="checkbox"/> x 2 lift access to floor			
Access from outside	<input type="checkbox"/> level <input type="checkbox"/> steps (number) height of stepscm			
Doors and gates	<input type="checkbox"/> width appropriate for buggy/wheelchair <input type="checkbox"/> widthcm			
Internal stairs (if applicable)	<input type="checkbox"/> steps (number) Rail: one side / two sides (please circle)			
Physical environment – room where child/YP will sleep				
Access (from entrance)	<input type="checkbox"/> level <input type="checkbox"/> steps (number)			
Flooring	<input type="checkbox"/> carpet <input type="checkbox"/> wood <input type="checkbox"/> laminate/lino/tiles <input type="checkbox"/> bare/concrete <input type="checkbox"/> rugs			
Lighting	<input type="checkbox"/> ceiling lighting <input type="checkbox"/> space for lamp (for caregiver)			
Space for equipment	<input type="checkbox"/> cot <input type="checkbox"/> wall plug sockets (number) <input type="checkbox"/> storage for consumables <input type="checkbox"/> trolley <input type="checkbox"/> seating (for caregiver) <input type="checkbox"/> space for all equipment and cares			
Physical environment – toilet and bathroom				
Toilet	Number of toilets Location of toilets			
Facilities	<input type="checkbox"/> bath <input type="checkbox"/> shower cubicle <input type="checkbox"/> space for parent to bath child/YP, and trolley			
Physical environment – kitchen				
Facilities	Open space living/kitchen area <input type="checkbox"/> yes <input type="checkbox"/> no Cooker <input type="checkbox"/> gas <input type="checkbox"/> electric			

Physical environment – general safety		
Electricity payment	<input type="checkbox"/> billed <input type="checkbox"/> pay as you go <input type="checkbox"/> direct debit	
Smoke alarms	<input type="checkbox"/> – number and location	
Carbon monoxide alarm	<input type="checkbox"/> – number and location	
Heating	<input type="checkbox"/> central heating <input type="checkbox"/> storage heaters <input type="checkbox"/> gas fires <input type="checkbox"/> electric heaters <input type="checkbox"/> log fire	
Condition of property (Comment on mould, damp, state of repair...) 		

Please bring this completed form to your occupational therapist to discuss suitability of property in meeting your child's/YP's LTV needs.

Remember that the occupational therapy or Continuing Care nursing teams may want to assess a home to make sure it is safe and meets the needs of your child/YP. When considering a new home, it is advised that parents/guardians do not pay a deposit or complete any paperwork before it is assessed, as it may not be possible to reclaim money if the new home is considered unsuitable by health professionals.

Contact us

If you have any questions or concerns about housing for a child/YP needing LTV, please contact the Occupational Therapy Department at Evelina London Children's Hospital,
t: 020 7188 9427, Monday to Friday, 8.30am-4.30pm.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** www.evelinalondon.nhs.uk/leaflets

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111 **w:** www.111.nhs.uk

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A list of sources is available on request

Children's long-term ventilation (LTV) service - Home assessment form

This is a guidance document designed to support community professionals when doing property assessments for a child/young person (YP) requiring LTV.

Check boxes for items you have observed in the environment. To check boxes ☒, double click the appropriate box and choose 'checked'.

Any issues that arise should be noted numerically in the right hand column, then details can added to '**Recommendations**' at the end of this form (see example sheet).



Child/YP demographics			
Name of child/YP		Address	
Date of birth			
NHS number		Date of assessment	
Present on assessment (name, relationship/role, contact details)			
Aims of home assessment			
<input type="checkbox"/> To assess home environment for suitability as a discharge destination. <input type="checkbox"/> To assess equipment already in situ in home environment. <input type="checkbox"/> To assess home environment for suitability of potential equipment required for discharge. <input type="checkbox"/> Other (specify)			
Housing history			
Property type	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> floor flat <input type="checkbox"/> floor maisonette <input type="checkbox"/> Other (specify)		
Tenure *for example, housing association	<input type="checkbox"/> Owner occupied <input type="checkbox"/> Private rented <input type="checkbox"/> Local authority <input type="checkbox"/> Other (specify) *		
Housing officer details (name, contact number and email)			

