



RPT Epilepsy Policy

Approved	March 2026
Review date	March 2028

With Reference to Keeping Children Safe in Education – September 2025

Our mission

Our mission is for every child and young person to be successful in their future lives. For this to happen we must champion the unique potential of every pupil. We know that an excellent education underpinned with opportunities to love, learn and laugh is transformative, and we are committed to this motto.

We take into account pupils' varied life experiences and needs, providing equal opportunities for all pupils, whatever their age, disability, race, religion or belief, gender / gender identity or socio-economic background, to ensure that every child really does matter.

Epilepsy

Epilepsy is a common neurological condition that affects about 1 person in every 200. A child with epilepsy has recurrent seizures which originate in the brain (sometimes called fits or convulsions). These can happen at anytime, anywhere. An epileptic seizure occurs when the nerve cells in the brain seize, resulting in a brief, temporary disruption to the usual activity of the brain. Most seizures are over in a few minutes or less and the child recovers quickly. Most children with epilepsy take anti-epileptic medicines to stop or reduce seizures. Reasons for epilepsy can include brain damage, particular syndromes i.e. Dravetts, chemical or hormonal imbalance or tumours.

Rationale

At RPT we recognise that epilepsy is a common condition affecting many children and we welcome all students with epilepsy. We believe that every child with epilepsy has the right to participate fully in the curriculum and life of their school including all outdoor and offsite activities. To maintain safety and management of their day to day medical needs and work to their individual care plans, some of our children may require routine or emergency medication. We aim to maintain the dignity of all children with epilepsy at all times during these processes and to ensure comfort and understanding. We follow the recommendations set out in the Disability Discrimination Act (1995).

Aims

To meet the medical and educational needs of children with epilepsy through:

- maintenance of a safe environment;
- individual care plans for each child with epilepsy containing specific details for individuals;
- appropriate staff training information, instruction and supervision;
- risk assessment of all outings/trips off school site, outdoor and adventurous activities;
- safe administration of emergency medication, on and off school site;
- consistent record keeping, monitoring and reviewing procedures.

Expectations

To maintain and ensure safety of all children with epilepsy and to reduce the risk of injury all staff are expected to ensure:

- they have read the Epilepsy Policy;
- they are familiar with the care plan for each child in their care;
- that key staff members receive the appropriate training to meet the needs of children with epilepsy that they are working with. This may include safe storage and administration of Buccal Midazolam;

- they read and share risk assessments before accompanying children offsite or on outdoor and adventurous activities.

The Medical and Welfare Coordinators and Headteachers/ provision leaders will ensure:

- policies, risk assessments (PEEP) and care plans are reviewed and updated regularly;
- all staff have access to relevant documentation and are aware of expectations;
- training is provided for all staff and detailed training provided for the key members of staff who will be working with each child with epilepsy;

Medication

A large majority of pupils with epilepsy will receive regular anti-epileptic medication at home; However, any medication to be administered during the day should be brought into school. This will be kept securely in the classroom and will travel with the child as needed around the school in a tagged green bag. Medication will be administered by trained staff at the appropriate times during the school day. The medication will be clearly marked with the child's name, dosage and times to be given.

Seizures, procedures and protocols vary widely according to the individual child. It is important that all staff within the class are aware of the child's condition and of protocols and procedures should the child experience a seizure.

Some children will require emergency medication to control their seizures and will require administration of Buccal Midazolam in school. The medication will be kept as above unless specifically agreed.

On all school sites trained staff will administer medication if necessary. Off school site, the trained members of class staff would take responsibility for this.

Training

Epilepsy Awareness training is provided annually for all class based staff. Training of all staff in epilepsy protocols, basic life support and CPR training is provided annually.

Key staff working with children will undergo specific training relating to the needs of the child who has epilepsy in their class in order to maintain that child's safety and to ensure responsibility for that child when off school site. The training will

- be organised by the school and be provided by the school nurse.
- In addition, where class staff are expected to administer emergency medication to a child with epilepsy offsite, training will be given in safe administration of medication.

This training will:

- be provided by school nurses
- be updated and agreed on a regular basis;
- meet the specific medical needs of the individual child as agreed in partnership with the parents and health care professional concerned;
- cover procedures to be followed in emergency situations;
- be recorded on the staff training records.

Emergency Procedures

All pupils with epilepsy must have an emergency epilepsy care plan. Care plans give the following essential information:

- pupil's name, date of birth;
- medical condition;
- current medication to be taken in school;
- parents contact numbers;

The Epilepsy Care Plan should accompany the child at all times when off school site, when on outings, and be given to the emergency services if called (office staff will be aware of this information).

The Epilepsy Care Plan must be reviewed by the school nursing team at least annually and more regularly if required.

School Trips/Visits

Extra care and additional safety measures may be needed in some areas when on school visits, swimming, day trips etc. The following points should be considered in conjunction with the school's educational visits policy prior to an outing:

- a member of staff trained in the treatment of epilepsy and administration of routine and emergency medication must be identified and accompany the group if a child with epilepsy is travelling;
- the staff must be aware of the medication the pupil will need to take on the trip;
- staff supervising the trip must be aware of the child's condition and of any relevant procedures and protocol. They will be responsible for the safe storage and return of medication;
- significant seizures will be timed, described and all details will be noted for the emergency services, medical officer and parents.

Emergency Services

An ambulance will be called by the staff at school as agreed in the care plan.

An appropriate member of staff will accompany the child to hospital and remain with them until their parents arrive.

An ambulance should be called during a seizure if:

- it is the child's first seizure;
- the child has injured themselves badly;
- they have breathing problems during a seizure;
- a seizure lasts longer than the period set out in the child's epilepsy care plan;
- there are repeated seizures, unless this is usual for the child as set out in the child's individual health care plan;
- if medication has been given but the seizure hasn't stopped or the child was not able to take the full dose of medication.
- If the child is unconscious during/ after the seizure
- If it's the first time Buccol Midazolam has ever been administered to that child

Where there is disagreement between advice provided by The London Ambulance Service and an individual's Epilepsy Care Plan we have been advised by the Service Manager for Complex Care Barnet and Special School Nursing Barnet and Brent to follow care plans as these have been checked and agreed by parents.

What to do if a child has a seizure

(Also refer to the child's health care plan)

- time and record type of seizure.
- staff should try to remain calm at all times
- during a seizure it is important to make sure the child is in a safe position/recovery position unless agreed otherwise and stated on their Health Care plan;
- maintain the child's airway, observe for breathing difficulties;
- stay with the child, reassuring them at all times until fully recovered;
- clear other children from the area if possible;
- summon immediate assistance from the medical officer/Head teacher/SLT in accordance to that child's specific medical needs;
- administer medication as required;
- phone 999 if necessary
- Contact the child's family to inform them of the seizure and make necessary plans.

DO NOT

- leave the child alone;
- place anything in the child's mouth;
- restrict convulsive movements;
- move the child unnecessarily;
- give food or drink until the child is fully recovered.

This policy will be reviewed in September 2028.