

# Seizure action plan

## Example

This example is to help you do a seizure action plan by showing what it could look like.

Do not just copy it as it would be unlikely to meet the needs of your employee.

<b>Date created</b>	23 October 2020
<b>Due for review</b>	24 October 2021
<b>Name of employee</b>	Andrew Holmes
<b>Job title</b>	Security officer
<b>Name of line manager</b>	Adnan Chaggar

## Emergency contacts

<b>Name</b>	Diane Holmes
<b>Relationship</b>	Wife
<b>Contact number (s)</b>	0113 222 5456 07889 752696
<b>When to contact</b>	Only if an ambulance has been called.

<b>Name</b>	Jonathan Holmes
<b>Relationship</b>	Father
<b>Contact number (s)</b>	01274 654987
<b>When to contact</b>	If my wife cannot be contacted in an emergency. Can be contacted to ask if he can give me a lift home.

This plan is in place to ensure people know what to do if a seizure happens at work. It covers:

**Seizures** – what happens, how to help and when it is an emergency

**Trusted colleagues** – who knows at work and preferred companions

**Treatment** – what medicine is taken and who can administer emergency medicine if needed

**Support at work** – the effect that epilepsy has, and the support that is in place

## Seizures

### Seizure type/s

Focal aware and Focal impaired awareness

### What happens during a seizure and how to help

Andrew's epilepsy can cause two different types of seizure.

1. Focal aware seizure
  - Andrew stays conscious
  - The right side of his body tends to twitch and be numb
  - Metallic taste in the mouth
  - Intense rising sensation that can distort his sense of reality

The seizures tend to last less than a minute.

Stay with Andrew and make sure he can't hurt himself. Watch closely as the seizure may progress into an impaired awareness seizure.

2. Focal impaired awareness
  - Loses consciousness – "lights on but nobody at home"
  - Often makes chewing movements

The seizures tend to last no more than two minutes.

Stay with Andrew. Make sure he can't hurt himself. Time the seizure and reassure Andrew when it has finished, having a seizure can make him confused.

### Typical length of time a seizure lasts

1 or 2 minutes.

## Typical seizure pattern

Once every 3 months on average. The longest Andrew has been seizure free is 9 months.

## What to do if a seizure lasts longer than usual or for more than five minutes

This has never happened. If it did call 999.

## When to call an ambulance

- If Andrew has a serious injury such as a serious bang to the head
- If the seizures happen in clusters without recovering in between
- If the seizure lasts for more than 5 minutes

## After a seizure

- After a seizure Andrew can be quite confused – reassure him and remind him where he is
- It can take a bit of time to come back to himself. The confusion can make Andrew's behaviour a bit unusual. He might ask unusual questions
- After a seizure Andrew can be in quite a 'delicate' mood. He might be quite snappy or sensitive
- Let Andrew sit quietly for about 20-30 minutes until the confusion has eased
- Andrew does not usually feel the need to go home after a seizure

# Trusted colleagues

## Who needs to know?

Line manager – Adnan

All team supervisors – Aaron, Dave, Ali, Stewart, Lee

First Aiders –

- Abigail Sullivan
- Sean Tucker

## Do they need epilepsy awareness training?

Andrew is open with colleagues about how to help and what happens during a seizure, which means the team know enough about what to do to help Andrew.

Adnan as line manager and the first aiders have completed Epilepsy Awareness training.

## Who at work could respond to a seizure?

If anyone notices that Andrew is having a seizure let the first aiders know. Andrew is happy for the team to do this.

## Which people are preferred companions if needed?

Abigail or Bob.

# Treatment

## Epilepsy medicine

If you need to take your medicine at work, do you need any support to do so? For example, a safe place to store it?

## If emergency medicine has been prescribed, who at work is trained to give this?

Name	Position
N/A	

## Where is the emergency medicine stored and who has access to it?

## Any other treatments?

N/A

# Support at work

## What effect does epilepsy have?

Andrew cannot drive. He has some memory issues occasionally. His family worry about him and Andrew finds he needs to reassure them a lot.

## Is there anything that makes a seizure more likely?

Tiredness

## Is there anything that can be done to reduce the risk of seizure triggers?

Organise shifts in advance so Andrew can plan accordingly. As far as possible stick to the agreed shift schedule because last minute changes are difficult to plan around.

## What support is in place at work?

Andrew has a lone worker alarm to use. This is to help keep him safe if he confused after a seizure. If used it alerts his shift partner and Andrew can be located if needed.

Shifts are agreed in advance.

## Is there any other support that would help?

Andrew has no need for any more support at this time.

## If applicable – Has there been an occupational health assessment?

No

Is one needed? No

Yes

Date:

What were the recommendations:

## Has there been an Access to Work assessment?

No

Is one needed? No

Yes

Date:

Outcome:

This plan is agreed by

### Employee

<b>Name and position</b>	Andrew Holmes, Security officer
<b>Signature</b>	
<b>Date</b>	23 October 2020

### Employer

<b>Name and position</b>	Adnan Chaggar, Line Manager
<b>Signature</b>	
<b>Date</b>	23 October 2020

Agreed review date: 24 October 2021

This template is part of the Epilepsy Action Employer toolkit. See [employers.epilepsy.org.uk](https://employers.epilepsy.org.uk) for more resources to help support people with epilepsy at work.

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