Who else lives at this address? (name, relationship)		
Are there any pets at this address?	<input type="checkbox"/> Dogs <input type="checkbox"/> Cats <input type="checkbox"/> Other (specify)	
Physical environment – from the street to the property's front door/entrance		
Parking – on streetm to property <input type="checkbox"/> Permit <input type="checkbox"/> Allocated <input type="checkbox"/> Good availability of spaces	
Parking – off streetm to property <input type="checkbox"/> Permit <input type="checkbox"/> Allocated <input type="checkbox"/> Good availability of spaces	
Front access	<input type="checkbox"/> Level <input type="checkbox"/> Steps (number) Height of stepscm Minimum widthcm	
Rear access	<input type="checkbox"/> Level <input type="checkbox"/> Steps (number) Height of stepscm Minimum widthcm	
Layout	Number of bedrooms in property, occupants and location of bedrooms	
Access (from entrance)	Room where child/YP will sleep <input type="checkbox"/> Level access (from street) <input type="checkbox"/> Other (specify) floor <input type="checkbox"/> Steps (number) Height of stepscm Minimum widthcm Bathroom <input type="checkbox"/> Level access (from street) <input type="checkbox"/> Other (specify) floor <input type="checkbox"/> Steps (number) Height of stepscm Minimum widthcm Kitchen <input type="checkbox"/> Level access (from street) <input type="checkbox"/> Other (specify) floor <input type="checkbox"/> Steps (number) Height of stepscm Minimum widthcm	
Heating	<input type="checkbox"/> Central heating <input type="checkbox"/> Storage heaters <input type="checkbox"/> Gas fires <input type="checkbox"/> Electric heaters <input type="checkbox"/> Log fire	
Physical environment – room where child/YP will sleep		
Flooring	<input type="checkbox"/> Carpet <input type="checkbox"/> Wood <input type="checkbox"/> Laminate/lino/tiles <input type="checkbox"/> Bare/concrete <input type="checkbox"/> Rugs	

Lighting	<input type="checkbox"/> Ceiling lighting <input type="checkbox"/> Lamp (for caregiver)	
Equipment/Facilities (suitability and amount of equipment (including electrical) to be discussed with community nursing team)	<input type="checkbox"/> Cot <input type="checkbox"/> Hoist <input type="checkbox"/> Trolley <input type="checkbox"/> Seating (for caregiver) <input type="checkbox"/> Storage for consumables <input type="checkbox"/> Wall plug sockets (number) <input type="checkbox"/> Space for all equipment and cares	
Physical environment – bathroom		
Flooring	<input type="checkbox"/> Carpet <input type="checkbox"/> Wood <input type="checkbox"/> Laminate/lino/tiles <input type="checkbox"/> Bare/concrete <input type="checkbox"/> Rugs/mats	
Equipment/Facilities	<input type="checkbox"/> Bath <input type="checkbox"/> Shower cubicle <input type="checkbox"/> Over-bath shower <input type="checkbox"/> Mobile bath <input type="checkbox"/> Bath seat	
Physical environment – kitchen		
Open plan living space/kitchen	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Flooring	<input type="checkbox"/> Carpet <input type="checkbox"/> Wood <input type="checkbox"/> Laminate/lino/tiles <input type="checkbox"/> Bare/concrete <input type="checkbox"/> Rugs/mats	
Cooker	<input type="checkbox"/> Gas <input type="checkbox"/> Electric	
Physical environment – toilet (nearest to room where child/YP will sleep)		
Access (from child's bedroom for caregiver):	<input type="checkbox"/> Level <input type="checkbox"/> Steps (number)	
Flooring	<input type="checkbox"/> Carpet <input type="checkbox"/> Wood <input type="checkbox"/> Laminate/lino/tiles <input type="checkbox"/> Bare/concrete <input type="checkbox"/> Rugs/mats	
Physical environment – toilet (nearest to where child/YP will spend most time during the day)		
Access (from child's play/living room for caregiver)	<input type="checkbox"/> Level <input type="checkbox"/> Steps (number)	
Flooring	<input type="checkbox"/> Carpet <input type="checkbox"/> Wood <input type="checkbox"/> Laminate/lino/tiles <input type="checkbox"/> Bare/concrete <input type="checkbox"/> Rugs/mats	
Physical environment – general safety		
Electricity payment	<input type="checkbox"/> Billed <input type="checkbox"/> Prepayment key/card <input type="checkbox"/> Direct debit	
Smoke alarms	<input type="checkbox"/> Number and location	
Carbon monoxide alarms (should be fitted if gas in property)	<input type="checkbox"/> Number and location	
Safety advice	<input type="checkbox"/> Building's insurance (and mortgage, as required) <input type="checkbox"/> Fire brigade	
Utility suppliers	<input type="checkbox"/> Electricity, gas, water <input type="checkbox"/> Other (specify)	

Condition of property (Comment on mould, damp, state of repair, etc)

Parent/Guardian/Child/YP views

Recommendations

Issue arising from home assessment	Action points (including date)	Responsibility
1	a) b)	a) b)
2	a) b)	a) b)
3	a) b)	a) b)
4	a) b)	a) b)
5	a) b)	a) b)
6	a) b)	a) b)
7	a) b)	a) b)
8	a) b)	a) b)

