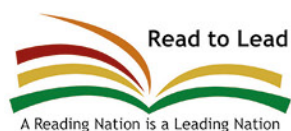




# **GUIDELINES FOR SCHOOLS WITH LEARNERS WITH EPILEPSY**



**basic education**  
Department:  
Basic Education  
REPUBLIC OF SOUTH AFRICA



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## TABLE OF CONTENTS

1. Introduction.....	2
2. Key considerations .....	3
3. Measures to reduce the risk of contracting or transmitting COVID-19 .....	4
4. Wearing of face shields / masks .....	4
5. Personal hygiene .....	5
6. Hostel and dining rooms .....	6
7. Learners not returning to school .....	6

### 1. Introduction

The accommodation of learners with epilepsy in schools and hostels during the COVID-19 pandemic requires the consideration of the complex and unique needs and accommodations required to ensure their school attendance is in their best interest. The Minister of Health, Dr Zweli Mkhize, has described the fight against COVID-19 as a people's war against the virus:

*We will defeat the pandemic on the basis of collective social behavioural change, that creates a whole new culture of distancing, of use of masks, cough etiquette and ensuring that everybody is cautious of their individual roles, because unless our citizens themselves take responsibility of infection control, then off course we will not be able to win*

From the above, it is obvious that our chance to win lies in our acts of meticulous planning, preparation and constant awareness. A higher degree of these capabilities is, however, required where schools have learners and persons with disabilities or who may be vulnerable and susceptible to contracting COVID-19. For instance, a range of complicating factors may arise in a school context, due to the nature of vulnerabilities

and the manner in which schools manage their daily practices in response to these complexities, that may compromise the safety of learners, teachers and support staff.

To this end, these guidelines provide an outline of the steps that may be taken in order to limit the chance of contracting the virus in schools with learners with epilepsy and at the same time respect the rights and special needs of the learner with epilepsy. Schools are alerted to the fact that the strength of these guidelines lies in them being used and applied in conjunction with directions from the following documents, which are freely available at [www.education.gov.za](http://www.education.gov.za) :

- *Coronavirus Orientation Guidelines for Schools, Teachers, Support Staff and Learners on the COVID-19 Outbreak in South Africa;*
- *DBE Guidelines for Schools on Maintaining Hygiene during COVID-19 Pandemic;*
- *ELRC Collective Agreement 1 of 2020: Concession process to follow for employees with a comorbidity (COVID-19); and*
- *Standard Operating Procedure for the Prevention, Containment and Management of COVID-19 in Schools and School Communities.*

## **2. Key considerations**

- 2.1 Epilepsy is not known to be a risk for COVID-19. This suggests that there is no evidence that having epilepsy alone makes people more likely to catch coronavirus or have more severe symptoms.
- 2.2 Seizures may occur at any time without warning and school staff must at all times be adequately prepared to support a learner in the event of a seizure.
- 2.3 Learners who have had seizures in the classroom or playground must not be excluded from learning. The school must identify such learners and develop a protocol using these guidelines to ensure that their medical situation is managed carefully to ensure no droplet spread or contamination happens.
- 2.4 Inform the learner with epilepsy, class teacher and parents / caregivers of the new measures in place, either verbally or in an easily accessible format, to prevent the spread of the virus.
- 2.5 Give the learner information regarding the procedures. Tell the learner about the new procedures regarding the wearing of masks, sanitisation of hands and the taking of temperature. Discuss the steps in detail and inform the learner what he/she would be required to do.
- 2.6 Like all learners, learners with epilepsy will not immediately be familiar with keeping the required distance between themselves and other learners and must be reminded to keep this distance until it becomes routine to them.

### **3. Measures to reduce the risk of contracting or transmitting COVID-19**

- 3.1 Learners who have epilepsy face the same health challenges as learners who do not have the condition and are otherwise healthy. For this reason, learners who have epilepsy should exercise the same habits and preventative measures that healthy people would typically take, such as social distancing; avoiding contact with sick people; washing hands regularly; disinfecting surfaces regularly; and avoiding touching hands, eyes, nose and mouth.
- 3.2 However, having said that, epilepsy is a very varied condition which implies that learners may experience different symptoms and/or seizure types depending on their specific diagnosis. Some learners with epilepsy regardless of seizure control may have other health conditions that put them at higher risk from COVID-19. For instance:
  - 3.2.1 They may be taking medication to control seizures that also affect their immune system (for example, ACTH, steroids, everolimus, immunotherapies). It is important to note that most seizure medication does not affect the immune system.
  - 3.2.2 Some people may have other neurological or developmental issues that affect their immunity. People in these situations are at greater risk of developing more severe symptoms with viral illnesses.
  - 3.2.3 Learners with epilepsy may have other medical problems (e.g. lung problems) that could place them at higher risk of developing more severe symptoms with COVID-19. For example, learners who have problems swallowing or frequently inhale food or liquids into their lungs (aspiration) are at higher risk for pneumonia.
- 3.3 Seizures are often accompanied by bodily fluids. For example, a learner may foam at the mouth, or lose control over the use of their bladder or bowels. Secondary injuries may also be sustained during a seizure, which may cause bleeding. This poses additional risks to school staff who will be in direct contact with a learner during a seizure. It is therefore critical that school staff assisting a learner experiencing a seizure wear gloves and the appropriate PPE.
- 3.4 Any materials used to clean a learner during and after a seizure must be disposed of in a sealed plastic bag along with the disposable PPE.
- 3.5 Any cushions, blankets, etc. used to assist a learner during a seizure must be properly sanitised before being used again.

