

FIRST AID POLICY

This policy includes current First Aid provision at the point of need, incident management, reporting of injuries, first aid assessment, boys with special medical conditions, areas of responsibility, and current personnel.

FIRST AID PROVISION AT THE POINT OF NEED

Location of First Aid Boxes

The School provides First Aid equipment in boxes which are located in the following locations:

- Reception and Porters' Dept
- Boarding Houses, c/o the Matron
- Estates Dept in Lansdowne Road
- Day Houses, c/o the Housemaster
- Grounds Department
- Minibuses, c/o the School Marshal
- Science Departments (3)
- Catering Department (several)
- Art and Technology Departments
- Medical Centre
- Theatre
- Tonbridge School Centre for Sports & Media

Each of these is maintained by the relevant Head of Department and they report annually to the Headmaster's Health and Safety Advisor that the boxes are complete.

The Defibrillators

There are five defibrillators located around School. They are located in the Medical Centre, The EM. Forster Theatre, the Tonbridge School Centre, the School Reception and in the Chapel and are accessible to all staff. Staff in all areas of the School are trained in the use of a defibrillator.

Who to Contact

In a life-threatening emergency the first call should always be to the emergency services on 999.

Medical Centre:	Call 01732 304272
Science:	ext 4243 (Biology) ext 4239 (Chemistry) ext 4207 (Physics)
First Aiders:	Call School Reception (ext 4290 or 01732 365555) Call Sports Centre Reception (ext 4111 or 01732 304111)
Warders Medical Centre:	01732 770088

And for non-life-threatening medical help, dial 111

For those staff members (and boys and visitors) who become ill or suffer injury whilst at work, if they are able to get to the Medical Centre, then medical assistance is provided there throughout the term of each School year by the Registered Nurses employed as the Medical Centre Sisters. The School Medical Centre is provisioned and manned 24 hours a day during term-time and short exeat. The Medical Centre Sister and her Deputies are Registered General Nurses and are thus qualified to administer first aid under the Regulations. They are not necessarily specifically first aid trained.

For more serious injuries and illnesses, several other members of the support staff are appointed by the School to be the 'First Aiders' as required by the Health and Safety at Work Act. They act for those who cannot get to the Medical Centre and when the Medical Centre is closed during the school holidays and half terms. The current names are attached as ANNEX I, and include:

- 1 First Person on Scene trained in June 2017;
- 8 support staff trained in First Aid at Work in Summer 2018;
- 10 support staff trained in Emergency First Aid in Summer 2018;
- 8 staff trained in Basic Life Support in Summer 2019
- 146 staff given refresher Academic First Aid training in January 2019;
- 8 staff trained in Outdoor First Aid in January 2019

In addition, 14 full time staff at the TSC have the NPLQ qualification, which makes them suitably qualified to deliver first aid and use the defibrillator; a list of these staff is displayed in the main TSC Office.

If available and free to do so, the Sisters from the Medical Centre may attend and assist at any significant incident but their specific priority is to boys that might already be admitted to the Medical Centre. Thus, the first response to any incident should be through the First Aiders listed above. Sporting injuries to both boys and staff will continue to be dealt with by the teachers in charge of the activity at the time as described in the Incident Management protocols below. Additional arrangements are also made on match days.

Regular Medical Training of Staff

All teachers in charge of games and activities are to ensure that members of staff who help them are adequately trained in First Aid, appropriate to the game or activity. This is especially important for off-site activities. All teaching staff taking games and activities at whatever level in School will have attended a 2 hour Academic First Aid course on joining the School and an annual refresher thereafter (takes place in the Lent Term). All members of staff are encouraged to undertake further First Aid training, on a voluntary basis, where this is above the schools' minimum requirements; the School provides:

- **A 2 hour Academic Aid course:** a "keep the casualty alive until help arrives" session (this is mandatory for all new members of the teaching staff).
- **A short refresher course** for all members of the teaching staff in September or January of each academic year, covering cardio-pulmonary resuscitation and usually one or more other aspects of First Aid relevant at the time.
- **First Aid at Work:** a 3-day course providing the comprehensive set of practical skills needed by first aiders, giving them the ability and knowledge to deal with first aid emergencies.
- **Emergency First Aid at Work:** a 1-day course enabling a first-aider to give emergency first aid to someone who is injured or becomes ill while at work.
- **Outdoor First Aid** – 2-day course covering first-aid and life-support in an outdoor setting.
- **Various courses for boys:** all 2nd year boys complete a 2 hour basic course as part of their Afternoon Activities programme; further training is offered to those within the Duke of Edinburgh's Award and Life Saving groups.

