



**Help for non-English speakers**, if you need help to understand the information in this policy, please contact the school office.

## PURPOSE:

The purpose of this policy is to ensure that schools support students diagnosed with epilepsy and students having a non-epileptic seizure event appropriately.

### ***What is Epilepsy and Epileptic Seizures?***

Epilepsy is characterised by recurrent seizures due to abnormal electrical activity in the brain.

Epileptic seizures are caused by a sudden burst of excess electrical activity in the brain resulting in a temporary disruption in the normal messages passing between brain cells. Seizures can involve loss of consciousness, a range of unusual movements, odd feelings and sensations or changed behaviour. Most seizures are spontaneous and brief. However, multiple seizures known as seizure clusters can occur over a 24-hour period.

### **First aid**

*For all seizure events:*

- remain calm
- ensure other students in the vicinity of the seizure event are being supported
- prevent students from injuring themselves or others by placing something soft under their head and removing any sharp or unstable objects from the area
- note the time the seizure started and time the event until it ends
- talk to the student to make sure they regain full consciousness
- stay with and reassure the student until they have fully recovered
- provide appropriate post-seizure support or adjustments as per Plan

For a **tonic-clonic seizure** (convulsive seizure with loss of consciousness) which presents as muscle stiffening and falling, followed by jerking movements:

- protect the head, for example, place a pillow or cushion under the head
- remove any hard objects that could cause injury
- do not attempt to restrain the student or stop the jerking
- do not put anything in the student's mouth
- as soon as possible roll the student onto their side — you may need to wait until the seizure movements have ceased

For a seizure with impaired awareness (non-convulsive seizure with outward signs of confusion, unresponsiveness or inappropriate behaviour) avoid restraining the student. You may need to guide the student safely around objects to minimise risk of injury.

## ***When providing seizure first aid support to a student in a wheelchair:***

- protect the student from falling from the chair, secure seat belt where available and able
- make sure the wheelchair is secure
- support the student's head if there is no moulded head rest
- do not try to remove the student from the wheelchair
- carefully tilt the student's head into a position that keeps the airway clear

## ***Schools should call an ambulance immediately if:***

- it is the student's first seizure
- you do not know the student
- there is no epilepsy management plan
- a serious injury has occurred
- the seizure occurs in water
- you have reason to believe the student may be pregnant

## **Requirements as per Department of Education:**

For each student diagnosed with epilepsy, schools must have in place:

- **Student Health Support Plan** — outlining the school's role in supporting the student's health needs (including epilepsy)
- **Medication Authority Form** — for a student who requires regular (non-emergency) medication(s) to be administered at school and ensure a log is kept of any medicine administered
- **Epilepsy Management Plan** — signed by the treating doctor and provided to the school by the student's parents/carers
- **Emergency Medication Management Plan** (if required) — signed by a doctor and provided by the student's parents/carers

## **Training of staff**

All relevant school staff who work directly with a student with epilepsy are required to receive the following training:

- Epilepsy: An Introduction to Understanding and Managing Epilepsy (one-hour eLearning module) (or suitable equivalent training delivered by a recognised epilepsy provider), and as required;
- Epilepsy: Administration of Emergency Medication Parts 1 (theory) & Part 2 (practical) (or suitable equivalent training delivered by a recognised epilepsy provider)

Training must be refreshed every 2 years, or sooner when there is a change in the:

- dose of medication, and/or
- route of administration, and/or
- seizure type/description

If you have any other questions, please contact school or refer to

<https://www2.education.vic.gov.au/pal/epilepsy-and-seizures/policy>

## COMMUNICATION

This policy will be communicated to our school community in the following ways:

- Available publicly on our school's website (or via Compass)
- Included in staff induction processes and staff training
- Included in staff handbook/manual
- Included in transition and enrolment packs
- Discussed at parent information nights/sessions
- Hard copy available from school administration upon request

## POLICY REVIEW AND APPROVAL

Policy last reviewed	26/07/2023
Approved by	Principal
Next scheduled review date	26/07/2024

