

FIRST AID POLICY

First Aid is emergency care given to an injured person (in order to minimise injury and future disability) before professional medical care is available. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the same way that parents might be expected to act towards their children. In general, consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. The confidentiality and rights of boys as patients are appropriately respected.

1) Background

a) Ludgrove Preparatory School is a full boarding prep school for approx. 200 boys aged 8 – 13. In addition there are some 100 Staff in total (the majority engaged in Low Risk activities), approx. half of whom are part time and some 23 of whom are resident.

b) The School's First Aid Policy is designed to comply with best practice and to meet the legal obligations of the School as:

- i)** a boarding School,
- ii)** an educational establishment, and
- iii)** a place of work.

The School has and implements appropriate policies for the care of boarders who are unwell and ensures that the physical and mental health, and emotional wellbeing of boarders is promoted. These include first aid, care of those with chronic conditions and disabilities, dealing with medical emergencies and the use of household remedies.

c) The School provides nursing care 7 days a week. The nursing team is made up of three Registered Nurses working on rotation 7.00am-9.00pm. Outside of these hours first aid cover is provided by a matron who holds a first aid qualification.

d) A number of members of the teaching staff and non-teaching staff, who are trained and qualified as first aiders are able to give emergency first aid. The names of first aiders are published in first aid notices that are displayed around the School.

e) First aid boxes are in all potentially high risk areas, as well as in the Nurses room (the School Nurse regularly checks and replenishes the first aid boxes).

f) Outside term time, the number of staff working at the School is typically 12-15 all involved in Low and Medium Risk activities. The School's policy is to ensure that there is one 'Appointed Person' available at any time to provide basic first aid cover. Due to the nature of the school it is not possible to provide a prescriptive location of all first aiders at any one time.

g) Arrangements for pupils with particular medical conditions, for example asthma and epilepsy, are included on Appendices II & III respectively.

i) Proper arrangements are in place to ensure that spillages of body fluids are safely and promptly cleared up and hygienically disposed in accordance with safe practice. Personal protective clothing (gloves, aprons) are available for use by all staff.

Responsibilities

The responsibility for Health and Safety, which includes first aid, rests with the Governing Body and the Estates Bursar on a day to day basis. The Headmaster is responsible for putting the policy in place, including informing staff and parents. All staff should be aware of available first aid personnel, facilities, and the location of first aid boxes.

First aid provision must be available at all times, including out of school trips, during games and matches, and at other times when the school facilities are used e.g. Parents' Meetings.

Adequate first aid cover will be provided in all school buildings, as well as during break times and overnight. If a staff member is on a trip then they must have access to a mobile telephone in order to summon help.

First aiders must have attended a recognised first aid course approved by the Health and Safety Executive (HSE) and attend refresher courses every 3 years. They will be reliable, have good communication skills, an ability to cope with stress and able to absorb new knowledge.

The HSE states that first aid does not include the administration of medicines, although there is no legal bar to doing so. Ludgrove School has an 'Administration of Medicines Protocol' (see Appendix 1) which clearly identifies the procedures and responsibilities of staff. All nurses and matrons have completed Opus online medication administration training.

It is the responsibility of the Headmaster, to ensure good first aid practice is being carried out within the school and at events and activities organised by the School.

- First Aid kits are situated in various locations around the School, see Appendix IV.
- Sports first aid bags are held in the Medical Room. They are available pitch side and for away matches.
- Day trip first aid bags are available for all educational visits and any necessary equipment for individual children with health care needs are provided by Nurse.
- The contents of the first aid boxes and first aid bags are to be regularly checked and maintained by Nurse (with the exception of those kept in the minibuses and workshops which are maintained by the Maintenance Dept.).
- All medicines are to be kept in a locked cabinet in the Medical Room. The Nurse will hold the key and be responsible for regular stock checks.

Action Rationale

1 The School Nurse or a Matron with the First Aid at Work qualification will be available at all times to deal with any first aid incidents when the children are in School.

- To ensure the safety of the children when at School
- To comply with the National Minimum Boarding Standards (which permit first aid to be given by a qualified nurse or first aider)
- To comply with the Department for Education recommendations

2 The School Nurse will hold an appropriate first aid qualification in addition to nursing qualifications. At least 2 matrons will hold the HSE First Aid at Work qualification, and 1 matron will hold the HSE Emergency First Aid at work qualification. All will revalidate every 3 years.