A central list of staff attending courses and their current qualifications is attached as ANNEX I.

INCIDENT MANAGEMENT For accidents, injuries and dangerous occurrences anywhere in the School and also for pupils and staff during games and trips etc.

Contact Details:

The Medical Centre: 01732 304272 (internal 4272). Term Time only

School Reception: 01732 365555 (internal 4290)

Duty Porter mobile: 07768 900796

1. Life Threatening:

- Immediate basic life support, then...
- Summon an ambulance immediately and arrange for someone to meet and direct it to the incident;
- Summon an appointed School first aider, by calling Reception (4290) or the Medical Centre (304272 – term time ONLY);
- In cases of suspected spinal injury, do not attempt to move the casualty;
- Immediate first aid, keep the injured person warm, insulating from below as well as above, unless a suspected neck or spinal injury;
- Reassure and keep the casualty calm.

2. Defibrillators

There are five defibrillators located around School. They are located in the Medical Centre, the EM. Forster Theatre, the Tonbridge School Centre, the School Reception and in the Chapel and are accessible to all staff. Staff in all areas of the School are trained in the use of a defibrillator.

3. Serious, But Not Life Threatening

- In cases of suspected spinal injury, do not attempt to move the casualty;
- Immediate first aid, keep the injured person warm, insulating from below as well as above, reassure and keep the casualty calm;
- Summon an ambulance if necessary, summon a first aider or otherwise arrange for transfer to the Medical Centre;
- If necessary, the Duty Porter mobile can be called to arrange for a member of support staff to attend and assist.

4. Suspected Head Injury or Concussion

- Any boy who has had any form of head injury, suspected or apparent concussion should always be taken to the Medical Centre by a member of staff;
- If necessary, the Duty Porter mobile can be called to arrange for a member of support staff to attend and assist.

5. All Other Injuries

- Immediate first aid;
- Accompany (or arrange accompaniment for) the injured person to the Medical Centre.

Staff should always remember:

- **Never send a boy, no matter how slight his injury, back to his House but always to the Medical Centre**
- **Never send an injured boy to the Medical Centre alone – always provide an escort – and check afterwards that the injured person did report**
- **Any boy who has had any form of head injury should always be accompanied to the Medical Centre by a member of staff (see 4. above)**

REPORTING OF INJURIES AND ‘NEAR MISSES’, ETC.

An online form for recording accidents – the Accident/Injury/Dangerous Occurrence Report Form - is found via the Health and Safety link from the Staff Homepage on Firefly and the vast majority of accidents are reported and logged via this system. There remain Accident Report Books for staff without Internet access, particularly in non-teaching Departments, and these are collated and monitored by the Health and Safety Advisor.

- **Injuries to Boys.** In all cases, the member of staff is to report an injury to a boy to the Departmental Head and must also complete an online Accident/Injury/Dangerous Occurrence Report Form. This triggers an email alert to the Health and Safety Advisor(s), the Safety and Security Officer, and the relevant Housemaster. Staff must always inform the Housemaster, after having dealt with the boy, at the earliest opportunity to ensure that this message has been received. ***It is the responsibility of the Housemaster to inform parents of any accident or injury to a boy. In his absence this duty may be delegated to the Assistant Housemaster or Matron or, if appropriate, to Nursing Sisters in the Medical Centre.***
- **Injuries to Teaching and Support Staff, Visitors and Others.** Either the member of staff or a colleague should inform the Departmental Head and must also complete an online Accident/Injury/Dangerous Occurrence Report Form or a paper Accident Report Form whereby the yellow top copy goes to the Safety and Security Officer, the pink copy to the Headmaster’s H&S Advisor. In addition, all injuries taken to the Medical Centre will be recorded there in the usual manner.