Summary

Suitability for discharge	<input type="checkbox"/> Suitable with minor adaptation <input type="checkbox"/> Suitable with major adaptation <input type="checkbox"/> Unsuitable
Requirements	<input type="checkbox"/> Adaptation prior to discharge <input type="checkbox"/> Planning permission <input type="checkbox"/> Grant <input type="checkbox"/> Other (specify)

Home assessment form completed by		
Name	Job/Role	
Email	Telephone	
Signature		
Consent for copies of form to be sent to		
Team	Name	Address
<input type="checkbox"/> Parents/caregiver		
<input type="checkbox"/> Hospital occupational therapist		
<input type="checkbox"/> Hospital multi-disciplinary team		
<input type="checkbox"/> Community paediatrician		
<input type="checkbox"/> GP		
<input type="checkbox"/> Children's community nurse		
<input type="checkbox"/> Council housing department		
<input type="checkbox"/> Child development service		
<input type="checkbox"/> Other		
<input type="checkbox"/> Other		

Adapted with kind permission from the
Royal Brompton & Harefield NHS Foundation Trust.

Guidance for completing the Home assessment form

(not to be circulated with completed report)

Housing history		
Property type	<ul style="list-style-type: none"> • What floor the child/YP will be living on in a house? • What floor their flat is on? • What level they will live on if in a maisonette? 	
Tenure	Any adaptations that need to be made in preparation for discharge or looking to the future will need the consent of the owners, leaseholders and/or managers of the property. Gain information on the name of the local authority or housing association, reference number, length of lease, any other contacts the parents/caregivers have to smooth the process going forwards.	
Who else lives at this address?	Other residents might also have needs which impact on the flexibility of the home environment to the needs of a child with ventilation.	
Are there any pets at this address?	Pets may affect the community professionals that are able to work in the home environment, for example, allergies.	
Physical environment – from the street to the property's front door/entrance		
Parking – on/off street	<ul style="list-style-type: none"> • How will the child/YP manage a transfer from a car to the property? • Is there a private drive? • Could there be an allocation of a specific and/or disabled parking space? 	
Front/rear access	<ul style="list-style-type: none"> • Which would be the most appropriate access for the child/YP into the home environment? • Is it necessary for discharge? 	
Layout (room where child/YP will sleep, bathroom, kitchen)	<ul style="list-style-type: none"> • Where are these rooms in the property? • Could adaptations to routines be made for discharge, for example, fill a mobile bath from the kitchen, so that there is no need to navigate an additional floor? 	
Heating	<ul style="list-style-type: none"> • Poor heating increases the risk of damp. • Use of electrical sockets. 	
Physical environment – room where child/YP will sleep		
Access (from entrance)	How does the child/YP access their room?	
Flooring	<ul style="list-style-type: none"> • Ease of movement of equipment (cot, chair, hoist). • Laminate flooring is easy to clean but carpet can be good for children when they start to play independently on the floor and are learning to crawl. 	
Lighting	<ul style="list-style-type: none"> • Good lighting is essential for cares. • Caregiver requires a lamp at night in order to not disturb child/YP yet manage cares. 	
Equipment/Facilities	Cot	<ul style="list-style-type: none"> • Does it need collapsible sides on 1 side or both sides? • Does it need to be accessed on 1 side or both sides? • Does it need to be profiling (adjustable angle)? • Does it need to be compatible with a pressure mattress? • Does it need to be quickly height adjustable? • Whose needs are being addressed and therefore who provides the cot?

	Trolley	<ul style="list-style-type: none"> • On wheels with brakes or free-standing?
	Hoist	<ul style="list-style-type: none"> • Is a hoist required for discharge? • What is already in the home environment? • When did the hoist have its last service? • Are the caregivers trained to use a hoist?
	Seating	<ul style="list-style-type: none"> • Is there a high-back chair for a caregiver to sit in?
	Wall plug sockets	<ul style="list-style-type: none"> • Are there enough wall sockets for the medical equipment required?
	Storage	<ul style="list-style-type: none"> • Is there enough storage in the room for the consumables?
	Space	<ul style="list-style-type: none"> • Are the side or head of the cot against a wall? • Is there enough room for all other needs (manual handling, storage)?

