



Northgate Primary School

Epilepsy Policy

This policy has been written with information provided by Epilepsy Action, the Department for Education and Skills, the local authority, the school health service, the governing body, students and parents.

Northgate Primary School recognises that epilepsy is a common condition affecting children and welcomes all children with epilepsy to the school.

Northgate Primary School supports children with epilepsy in all aspects of school life and encourages them to achieve their full potential. This will be done by having a policy in place that is developed in conjunction with the local authority and understood by all school staff. This policy ensures all relevant staff receives training about epilepsy and administering emergency medicines. *(All new staff and (supply staff) will also receive appropriate training.)*

When a child with epilepsy joins Northgate Primary School, or a current pupil is diagnosed with the condition, a member of the School Management Team arranges a meeting with the pupil and the parents to establish how the pupil's epilepsy may affect their school life. This will include the implications for learning, playing and social development, and out of school activities. They will also discuss any special arrangements the pupil may require. With the pupil's and parent's permission, epilepsy will be addressed as a whole-school issue through assemblies and in the teaching of PSHE or citizenship lessons. Children in the same class as the pupil will be introduced to epilepsy in a way that they will understand. This will ensure the child's classmates are not frightened if the child has a seizure in class.

The school nurse or an epilepsy specialist nurse may also attend the meeting to talk through any concerns the family or head teacher may have, such as whether the pupil requires emergency medicine. The following points in particular will be addressed.

Record Keeping

During the meeting the school representative will agree and complete a record of the pupil's epilepsy and learning and health needs. This form will be kept safe and updated when necessary. Staff will be notified of any changes in the pupil's condition through regular staff briefings.

This will make staff aware of any special requirements, such as seating the pupil facing the class teacher to help monitor if the student is having absence seizures and missing part of the lesson.

A care plan will be drawn up by the school health, agreed and signed by parents, school nurse and Headteacher as recommended by Norfolk County Council.

A record of seizure sheet should be completed each time a child has a seizure and kept in the child's file in the office.

Each child with a care plan for Epilepsy will have a risk assessment in the classroom which will be amended as the condition or circumstance change. The risk assessment will be agreed by all adults who work with the child and a copy will be provided for parents. (Appendix 3)

Medicines

An individual healthcare plan (IHP) will be drawn up containing the information highlighted above and identify any medicines or first aid issues which staff need to be aware.

In particular it will state whether the pupil requires emergency medicine, and whether this medicine is rectal diazepam or buccal midazolam. (it will contain the names of staff trained to administer the medicine and how to contact these members of staff). Medicine is stored in the medical room, is clearly named, in the original pharmacy packaging. Administered medicine is recorded in the file. Parents must inform staff if buccal midazolam has been given in the previous 24 hours.

First Aid

First aid for pupil's seizure type will be included on their care plan and all staff (including support staff) will receive basic training on administering first aid. The following procedure giving basic first aid for tonic-clonic seizures will be prominently displayed in all classrooms.

1. Stay Calm
2. If the child is convulsing then put something soft under their head.
3. Protect the child from injury (remove harmful object from nearby)
4. NEVER try and put anything in their mouth or between their teeth.
5. Try and time how long the seizure lasts – if it lasts longer than usual for that pupil or continues for more than five minutes then call medical assistance.

Parents will be informed by telephone of seizure. Sometimes a child may become incontinent during their seizure.

First aid procedure for different seizure types can be obtained from the school nurse, the pupil's epilepsy specialist nurse or Epilepsy Action.

Learning and behaviour

Northgate Primary School recognises that children with epilepsy can have special educational needs because of their condition (see paragraphs 7.64 -7.67 of the Special Educational Needs Code of Practice). Following the initial meeting, staff will be asked to ensure the pupil is not falling behind in lessons. If this starts to happen the teacher will initially discuss the situation with the parents. If there is no improvement, the discussions should be held with the school's special educational needs co-ordinator (SENCO) and school nurse. If necessary, an Individual Educational Plan will be created and if the SENCO thinks it appropriate, the child may undergo an assessment by an educational or neurophysiologist to decide what further action may be necessary.