- To comply with HSE guidelines during term times
- To ensure first aid knowledge, including resuscitation skills, is up to date and meet DfE recommendations

3 A selection of staff in the School will hold an Emergency First Aid at Work certificate.

- To comply with HSE guidelines during both term time and School holidays
- To ensure prompt first aid treatment in an emergency

4 Copies of all first aiders' certificates are held in the Study

- To ensure all first aiders have a valid first aid certificate

5 The School Nurse will be responsible for ensuring first aid kits are distributed around the School, particularly in high risk areas and will maintain a list of the locations.

- To ensure first aid supplies are immediately to hand in all areas of the School
- To ensure first aid supplies are available when the children are not in School or the Medical Room is unattended

6 All first aid kits located around the School will contain appropriate and in date supplies and be contained within a green box or bag with a white cross.

- To meet DfE/HSE recommendations
- To ensure the correct first aid supplies are in each location

7 The first aid kit located in the kitchen will contain blue food-handlers dressings.

- To comply with HSE requirements

8 The School Nurse will keep a supply of first aid kits for school trips and outings.

- To comply with DfE recommendations
- To ensure the safety of the children when off the school site

9 All first aid kits for school trips and outings will contain identical supplies and be contained within a green box with a white cross

- To meet DfE/HSE recommendations
- To ensure staff are familiar with the contents of the first aid kits

10 Each school minibus & vehicle will contain a First Aid kit, the contents of which shall be identical.

- To meet HSE requirements
- To ensure staff are familiar with the contents of the first aid kits

11 The School Nurse will be responsible for checking the contents/expiry dates of all first aid kits at least every term (except for those in the minibuses and workshops which are maintained by the Maintenance Dept.).

- To comply with HSE/DfE guidelines
- To ensure all first aid kits are well stocked and contents are in date

12 The School Nurse will know the location of the School Accident Book (kept in the Medical Room) and be aware of how and when to report an accident.

- To meet HSE requirements
- To record the 'what', 'where', 'how' & 'when' of every occurrence.

13 In the event an ambulance is needed to take a child or adult to A&E, in the first instance it is the responsibility of the on-duty nurse to call an ambulance, but this will also be performed by any first aider or any member of staff, all of whom have had training in how to manage a medical emergency

- To ensure that all children and staff receive professional medical care quickly.

14 The School Nurse and / or Estates Bursar is responsible for reporting any notifiable accident that occurs on school premises to a pupil, member of staff, parent, visitor or contractor to the HSE in

accordance with the Reporting of Injuries Diseases and Dangerous Occurrence Regulations (RIDDOR).

- To ensure compliance with HSE RIDDOR

15 The School Nurse is pitchside on rugby match days.

16 Out of Hours Medics Ltd attend pitchside all rugby match days.

Reporting & Recording of Accidents

Ludgrove School recognises that:

We have a duty to report incidents that involve the:

- Health & Safety at Work Act 1974
- Social Security Regulations 1979
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

An unreliable accident / incident reporting system, or the under reporting of near miss incidents could lead to dangerous occurrences recurring which may result in personal injury to staff, parents or visitors.

Breach of the statutory requirement to report specific incidents to the Health & Safety Executive (HSE) may lead to prosecution.

The Appointed Person

This person has the responsibility of taking charge during an incident and summoning help if needed. A staff member who has completed the First Aid at Work course (or the School Nurse) is always on the premises throughout periods of school operation and will assume this role in the event of an incident.

Staff completing the course at Ludgrove School are:-

Rebecca Salt (Lead Nurse)

Nicola Brown (School Nurse)

Jenna Pullinger (School Nurse)

Alison Bridge (Matron)

Some other staff receive first aid training specific to their areas and the records are held in the Study.

Procedures

At Ludgrove School we make every effort to minimise the risk of accidents but we recognise that accidents may still occur. All accidents to pupils, staff, parents and visitors will be recorded by the School Nurse and reviewed by the Headmaster as required.

For children the following procedure shall be followed:

Once the child has been treated, all details regarding the accident will be recorded. Daily 'minor scrapes and knocks' will be recorded in the individual child's daily care plan. Any significant accident or injury will be recorded in the Accident Book kept in the Nurse's room, parents will be informed by telephone after the incident. An investigation into the accident should be undertaken immediately or at least on the same day. A judgement should be made as to what can be done to reduce the risk of similar accidents occurring again.