### **4. Wearing of face shields/masks**

- 4.1 Most people with epilepsy can safely wear simple cloth face coverings. If the learner finds that wearing a face covering makes them feel uncomfortable or anxious, it's worth trying different ones to find one that's right for that learner.

- 4.2 A learner's face mask may potentially cause an obstruction in a learner's airways in the event of a seizure, as bodily fluids may collect in a mask and may become a choking hazard.
- 4.3 In the case of a seizure, the assisting staff member/s must remove the child's mask and store it safely, ensure there is an open airway and ensure the environment has good ventilation
- 4.4 Wearing of a face mask during the school day may predispose a learner with epilepsy to an increased risk of having a seizure, especially if the learner has uncontrolled or poorly controlled epilepsy.
- 4.5 Other comorbidities for example, intellectual impairment, where communication may be limited, may make the monitoring of a learner with epilepsy, who is required to wear a face mask, more challenging. Alternative masks should therefore be considered, guided by the individual learner's feedback on their tolerance and preference, with the acknowledgement that in certain cases wearing no mask may be the only responsible solution. If this happens, it will signal necessity for increased supervision, without harassing the child though.
- 4.6 Learners with epilepsy may experience drooling, or a large amount of saliva in the mouth, and a mask may need to be changed or cleaned more frequently throughout the day. Additional masks must be supplied if this is the case.

## **5. Personal hygiene**

- 5.1 Learners must be encouraged to do the following:
  - 5.1.1 Frequent washing or sanitising of hands, with soap and water, for at least 20 seconds at a time.
  - 5.1.2 Learners must maintain personal hygiene. Schools must consider allowing learners to wear civvies in order to encourage clean clothes daily.
  - 5.1.3 Learners should, if possible, avoid touching their faces and more specifically avoid touching their eyes, mouths and noses.
  - 5.1.4 Learners must cover a sneeze or cough with a flexed elbow or tissue and then immediately dispose of the tissue and then also properly sanitise their hands afterwards.
- 5.2 Schools must also refer to the *DBE Guidelines for Schools on Maintaining Hygiene during the COVID-19 Pandemic*.

## **6. Hostel and dining rooms**

- 6.1 Where learners with epilepsy reside in a school hostel, staff must have appropriate training and adequate PPE on hand to safely support a learner during a seizure.
- 6.2 All other provisions relating to the maintenance of health and safety standards for hostels as contained in the SOP must be adhered to.

## **7. Learners not returning to school**

- 7.1 The following categories of learners may not return to school:
  - 7.1.1 *Learners with comorbidities that pose a risk to severe COVID-19 as guided by the Department of Health:* For these learners, schools must ensure that they set up appropriate mechanisms for these learners to continue with their education, as detailed in the *Standard Operating Procedure for the Prevention, Containment and Management of COVID-19 in Schools and School Communities*.
  - 7.1.2 *Learner from hotspot areas:* For these learners, schools must ensure that they set up appropriate mechanisms for these learners to continue with their education.
  - 7.1.3 *Learners whose parents have concerns about them returning to school in the context of COVID-19:* Parents, guardians and caregivers for these learners must make necessary arrangements with schools to ensure that the education of their children continues.
  - 7.1.4 *Learners whose parents have opted to home-educate:* Parents, guardians and caregivers of these learners must register their children in line with the *Policy on Home Education* and provide evidence of how they will ensure full and clear access to education, through the modality the learner uses.
- 7.2 For the above to happen, schools must set up appropriate mechanisms for parents, guardians and caregivers of the above categories of learners to inform the school in respect of the reasons for not returning to school, and these learners must be assisted to fully understand why they are not returning to school.
- 7.3 The school, working together with District officials, must ensure that learners referred to in 7.1.1 to 7.1.3 are provided with the necessary support to continue learning from home and to receive the therapeutic, nutritional and LTSM support required to do so.

In order to do so, the Principal must pay particular attention to the provisions in 18.7 of the SOP.