



THE MOSLEY ACADEMY

FIRST AID & MEDICAL CONDITIONS PROCEDURE



September 2026

Reviewed: September 2026

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Medical Conditions Procedure

This procedure supplements the **JTMAT Supporting Pupils with Medical Conditions Policy** and aims to provide the First Aid procedures that we adhere to at The Mosley Academy. In addition to this procedure, please also see the Allergy Safety in School Procedure. Both of these procedures are reviewed annually.

The very high majority of staff at The Mosley Academy have Emergency First Aid training. Some staff have their pediatric first aid qualification too. This mainly applies to those working within the EYFS. A list of all first aiders and their qualifications are held in school.

All First Aid treatment administered is logged on MCAS, our parent communication platform. If we believe a parent needs to be informed before the end of the day, we may phone a parent to inform them of an injury and either request to take them home or simply to share information with them, so they are aware of the injury on collection at the end of the day.

Head injuries may receive a call home where staff members feel this is necessary and as a courtesy call as a precaution, even if the student appears well. A level of discretion will always be used when there may be a need to inform parents of an injury.

We will ring a parent where, following a head injury, the child is:

- Sleepy
- Feeling sick/ being sick
- Not concentrating
- Looking pale or feeling unwell
- Has a headache

Storage of medical supplies in school

Plasters, sterile wipes and other medical supplies are kept in the School Office. PPE is stored in the Happiness room next to the school office. Every classroom has their own First Aid bag. A stock list is enclosed within each bag, and the class teacher/TA are responsible for checking the contents and replenishing from the stock in the school office. A TA has the overarching responsibility of checking supplies for the whole school.

Any medicines that are required by the children, e.g. anti-biotics, creams and other prescribed medications, must be handed into the school office where a medicine consent form is completed by the parent. As per the JTMAT policy, **we will only administer prescription medication**. Only in exceptional circumstances, will we administer non-prescribed medication. An example of this is where an ambulance has been called and pain relief has been issued in school with permission from the parent. This will always be documented and information passed onto the emergency services.

Medication is kept in a locked cupboard or fridge in the school office only. Under no circumstances should medication of any sort be kept in a child's bag. If we are made aware of any medication in a child's possession, this will be removed and kept in the school office until the end of the school day.

Children's inhalers are kept in classrooms in a centrally stored location in class cupboards, clearly visible to staff. They are contained in a clear medicine box. Epi pens are also stored in the medical boxes. Care plans / asthma plans are also located with the inhalers/ epi pens. The

school has two epi pens for emergency use plus one inhaler, also for emergency use. These are kept in the school office.

A pupil's wellbeing is the primary concern. Act with caution and care when making judgements. If there is any uncertainty, consult with other professionals, PFA trained, within the setting and use your discretion to make the best and safest decision in the interests of the child involved.

In-school procedures

In the event of an accident resulting in injury the closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.

- The first aider will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents. This decision will also be confirmed by either the DHT or HT. In their absence, the DDSL/ school sendco will be the next senior member of staff.
- If emergency services are called, the Headteacher/Deputy Headteacher or the office team will contact parents immediately. The relevant member of staff will complete an accident report on the same day or as soon as is reasonably practical after an incident resulting in an injury.
- If a child is sent to hospital, either by emergency services or taken by the parent, this will be formally logged to the Staffordshire LA portal, My health and safety reporting.

Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A well-stocked first aid kit (ensure stock is checked and replenished as per the contents checklist)
- Information about the specific medical needs of pupils
- Access to parents' contact details
- All necessary medical equipment

Risk assessments will be completed by the lead member of staff prior to any educational visit that necessitates taking pupils off school premises using the Evolve system. A printed copy of this will be taken with the trip lead.

There will always be at least one first aider on school trips and visits. EYFS will always have a paediatric first aider on site and on all school trips.

Procedure for asthma

At the Mosley Academy, we have set up a simple and clear medication system for maintenance and emergency medications. This includes the storage of inhalers and how to support children with asthma.

- At the beginning of each new school year, we ask all parents to inform school of any medical needs, reviewing and updating any existing care plans held in school. All children with asthma have an asthma card in school that is held with their inhaler in the classroom. The asthma card is also held centrally in the main office with the medication and health and care plans. See asthma card below for example.
- Where required we will meet with parents to build a trusting relationship and obtain:
- Medication orders / GP letter
- Medications such as quick-relief inhalers
- Discuss their child's individual asthma plan
- Explain where inhalers are held in school.
- Communicate with staff to alert them to a pupil's health needs. These are recorded on the 'Children with medical needs' list available to all staff at the beginning of the year and kept under review. A copy of this is also available in the staffroom
- Provide asthma education to staff as needed. This is available through the school nursing team throughout the year.
- A school emergency inhaler is held in the school office in the medical cupboard.
- Review symptoms of asthma with all staff and post signs of symptoms in classrooms. Share training from school nursing training with all staff.
- Records are kept with the child's inhaler each time the child uses their inhaler. The date, time, number of puffs and who administered are recorded. When recording this, the staff member must check any prior administration of the inhaler, in order to ensure a satisfactory dosage over the duration of the school day. If more than 2 puffs are required in the school day, parents need to be called to inform them. An adult must supervise/ support the child to administer an inhaler. They should never be left to administer this alone.
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Asthma training for school staff includes the following:

- Signs and symptoms
 - Common risk factors, triggers and/or allergens
 - How to prevent asthma flares / allergy exposures
 - Never send a child to the School Health Office alone
 - What are the signs and symptoms of an emergency
 - How to respond to an asthma or allergy emergency
 - Needed medication
 - How to administer medication
 - How to call the emergency services – 999 or 911
- There are asthma posters in classrooms.

School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth

Address

Parent/carer's name

Telephone - home

Telephone - mobile

Email

Doctor/nurse's name

Doctor/nurse's telephone

This card is for your child's school. **Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year.** Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's policy.

Reliever treatment when needed

For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature

If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this.

Parent/carer's signature Date

Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature

Parent/carer's signature Date

What signs can indicate that your child is having an asthma attack?

Does your child tell you when he/she needs medicine?

☐ Yes ☐ No

Does your child need help taking his/her asthma medicines?

☐ Yes ☐ No

What are your child's triggers (things that make their asthma worse)?

- ☐ Pollen ☐ Stress
- ☐ Exercise ☐ Weather
- ☐ Cold/flu ☐ Air pollution

If other please list

Does your child need to take any other asthma medicines while in the school's care?

☐ Yes ☐ No

If yes please describe

Medicine	How much and when taken

Dates card checked

Date	Name	Job title	Signature / Stamp

To be completed by the GP practice

What to do if a child is having an asthma attack

- 1 Help them sit up straight and keep calm.
- 2 Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- 3 Call 999 for an ambulance if:
 - their symptoms get worse while they're using their inhaler - this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- 4 You can repeat step 2 if the ambulance is taking longer than 15 minutes.



Any asthma questions?

Call our friendly helpline nurses

0300 222 5800

(Monday-Friday, 9am-5pm)

www.asthma.org.uk

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