In the event of a serious incident and if it is deemed necessary, the appointed person will call an ambulance. The Headmaster will contact the child's parents. A member of staff will accompany the child to hospital in the ambulance.

Procedure following injury to staff or visitors:

Once the individuals have been treated, all details regarding the accident will be recorded in the accident book kept in the Nurses room. An investigation into the accident should be undertaken immediately or at least on the same day. A judgement should be made as to what can be done to reduce the risk of similar accidents occurring again.

Accident Records should be kept for 3 years, accidents involving minors should be kept until the person(s) involved reach 21 years of age.

The Headmaster will ensure that accidents, which are reportable to the Health & Safety Executive, are reported using the Riddor reporting system. Guidance can be found at www.hse.gov.uk/riddor

Treatment

Gloves are to be worn at all times when dealing with any body fluids. Body fluid spillage kits are available from the Nurse. All soiled dressings, gloves etc will be disposed of in a clinical waste bin. This is located in the Laundry / Wash Room and is emptied regularly by the Nurse. Wounds will be cleaned and appropriate dressings applied

Notes

HSE Recommendations for First Aid Cover:

Term Time: 1-2 Appointed Persons (i.e. max 100 workers at any time in Lower Risk Activity, with max 5-6 in Medium Risk activities)

School Holidays: 1 Appointed Person (i.e. max 20 workers in Low/Medium Risk Activity)

Reviewed 23rd April 2019
By Rebecca Salt

APPENDICES

Appendix I

Administration of Medicines Protocol

1) Policy Statement

- a) By having a policy we are providing a sound basis for ensuring the proper and safe administration of both prescribed and over the counter medications.
- b) The School provides nursing / first aid cover 24 hours a day, 7 days a week during term time to provide medical care (including first aid) to pupils and first aid to staff and visitors. The Medical Room is manned by a Registered Nurse 7am-9pm. Outside of this time, first aid cover is provided by a Matron who holds the First Aid at Work qualification.

2) Homely/over the counter medications.

All homely medications are stored in locked cupboards in the Medical Room. Stocks are obtained from Rose Street Pharmacy within Wokingham Medical Centre. A record of stock levels is maintained by the nurse and checked weekly. When homely medications are administered an entry is made into the pupils daily care plan sheet so a record is kept at all times.

3) Prescribed medications

- a) All prescribed medication brought into school must be supplied by a recognised pharmacy or by the pupil's home GP.
- b) Medication will only be issued to the pupil for whom it has been prescribed.
- c) Medication must be in its original container / packaging
- d) The original dispensing label must not be altered.
- e) All medication must be in English and prescribed in the U.K.

4) All medication is administered under a protocol:-

- a) Medication will only be administered by the Nurse / appointed matron (all of whom have completed the Opus Medicines Awareness Course for Schools) within the medical room if signed permission has been obtained. Parents are asked to sign their permission for medication to be administered on the joining medical forms.
- b) The identity of the pupil must always be checked.
- c) The administration sheet which is updated daily must match the label on the drug.
- d) Immediate initialising of the administration sheet.
- e) Recording non-attendance or refusal.
- f) All medication must not have reached its expiry date.
- g) Any medicine that requires being stored at low temperatures is put in the locked designated fridge in the surgery. A daily temperature check is kept. The fridge is kept locked at all times.
- h) In the case of asthma inhalers boys who use an inhaler daily do so under the supervision of the School Nurse to ensure correct usage/dosage.
- i) Boys who use an asthma inhaler on an ad hoc basis are given practical instructions by the School Nurse as to their proper usage so that they are capable of using them correctly while unsupervised, if required.

5) Medicine Cupboard Stock List

[If ever in doubt check the instructions on the bottle/packet or ask]

Pain Relief

Paracetamol 500mg Tablets – at least 4hrs
between doses – no more than 4 doses in 24
hours

Paracetamol Elixir 250mg/5ml – at least 4hrs
between doses – no more than 4 doses in 24 hours

Ibuprofen Elixir 100mg/5ml – 3 - 4 times a day

Ibuprofen Tablets for over 12 years – 3 - 4 times a
day

Allergy Relief

Chlorphenamine Elixir 2 mg in 5ml – 4 – 6 hourly
– max.