Physical environment – bathroom

Access (from entrance) and flooring	Even if it is agreed that the child/YP will not need to access this room, collecting this information will be useful to plan for the long-term environment.	
Equipment/Facilities	Bath	<ul style="list-style-type: none"> • What is it made of? • What is its condition? • Is there a suitable hoisting system as necessary? • Is the child/YP suitable to be bathed?
	Shower cubicle	<ul style="list-style-type: none"> • Is there suitable access for a caregiver to shower the child/YP?
	Over-bath shower	<ul style="list-style-type: none"> • What equipment is in situ in order for the child/YP to be able to use this facility?
	Bath seat	<ul style="list-style-type: none"> • Does the child/YP have seating needs that are a consideration when bathing? • Where is a seat going to be positioned?
	Mobile bath	<ul style="list-style-type: none"> • Where is it stored? • How is it filled and emptied?

Physical environment – kitchen

Access (from entrance)	<ul style="list-style-type: none"> • What is access like for caregivers? • Where is the location in relation to the room the child/YP will usually be in?
Safety issues	<ul style="list-style-type: none"> • Is the main living area 3m from open flame (if child/YP on oxygen). Consider open plan living arrangements.
Flooring	<ul style="list-style-type: none"> • Rugs may be a trip hazard. <p>Again, it might be useful to collect information to plan for the long-term environment.</p>

Physical environment – toilet (nearest to room where child/YP will sleep)

Access (from child's bedroom for caregiver)	Describe the toilet that is nearest to where the child/YP will sleep. <ul style="list-style-type: none"> • What is access like for caregivers?
Flooring	<ul style="list-style-type: none"> • Are there any trip hazards (rugs, wires, etc.) for caregivers?

Physical environment – toilet (nearest to where child/YP will spend most of time during the day)	
Access (from child's bedroom for caregiver)	Describe the toilet that is nearest to where the child/YP will be cared for during the day as this may be different from where they sleep.
Flooring	<ul style="list-style-type: none"> Are there any trip hazards (rugs, wires, etc.) for caregivers?
Physical environment – general safety	
Electricity	Billed or direct debit payment are essential (prepayment is not acceptable).
Fire brigade	Local service is available to provide an environmental assessment, plan emergency evacuation route and prioritise the household in the event of a local emergency.
Insurance and mortgage companies	Insurance (and sometimes mortgage) companies need to be notified of ventilator equipment and oxygen in use in the property.
Utility suppliers	Notify electricity, gas and water suppliers that a technology dependent child is resident in the property in case of a supply issue.
Fire alarms	Note location to inform Fire Brigade and nursing oxygen assessment

Recommendations - example				
Issue arising from home assessment	Action points (including date)	Responsibility		
1, 3 and 4. Rugs on floor in child's room where they will sleep and the bathroom present a falls hazard to caregivers.	a) Discussed at home assessment and they will be removed from these rooms by one week.	a) Parents.		
2. Cot in situ has 1 drop-down side and is manually height adjustable.	a) Liaison with care agency regarding the health and safety needs of their caregivers who will be caring at the cot-side by one week. b) Liaison with community equipment store regarding availability of profiling cot by one week.	a) Community nurse. b) community nursing		

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A list of sources is available on request

Cots for children requiring long-term ventilation (LTV)

This leaflet suggests styles of cots that meet the needs of children requiring LTV. If you have any further questions or concerns, please speak to your occupational therapist. Please note: this list is not all of the cots available, and is provided as a rough guide only. Estimated prices were current at the time of going to press.

Please note: if your baby needs more frequent cares due to extra medical needs, for example, tracheostomy tapes, or managing a stoma, please consider buying a changing table – which is a suitable height to prevent prolonged or repetitive bending down over the cot. If it is considered by the occupational therapy, or medical teams, that a hospital cot is needed due to complex medical needs and/or the weight of the child, an appropriate referral can be made.

John Lewis & Partners

Eric cot



Two mattress base positions
1 drop side rail
Price estimate: £79

John Lewis & Partners

Anna cot



Three mattress base positions
1 drop side rail
Price estimate: £150

East Coast

Anna cot



Three mattress base positions
1 drop side rail
Price estimate: £165

East Coast

Katie (beech)



Three mattress base positions
1 drop side rail
Price estimate: £159

Contact us

If you have any questions or concerns about suitable cots for children requiring LTV, please contact the occupational therapy department at Evelina London Children's Hospital,
t: 020 7188 9427, Monday to Friday, 8.30am-4.30pm.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** www.evelinalondon.nhs.uk/leaflets

Disclaimer

While we take every care to make sure that our list of cots is accurate, we cannot guarantee its completeness and correctness. We accept no liability for outcomes resulting from your choice of cot provider.

Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.

t: 020 7188 3003, Monday to Friday, 10am-5pm **e:** letstalkmedicines@gstt.nhs.uk

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748, Monday to Friday, 9am-5pm

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

This service offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111 **w:** www.111.nhs.uk

NHS website

This website gives information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing.

w: www.nhs.uk

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