

Epilepsy Smart Schools

A practical guide for primary,
secondary and special
schools in Australia

EDUCATE ME
INCLUDE ME



This document summarises the resources available to support you and your school as you work towards becoming an Epilepsy Smart School.

Epilepsy awareness

- Parents/guardians who have a student who is transitioning into primary school/secondary school/special school or between schools, utilise the Transition Checklist. **1**
- A strategy to support the student is developed in consultation between the school and parent/guardian.*
- Clear communication pathways are documented between home and school, relating to seizure frequency and any learning, health or social concerns.
- School staff with a duty of care responsibility complete epilepsy training that includes consideration of common co-existing issues related to learning, behaviour, safety, mental health awareness, and social implications. **10 4 5**
- Students with epilepsy are supported (when consent has been gained and it is appropriate) to educate peers about their epilepsy. **9**
- School staff have current First Aid and CPR training.
- A dedicated school staff member must keep the student with epilepsy under visual observation during water activities at all times.

Inclusion

- All students, not just those with epilepsy face risks in the classroom, in the yard and on camps/excursions.
- For students with epilepsy, risk should be balanced between what's important to and for the student. **6**
- Consultation with the parent/guardian and where appropriate, the student, should occur regarding risk management for day-to-day activities, excursions and camps.*
- All risk assessments need to be based on each student's unique circumstance.*
- Schools are required to make reasonable adjustments in order to enable the student with epilepsy to attend activities. Schools owe a duty of care to all students with epilepsy when attending excursions, camps and other school activities.*
- Schools should not require parents/guardians to attend school to administer medication, provide medical support or in-class/excursion support.
- Parents/guardians understand their rights in relation to inclusive schools. **2**
- Students with epilepsy involved in workplace placements are supported to understand the implications of disclosure. **8**

Learning environment

- Some students with epilepsy may need additional:– individualised support* around learning, especially around memory, attention, thinking skills or behaviour **5**
 - special consideration during exams and tests* (most commonly additional reading time, additional breaks)
 - social support*.
- Parents/guardians are consulted if learning or social issues arise. Either the parent/guardian or school staff can initiate a learning conversation. **7**
- When indicated, Individual Learning Plans and student support options are initiated **5**. Parents/guardians are actively engaged in these meetings.

Epilepsy Management Plan (EMP)

- The Epilepsy Foundation, *Epilepsy: Know me, support me* – EMP template is used. **3**
- The plan is current and updated yearly, having been endorsed by the doctor.
- All relevant school staff have ready access to the student's EMP.

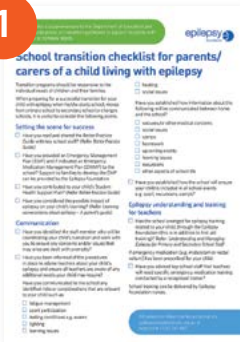
Emergency Medication Management Plan (EMMP)

- Some students with epilepsy are prescribed emergency medication (most commonly midazolam) to stop a seizure or a cluster of seizures (multiple seizures within a short time).
- The EMMP (Midazolam or rectal diazepam) template is used. **3**
- The EMMP is completed and endorsed by the doctor prescribing the medication and updated annually.
- The EMMP is attached to the EMP and is readily available to all trained staff.
- The administration of emergency medication is not a substitute for emergency treatment.
- Only staff who have received appropriate student specific training in accordance with the EMMP can administer the emergency medication.

* Inclusive school parameters are set out in the Disability Standards for Education which was developed by the Australian government under the Disability Discrimination Act - *Disability Standards for Education 2005 (Cth)*, formulated under the Disability Discrimination Act 1992 (Cth), s. 31(1).

Family resources

1



Transition checklist

A practical resource that provides a checklist for parent/guardian to complete prior to their child moving into primary, secondary or special school.

2



Inclusive schools: your rights and responsibilities eBook

A parent/guardian resource that provides guidance to common inclusion questions with accompanying practical strategies and approaches to managing risk.

3

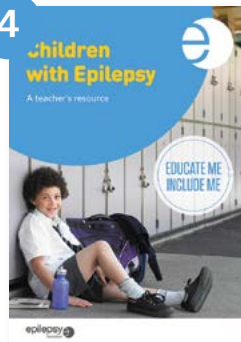


Epilepsy Management Plan (EMP) and Emergency Medication Management Plans (EMMP)

Electronic templates are available online to help identify the person's seizure types, support needs and emergency procedures.

School resources

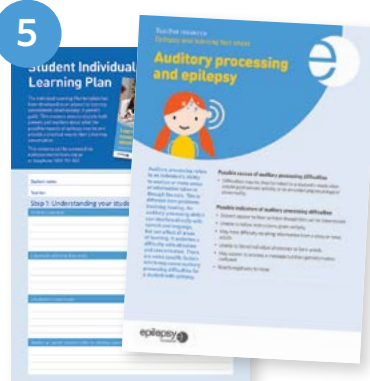
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Children with epilepsy: a teacher's resource

A brief summary document to support teachers in the classroom.