30 mls in 24 hrs

Cetirizine 10mg Tablets – once a day

Indigestion

Peptac Liquid/ milk of magnesia – 5mls

Cold Remedies

Strepsils

Olbas Oil

Anxiety & Homesickness Relief

Bach Rescue Night

Skin Care

Arnica

Double base Cream

Sudocream

E45 Itch relief cream

Daktarin Powder

Anthisan Cream

Eye Care

Optrex Eyewash

Travel Sickness

Cinnarizine/ Stureron 15 mg – 1 tablet 20 mins
before travel

Burns Cream

Acrifles/Chlorhexadine Gluconate 0.25%

Mouth Care

Bonjela Teething Gel 2 month plus

Vaseline

Staff Only

Ibuprofen 400 mg Tablets

Cough Remedies

Simple Linctus for 12 years and over – 5mls

Simple Linctus (paediatric) – 5 -10 mls

Glycerin Lemon & Honey – 5 mls

Appendix II

First Aid Protocol for Asthma

1) Aims

- a) To enable all pupils with asthma to participate fully in school activities.
- b) To ensure all staff are able to deal with a child who has an asthma attack
- c) To ensure compliancy
- d) To help all pupils staff and parents are well informed about asthma and to adopt a responsible attitude to its treatment.

2) What is asthma?

Asthma is a disorder of the lungs. Underlying sensitivity and inflammation causes air passages or bronchial tubes to become narrowed, making it difficult to breathe in and out. Sudden narrowing produces what is usually called an asthma attack.

3) How does asthma affect children?

- a) Children with asthma may develop episodes of attacks of breathlessness and coughing during which wheezing or whistling noises may be heard coming from the chest. Tightness felt inside the chest is sometimes frightening and may cause great difficulty in breathing.
- b) Individual children are affected by their asthma in different ways. One child may have very occasional, brief and mild attacks whilst another may be forced to not attend school, be unable to participate in games and need regular treatment.

4) What causes an asthma attack?

- a) Asthma is a physical disorder of the lungs which the air passages become sensitive a variety of common stimuli. It is not an infectious disease nor is it a psychological disease, although strong emotions lead to symptoms.
- b) Collecting information on individual pupils
- c) All parents are asked to declare their child's asthma.
- d) The Nurse will carry out a baseline peak flow of all new pupils
- e) Any boarder showing signs of asthma will be assessed and referred to the school doctor.
- f) A termly list will be published to all staff of the current asthmatics.

5) Use of inhalers preventative inhalers

- a) These are usually brown or orange and contain steroids. These are taken regularly to reduce the sensitivity of the air passages so that attacks no longer occur or are only mild.
- b) This type of inhaler does not help during an attack.

6) Relief inhalers

- a) These are generally blue and are used to relieve pupils when breathless, coughing or wheezing.

7) Use of inhalers in School

- a) All children should have a spare inhaler kept in the medical room. All pupils have their own labelled inhaler kept in the pigeon holes in the Medical Room. Pupils must not share their inhalers.

8) In the event of an asthma attack:

- a) Call the Nurse for assistance.
- b) If a pupil becomes breathless wheezy or coughs continually.

- c) Keep calm.
- d) Let the pupil sit down in a position they find comfortable Do NOT let them lie down.
- e) Encourage slow deep breathing. If available use a paper bag.
- f) Loosen any tight clothing.
- g) Ensure the blue reliever is taken promptly and properly if possible via a spacer.

9) Signs of a severe asthma attack

- a) The relief medication does not work.
- b) The pupil is breathless enough to have difficulty in talking normally.
- c) Blue tingeing around the mouth.
- d) Pulse rate is greater than 120 beats per minute.
- e) Rapid breathing of 30 breaths per minute.

10) Action

- a) ANY of these signs means it is severe
- b) Call the emergency services
- c) Stay with the pupil
- d) Keep trying the relief inhaler every 5 – 10 minutes. Do not worry about overdosing.
- e) Inform the parents.

