



MANAGEMENT OF EPILEPSY GUIDELINES

Epilepsy is a tendency to have seizures (or fits) caused by a sudden burst of intense electrical activity in the brain. There are many different types of epilepsy.

The school takes its responsibilities to students with epilepsy very seriously and all students with epilepsy are encouraged to take a full part in all activities of the school.

The School will work closely with the pupils and parents and individual care plans will be kept for each pupil with epilepsy. All pupils will be expected to provide spare prescribed medications to be kept in the Medical Room if necessary.

Staff will receive regular updates on how to manage pupils with epilepsy.

Aims

- To enable all students with epilepsy to participate fully in all school activities.
- To ensure that all staff have a clear understanding of how to deal with a student having an epileptic seizure.
- Students, parents, school staff and epilepsy professionals to work together for a greater understanding of the effect of epilepsy and to adopt a responsible attitude to its treatment.

When joining City of London School for Girls parents/guardians are asked to declare any medical condition their daughter may have. **Epilepsy is a condition that the school needs to be made aware of.**

Types of Epilepsy

Generalised seizures:

- Absence seizures that stop the person doing what they are doing and they may stare, blink or look vague for a few seconds. Can be mistaken for daydreaming.
- Myoclonic seizures that involve sudden contractions of muscles. Can be a single movement or a series of jerks. Usually affect just the arms but can include the whole body.
- Tonic-clonic seizures are the most widely recognised epileptic seizure. The person loses consciousness, falls to the ground and the body will stiffen followed by jerking movements. Sometimes the person will lose bladder control. The jerking movements stop after a few

minutes the person wakes and is sometimes confused. They often need to sleep for up to a few hours after a seizure.

- Atonic seizures – all muscle control is lost and the person falls to the ground. Another name for this is a 'drop attack'.

Partial seizures:

- Simple partial seizures affect just one part of the brain and the symptoms vary according to the area of brain affected. For example the person may suddenly sweat profusely or they may experience a strange smell or tingling sensation. There is no loss of consciousness. Sometimes a partial seizure can be a warning that the seizure may spread to other parts of the brain.
- Complex partial seizures are where a person is fully aware of what they are doing but cannot help it. They will not follow instructions and may be unable to respond.
- For example they may start chewing, smacking their lips, pluck their clothing or wander aimlessly.

Epilepsy in School

Most pupils with epilepsy are just as capable as learning as other pupils. However some can struggle academically. Depending on how well the pupil's epilepsy is controlled other factors that can affect learning include the frequency of seizures which may contribute to generalised fatigue especially if there is sleep disruption, and social and psychological factors. Medication is usually taken at home but some pupils require emergency medicine in school especially if their epilepsy is severe.

Epilepsy in the PE Lesson

A young person with epilepsy is less likely to have a seizure if they are active. Occasionally the opposite can be true for some pupils and exercise can increase the likelihood of a seizure. This should be addressed in the individual's care plan. Some pupils are advised against participating in certain sports or activities but this is decided between the pupil and their doctor. With the relevant safety precautions and qualified supervision in place an epileptic pupil can take part in most if not all sports and activities.

Residential Trips and School Visits

Pupils with epilepsy should not be excluded from school trips. All trips should be discussed with the pupil, their family and the pupil's doctor or health care professional.

An updated list of pupils with important medical needs is on the shared area under staff/departments/ SEN and Medical.

EPILEPSY PROTOCOL

Management for tonic-clonic seizures:

- **DO NOT LEAVE THE PUPIL**
- Contact the school Nurse via Reception (0)
- Look for an emergency identity card or jewellery giving instructions on what to do in an emergency
- Protect the pupil from injury
- Cushion their head
- Once the seizure has ended place the pupil in the recovery position
- Contact the parents/carers
- **Do not** restrain the pupil during the seizure
- **Do not** put anything in their mouth
- **Do not** give them anything to eat or drink until fully recovered
- **Do not** attempt to wake them or bring them round after the seizure

Call 999

- If it is their first seizure
- The seizure continues for more than 5 minutes
- One tonic-clonic seizure follows another without the pupil regaining consciousness
- The pupil is injured
- You believe the pupil needs medical attention

Management of other seizures

- **DO NOT LEAVE THE PUPIL**
- Guide the pupil away from danger
- Look for an emergency identity card or jewellery giving instructions on what to do in an emergency.
- Keep calm and provide reassurance
- **Do not** shout or alarm the pupil in an attempt to get their attention.
- **Do not** assume the pupil can understand what is happening to them.
- Explain anything they may have missed once the seizure has finished.
- Inform their parents/carers.

Status epilepticus:

A person with epilepsy can experience a longer seizure or a series of seizures without gaining consciousness. If this continues for more than 30 minutes it is called status epilepticus and is a medical emergency. There is a risk of brain damage. Some pupils are prescribed emergency medication to deal with this but it can only be administered by a properly trained member of staff. The local health authority can provide training if a pupil is required to have this medication in school.

Updated June 2016