



EPILEPSY POLICY/PROTOCOL

The School recognises that epilepsy is a condition which affects pupils at school. The School welcomes all pupils with epilepsy and through the policy pupils will be able to achieve their full potential in all aspects of school life. All first aiders will be given training on epilepsy management.

- First aiders should have a clear understanding of what to do in the event of a seizure.
- The School works in partnership with the School Nurses and parents to provide a continuation of care for those pupils who suffer from the condition.
- Staff are informed each year of the pupils at the School who have epilepsy. A copy of Health Care Plans (where provided) are available for staff to inspect in the Medical Centre.
- Advice and further information on individual pupils is available from the Medical Centre.

Epilepsy

Epilepsy is a tendency to brief disruption in the normal electrochemical activity of the brain, which can affect people of all ages, backgrounds and levels of intelligence. It is not a disease or an illness, but may be a symptom of some physical disorder. However, its cause, especially in the young, may have no precise medical explanation.

Tonic Clonic Seizure (Grand Mal)

The pupil may make a strange cry and fall suddenly. Muscles first stiffen and then relax and jerking and convulsive movements begin which can be quite vigorous. Saliva may appear around the mouth and the pupil may be incontinent. Ensure the safety of the pupil and gently move them away from any dangers. Speak calmly to the pupil and stay with them until the seizure has passed.

Complex and Partial Seizures (Temporal Lobe Seizures)

These occur when only a portion of the brain is affected by excessive electrical discharge. There may be involuntary movements such as twitching, plucking at clothing or lip smacking. The pupil may appear conscious but be unable to speak or respond during this form of seizure. Ensure the safety of the pupil and gently move them away from any dangers. Speak calmly to the pupil and stay with them until the seizure has passed.

Absence (Petit Mal)

This can easily pass unnoticed. The pupil may appear to daydream or stare blankly. There are very few signs that a pupil is in seizure. These types of episodes, if frequent, can lead to serious learning difficulties as the pupil will not be receiving any visual or aural messages during those few seconds. Therefore it is important to be understanding, note any probable episodes, check with the pupil that they have understood what has happened and inform parents.

Teachers can play an important role in recognising a seizure, recording changes in behavioural patterns and frequency.

Procedure for an Epileptic Seizure

- Total seizure, Tonic Clonic(Grand Mal)
- **Keep Calm** – pupils will tend to follow your example! Let the seizure follow its own course; it cannot be stopped or altered.

Serious symptoms

- Cold, clammy skin
- Blue-grey tinge around lips
- Weakness/dizziness
- Rapid shallow breathing

Progress further

- Restlessness
- Aggressiveness
- Gasping for air
- Unconsciousness

Treatment

- Ask the other pupils to leave the room where possible and ask a responsible pupil to fetch a School Nurse/ First Aider for assistance
- Note the time of the seizure
- Protect the pupil from harm. Never move the pupil whilst convulsing unless they are in immediate danger. If possible move objects that may cause injury away from the immediate area
- When convulsions have ceased place the pupil on his side - this does not have to be the recovery position but just so that the tongue can fall forward and excessive saliva can drain out of the mouth
- Support the pupil's head and stay with the pupil until completely recovered
- Talk quietly to the pupil and reassure but do not try to restrain any convulsive movements
- Do not put anything into the mouth or offer drinks until fully recovered.
- Remove to the Medical Centre when safe to do so
- A School Nurse/First Aider should then make a full assessment of the seizure and note any injuries that may have been sustained
- Allow the pupil to rest and sleep following the seizure as this may be the first in a cluster of seizures. Ensure they remain on their side
- Inform the parents and, if a day pupil, arrange for collection
- If the fit lasts any longer than 5 minutes, call an ambulance **immediately**

It is very important the pupil is assessed at the hospital. A pupil experiencing a first seizure or cluster seizures **must** also be sent to hospital

- If the ambulance is summoned, then report the seizure in as much detail as you can, especially how long it has lasted
- In the case of a day pupil a member of staff should accompany the pupil to hospital and stay with them until the parent(s) arrive In the case of a boarding pupil a member of the Boarding House staff should accompany the pupil to hospital