Further information about asthma and emergency treatment can be found in the document 'Guidance on the use of Emergency Salbutamol Inhalers in Schools' (Sept 2014)

<https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools>

Appendix III

First Aid Protocol for Epilepsy

FIRST AID FOR SEIZURES IS QUITE SIMPLE AND CAN PREVENT A CHILD FROM BEING HARMED DURING A SEIZURE

- 1) For a known epileptic, a child will have an individualised care plan.
- 2) There are different types of seizures which need different management.
 - a) Tonic – clonic seizure
 - b) The person loses consciousness; the body stiffens, then falls to the ground. This is followed by jerking movements. A blue tinge may appear around the mouth. Loss of bladder/bowel movement may occur. After a few minutes the jerking should stop and consciousness slowly returns.
- 3) **Do**
 - a) Call the Nurse for help
 - b) Protect the person from injury
 - c) Cushion their head
 - d) Aid breathing by placing in recovery position once the seizure has finished
 - e) Be calmly reassuring
 - f) Stay with the person
- 4) **Do not**
 - a) Restrain
 - b) Put anything in the persons mouth
 - c) Attempt to move unless in danger
 - d) Give anything to eat or drink until fully recovered
 - e) Attempt to bring them round.
- 5) **Medical Assistance**
 - a) Call for an ambulance if one seizure follows another, the person is injured or you feel urgent medical attention is required or if the seizure continues for more than 5 minutes.
 - b) Some children have medicine prescribed for this emergency and will be administered by the nurse.
- 6) **Absence seizure – daydreaming or switching off**

In the event of a simple partial seizure which can be twitching, numbness, sweating, dizziness or nausea with visual disturbance, hearing loss strong smell or taste or a strong déjà vu.

 - a) Reassure
 - b) Guide from danger
 - c) Be calmly reassuring
 - d) Stay with them until recovered
 - e) Call the Nurse

Appendix IV

Location of First Aid Kits & Defibrillator

No	Location	Equipment
1	Medical / Nurses Room	Sports First Aid kits
2	Kitchen	Burns First Aid kit Catering First Aid kit
3	Science Lab	Eye Wash Station
4	Sports Hall	Sports First Aid Kit
5	Art and DT	Eye wash station
6	Work Shops	Standard first aid kit (maintained by Maintenance Dept.)
7	Cricket Pavilion	Standard First Aid Kit x2
8	Swimming Pool	Standard First Aid Kit
9	Minibuses x 2	Standard First Aid Kit x 2 (maintained by Maintenance Dept.)
10	Top pitches	Medicine box – ice pack, Ventolin, anthisan cream
11	Golf course	Ice packs, foil blankets, Ventolin

The defibrillator is located in the main hall between the pantry and study.

Appendix V

First Aid Kit Contents

Swimming Pool Kit -standard first aid kit

Minibus First Aid Kit Contents – standard first aid kit

Sports Hall First Aid Kit

Ice Packs

Triangular Bandage

Eye Wash Pods

Adhesive wound dressing x 5

Assorted plasters

Scissors

Cleansing wipes

Eye pad

Large wound dressing

Medium wound dressing

Finger dressings

Crepe bandage x 3

Sports First Aid Kits

Leaflet for First Aid Advice

Cold Spray

3 Instant Ice Packs

2 x Elastic Adhesive Bandages

Crepe Bandage

4 x Pods of Saline Eye Wash

Triangular Bandage

Elasticated tubular bandage

Scissors

Gauze Swabs

Low adherent dressing

1 pack of steristrips

2 x adhesive dressings

Foil Blanket

Assorted plasters

Fabric strip dressing

Packet of tissues

Micropore tape

Zinc oxide tape

Vomit bags and yellow clinical waste bag

10 non-alcohol wipes

1 eye pad

1 large wound dressing

1 medium wound dressing

2 pairs of disposable gloves

1 mouth to mouth protector

Appendix VI

Sick Boy Policy

If a boy becomes unwell and is admitted to sick bay, parents will be informed by the School Nurse.

If after 24 hours in sick bay, they still remain unwell, parents may then on arrangement take their child home. However on occasions such as the outbreak of a tummy bug or virus, this may have to be reviewed due to the limited space in sick bay.

Boys should not return to school after having sickness or diarrhoea before they have been symptom free for a minimum of 48 hours. Otherwise, we advise boys with any other infection, with a temperature, or if medically unfit for school to remain at home until better.