5



Individual Learning Plan (ILP) template and accompanying factsheets

An electronic ILP, complete with a sample plan complemented by factsheets on: self esteem; auditory processing; behaviours; numeracy; visual processing; memory.

6

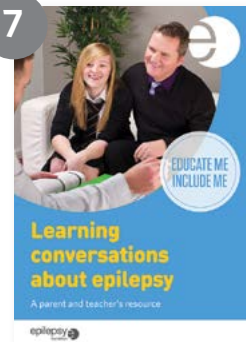


Risk - a balanced approach

A three step approach for schools to consider risk.

Family/school resource

7

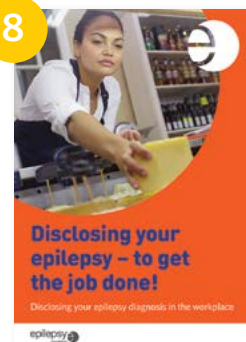


Learning conversations about epilepsy: a parent and teacher's resource

A practical resource that assists parents/guardians and staff to work together to better understand what the possible learning implications may be for a student with epilepsy.

Student resources

8



Disclosing your epilepsy - to get the job done!

For any student with epilepsy about to embark on a work placement, this practical resource will guide them through the considerations and implications involved in disclosing their epilepsy within a 'need-why-how' framework.

9



Presentations and peer leader resources

Presentations, postcards, fun activity sheets, peer leader guides, recommended reading list and lesson plans.

10

National Epilepsy Information Line 1300 852 853

Why have a guide about epilepsy in schools?

Epilepsy is one of the most misunderstood conditions in our community. The impact of epilepsy on a student and their family is often far greater than the seizure itself. This guide provides an easy-to-read reference for both parents/guardians and schools to better understand what good education practice for those with epilepsy looks like in primary, secondary and special schools, what the potential impacts are and what resources are available to assist them in enhancing the learning and social outcomes of the student with epilepsy.

What is an Epilepsy Smart School?

An Epilepsy Smart School (ESS) is a school which embeds inclusive, safe and educationally sound practices for primary, secondary and special school students living with epilepsy. Every person with epilepsy has different needs and requires a different supportive approach. Our evidence based training ensures you will have the required skills to support each student in need.

There are three steps to be completed to be recognised as an Epilepsy Smart School:

- ✓ Where school staff are aware of a student with an epilepsy diagnosis, a current Epilepsy Management Plan (EMP) is held. Additionally for those students living with epilepsy who have been prescribed emergency medication, a current Emergency Medication Management Plan (EMMP) is held.
- ✓ School staff understand the possible impact of epilepsy on students, ideally through participating in training. Where a student has an EMMP, all school staff with a duty of care responsibility for that student have received student specific epilepsy training.
- ✓ School staff educate students about epilepsy using resources from the Epilepsy Smart Schools website either through embedding education within curriculum or supporting an awareness raising campaign, such as a purple day event.

Glossary

Emergency medication: Medication that has been prescribed for the treatment of prolonged seizures or a cluster of seizures (multiple seizures over a defined time). The most common type of emergency medication prescribed is buccal (inside the cheek) or nasal midazolam. Rectal diazepam (valium) is less commonly prescribed now.

Epilepsy: Epilepsy is characterised by recurrent unprovoked seizures due to abnormal electrical activity in the brain. There are broadly two types of seizures: focal seizures and generalised seizures. During a seizure, a person can be fully aware, have impaired awareness or have no awareness (such as in a tonic clonic or convulsive seizure).

Individual Learning Plan (ILP): An ILP is developed by a school to address the specific educational needs of the student. The plan is based on an assessment of a student's learning and social needs and sets out how the school will support the identified goals. Parents/guardians should be consulted in the development of these plans.

Midazolam: Is used for emergency management of seizures as it has the ability to stop the seizures quickly. Not all people with epilepsy require emergency medication. It is most commonly administered buccally (inside the cheek) or nasally.

Rectal diazepam: Rectal diazepam (valium) is used for emergency management of seizures because it has the ability to stop the seizures. It is not commonly used now.

Student support strategy: Should be based on a cooperative partnership between parent/guardian, school representatives and professionals and developed to support a student with additional learning needs to achieve positive learning outcomes. An ILP is often derived from this group.

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The images in this publication show models who do not necessarily have an epilepsy diagnosis and are for illustrative purposes only.

The information contained in this publication provides general information about epilepsy. It does not provide specific advice. Specific health and medical advice should always be obtained from a qualified health professional.

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