School Environment

Northgate Primary School recognises the importance of having a school environment that supports the needs of children with epilepsy. A medical room is kept available and equipped with a bed in case a pupil needs supervised rest following a seizure. Parents will be contacted.

The above epilepsy policy applies equally within the school and at any outdoor activities organised by the school. This includes activities taking place on the school premises. Any concerns held by the pupil, parent or member of staff will be addressed at a meeting prior to the activity or outing.

Northgate Primary School Epilepsy Policy

Agreed by Governors: June 2019

J Bailey

Reviewed: Annually

Chair of Governors

Appendix: 1

Recognising the individual needs of the pupil with epilepsy

Northgate Primary School will encourage and assist pupils with epilepsy to participate fully in the curriculum and all aspects of school life.

Northgate Primary School recognises and understands epilepsy as a varied condition affecting about one in 210 school children.

Northgate Primary School has a clear understanding of what to do and what not to do in the event of an epileptic seizure.

Northgate Primary School will ensure that all staff and pupils understand epilepsy to help alleviate the stigma and fear which are associated with the condition.

Northgate Primary School encourages disclosure of having epilepsy as a recognised medical condition within the schools admission procedure.

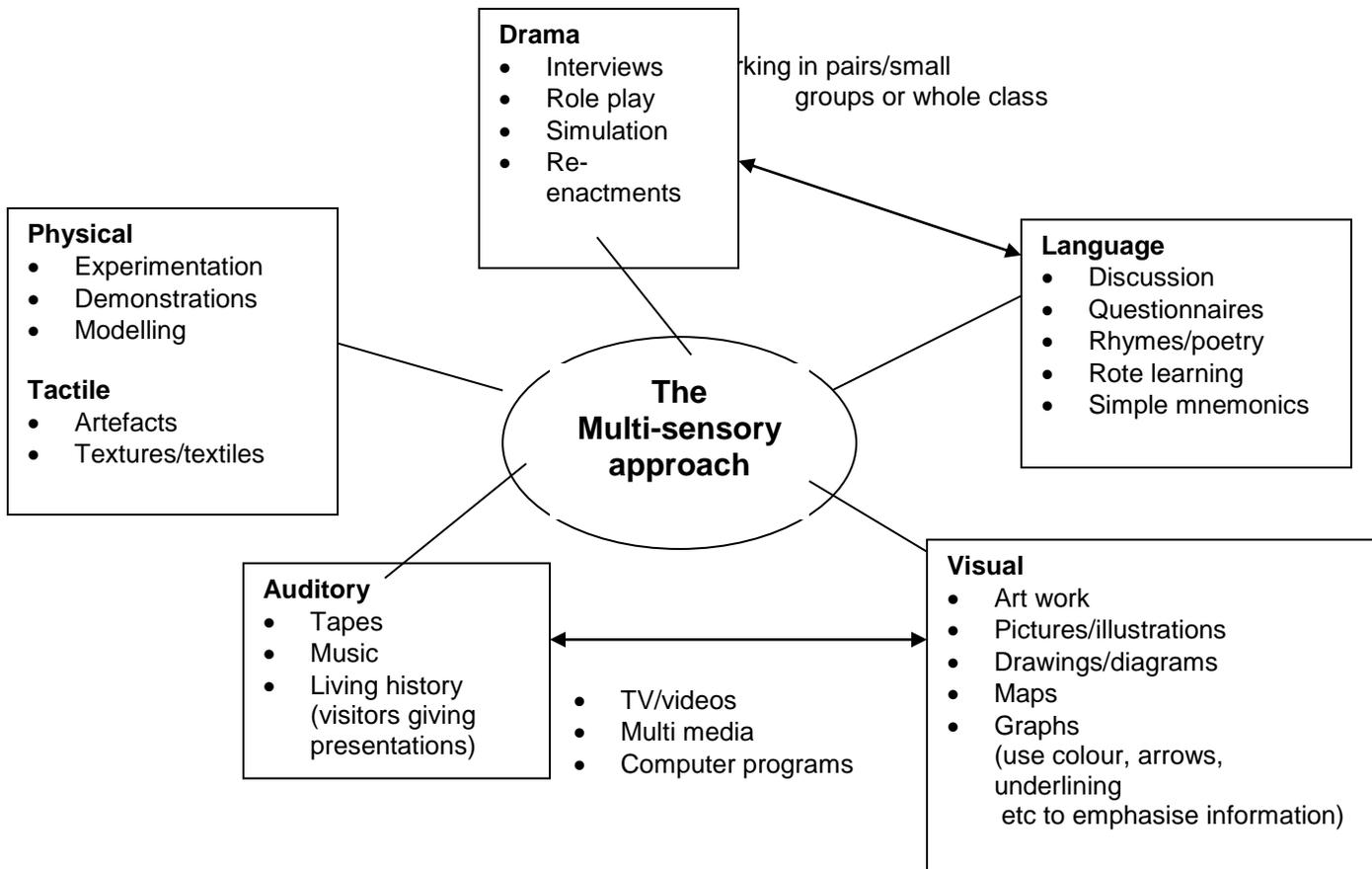
All school personnel need to be aware of the needs of individual pupils with epilepsy. This will include:

- The type and frequency of seizures
- Any known triggers
- Routine first aid procedures when seizures occur
- Medication and possible side effects
- What to do in an emergency, for example how to give emergency medicine
- Any additional resources required to support the pupil with epilepsy

Appendix 2

Teaching Techniques

The multi sensory approach illustrated below is an effective and proven teaching style to use with pupils who have problems with learning and/or memory. Try to ensure that as many of these strategies as possible are included in each learning module.



Also:

- Plan systematic revision of work covered
- Pre-teach new vocabulary (use word webs to link concepts)
- Give opportunities for new work/skills to be used in different situations (to encourage transference of knowledge)
- Always use age appropriate written or spoken language and adjust to different ability level of a pupil if necessary
- Provide multiple choice answers to questions for reduce reliance on memory
- The visual and auditory elements in each module could be sent home with pupils overnight or for the weekend to reinforce the subject or fill in missed areas

Record of seizures occurring during the school day.

Name _____ Address: _____ _____ _____	Date of Birth: _____ Telephone: _____ Emergency Contact Numbers: _____ _____
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Date of seizure:..... Time it occurred:

How long did seizure last?

Action Taken (if any)

Were there any warning signs (for example mood changes, restlessness, sensation, taste, sound)?

What was she/he doing when she/he had the seizure?

Did she/he fall? If so describe

Did she/he lose consciousness?

What colour was his/her face?

Did his/her body move during the seizure?

If so please describe

Was there incontinence?
(if yes please tick)

Bladder

Bowel

What was she/he like after the seizure?

Immediately recovered

Sleepy

Confused

Agitated

Other

Was she/he injured during the seizure? If so how?.....

Was first aid required?

Name:

Post held in school

Date

Northgate Primary School

RISK ASSESSMENT

Child:

Status: Care plan in place for Epilepsy

Provision already in place: Teaching Assistant attached to mainstream class. 1 - 1 Support Assistant allocated 25 hours + 5 hours

Potential Hazard	To Whom	Existing Controls	Additional Action Required	Further Action Required After Review
Epileptic seizure in the classroom	and other children and adults in the room.	Medication available in classroom. Telephone in the corridor. Staff trained by Epilepsy nurse	Ensure that all staff working with have had the required training.	
Epileptic seizure during P.E. sessions	, other children and adults in the room.	Alternative activities are available for times when Joshua is unable to take part.	Availability of staff and space for sufficient supervision on occasions when is not accessing PE.	
Epileptic seizure when accessing playtimes/lunchtimes or moving around school	and other people in the vicinity.	1-1 assistant available to be nearby when is outside and moving around building.	Consider the safety implications of handling, telephone parents if in ANY doubt.	
Participation in educational visits away from the school site.		C.T. to consider additional risk assessments for visits.	1-1 assistant carries medication and emergency numbers at all times.	

In the event of having a seizure procedures as detailed in the care plan will be followed and in the case of a seizure lasting for more than 5 minutes with no sign of recovery emergency services will be called in line with parental wishes.

Further information is available from www.epilepsy.org.uk

Signed.....(School).....(Parents)