Appendix VII



FORM C – Ludgrove Parental Consents Form

Your son's name: _____ (block capitals)

1. Medical Consent

Under current legislation it has become necessary for parents/guardians to give consent for their son to receive medical, dental or optical treatment in school. This will take the form of ibuprofen/paracetamol, cough mixture, etc., the dressing of cuts and abrasions and treatment of minor injuries. Such treatment may be given to relieve a headache or other pain, to help recovery and enable your son to return quickly to class thus avoiding missing work. If we are concerned about your son in any way, we will of course contact you by telephone or email immediately.

Due to the NMC (Nursing and Midwifery Council) guidelines, our School Nurses cannot administer homeopathic medicines. Please refer to the First Aid Policy on our website for further information regarding medical care at Ludgrove.

Parents name: _____ (block capitals)

Parents signature: _____ Date: _____

2. Food Allergy / Intolerance

Ludgrove understands that allergies/intolerances present a serious problem for some people.

Please return a copy of the medical diagnosis with this form (this can be a doctor's or a dietician's diagnosis letter).

Details of food allergy, including special requirement and dietary information:

Note: While Ludgrove can make arrangements to provide foods in which allergens are not included as an ingredient, we cannot guarantee that traces of nominated food allergens can remain completely absent from dishes, as these foods may be handled and stored in the same areas as nominated allergens.

Please turn over



FORM C – Ludgrove Parental Consents Form

Name of pupil: _____ (block capitals)

3. Parents' Address List Consent

Many parents have asked if we can provide a list of all parent's addresses and telephone numbers. The list would be circulated **only** amongst the parents of Ludgrove.

I do	I do not	give permission for my contact details including parents' names, addresses, email addresses, home and mobile phone numbers to appear on the Ludgrove Parents' Address List and understand that this is circulated <i>only</i> amongst the parents of the School.
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We cannot include you in this address list unless we have confirmation from you.

4. Photography Consent

The school would like your written permission to use photographs and recorded images of your son in accordance with General Data Protection Regulation and other current guidance.

I do	I do not	give permission for Ludgrove School to use my/our son's image/recording on internal display boards, the school website, school social media accounts, the school magazine, other school publications and any other marketing material which may be sent to other parents and prospective parents.
I do	I do not	agree to support the school in implementing the rules and regulations stated in the Ludgrove ICT Policy which are detailed on the school website at www.ludgrove.net/schoolpoliciesandisi .

5. School Trip Consent

I do	I do not	give permission for my son to take part in school trips and other activities that take place off school premises and to be given first aid or urgent medical treatment during any school trip or activity. I understand that the trips and activities covered by this consent include all visits (including residential trips) which take place during weekdays, holidays or a weekend, adventure activities at any time and all off-site sporting fixtures.
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Each of those with parental responsibility to sign and complete below:

First Signature: _____ Second Signature: _____

Name in full: _____ Name in full: _____

Date: _____ Date: _____

Appendix VIII

FIRST AIDERS			
SCHOOL NURSES			
Rebecca Salt (Lead Nurse)	Surgey – ext 209	First Aid at Work Expires 17.7.20	
Nicola Brown		First Aid at Work Expires 5.1.22	
Jenna Sabine		First Aid at Work Expires 11.12.21	
FIRST AID AT WORK			
		Course taken	Expires
Alison Bridge	Matrons' Room – ext 221	6.5.16	5.5.19
SCHOOLS FIRST AID INSET TRAINING			
		Course taken	Expires
Will Austen	Study – ext 207	18.4.17	17.4.20
Simon Barber	Drawing Room – ext 208	18.4.17	17.4.20
Stephen Browning- Bland		18.4.17	17.4.20
Simon Evans		18.4.17	17.4.20
Gabriel French		18.4.17	17.4.20
Simon Loup		18.4.17	17.4.20
Tamara Parnell	CDT – ext 244	18.4.17	17.4.20
Tom Buckner		18.4.17	17.4.20
Lucy Baker	CDT – ext 244	18.4.17	17.4.20
Tom Hawkins		18.4.17	17.4.20
Gordon Milne		18.4.17	17.4.20
Matt O'Conor		18.4.17	17.4.20
Stuart Squire		18.4.17	17.4.20
Hannah Cheater	Sixes – ext 222	18.4.17	17.4.20
Paul Bellingham		18.4.17	17.4.20
Guy Smith-Bingham		18.4.17	17.4.20
Ann Hooper	Matrons' Rm – ext 221	18.4.17	17.4.20
Will Western-Kaye		18.4.17	17.4.20