Dealing with the Spillage of Bodily Fluids

- **Staff precautions.** In general, if staff giving physical care to boys have cuts and abrasions, these should be covered with waterproof or other suitable dressings. Whenever and wherever possible, staff should wear disposable gloves when dealing with body fluids. These are included in all issued first aid kits and boxes within the School.
- **Accidents involving external bleeding.** Normal first aid procedures should be followed, which should include the use of disposable gloves where possible. Wash the wound immediately and copiously with soap and water. Apply a suitable dressing and pressure pad if needed. As soon as possible seek medical advice.
- **Splashes of blood.** Splashes of blood on the skin should be washed off immediately with soap and water. Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water. After accidents resulting in bleeding, contaminated surfaces, e.g. tables or furniture, should be cleaned liberally with detergent and hot water, and the accident reported in the usual manner.
- **General hygiene.** Spillages of blood and vomit should be cleared up as quickly as possible with hot water and detergent. Departments with a spillages kit, such as the Chapel and the Medical Centre, may use that as appropriate. If practical the diluted bleach should be left for 30 minutes before being wiped up with disposable paper towels before cleaning liberally, as above. Disposable gloves and

apron should be worn. Individual paper towels may be discarded down the toilet. However, if many are used, it is preferable to treat them as infected waste. Gloves and aprons should be discarded as infected waste. (See paragraph below). Clothes and linen that are stained with blood or semen should be washed in a washing machine at 60 degrees centigrade for 10 minutes or boiled before hand-washing. Crockery and cutlery can be cleaned by hand-washing with hot soapy water or in a dishwasher or dish steriliser and then allowed to air-dry. In general, normal cleaning methods should be used - no special disinfectants are necessary for either the bath or toilet, use disposable cloths, and use separate cloths for kitchen, for bathroom and for toilet.

- **Waste disposal.** Soiled waste should be placed in a sealed plastic bag and taken to the Medical Centre where it will be disposed of appropriately. If this cannot be done in the School, the rubbish including protective disposable gloves or aprons should be "double bagged" in a plastic bag, effectively secured and disposed of in a dustbin. When work is completed, wash and dry your hands.

THE FIRST AID ASSESSMENT

The School has several areas which require consideration. Though separate, they do overlap in terms of resolution and current provision and the following areas have been identified:

- As an Employer, the School must meet the statutory Health and Safety (First Aid) Regulations 1981 for its many staff - typically about 500, both full and part-time. It also has a duty towards others at the workplace who are not staff members but who are nevertheless affected by how the organisation is run. This includes boys, parents and other visitors to the workplace.
- As a School (with almost 60% of boys boarding), it must provide appropriate care for its boys both in School and during School activities, in term and holiday periods.
- The School is also obliged, under these regulations, to provide cover for those staff and students involved in the Holiday Courses, whilst on the School premises.

Requirements for first aid cover vary during the year:

During Term-time	Boys are present; most staff are available
During Holiday Time	No boys; some teachers might be present but Secretarial, Bursarial, Porters, Grounds, Estates, some Catering, Cleaning and Technical staff are present
During Recre8 Courses	Outside pupils and outside staff are present

BOYS WITH SPECIAL MEDICAL CONDITIONS

Boys who have life-threatening or serious medical conditions (such as diabetes, dietary intolerances / allergies, anaphylaxis, heart conditions or epilepsy) have their conditions registered in a document available to staff. Colleagues are made aware of the needs of such boys through staff meetings and email, where appropriate, and through identification on the database. All staff receive training in how to administer an AAI/epipen for those boys who require it. The Medical Centre (and Housemaster) holds all the relevant medical information on such boys. All boys with special medical needs are identified before going on School trips so that staff accompanying are aware of both the issue and any possible intervention or action that might be required on their part.

ANAPHYLAXIS AND ADRENALINE AUTO-INJECTORS (AAIs), e.g. EPIPENS

The School takes all reasonable precautions to prevent boys being exposed to an allergen to which they have an anaphylactic reaction. This includes:

- requesting relevant information from parents, then storing and distributing this information to those staff and departments who need to know;

- training staff how and when to use an AAI such as an EpiPen/Jext/Emerade;
- obtaining consents from parents/boys for the use of centrally stored emergency AAIs in certain circumstances (centrally stored emergency AAIs are held in the Medcentre and in the TSC);
- informing boys of the use of specific allergens in the food via email, contact by the head chefs and on the menus in each dining room;
- staff organising events emailing all boys who are attending requesting confirmation of any major allergies so that the caterers can be made aware;
- staff referring any queries about the food to a member of the catering department;
- displaying images of boys who carry an AAI and who are at risk of anaphylaxis in all kitchens;
- requesting information about allergies and anaphylaxis from boys when they order packed lunches or eat in locations other than their House dining room;
- informing the boys of our expectations of them to minimise the risks of their being exposed to an allergen, including the need for them to carry their AAI at all times and to communicate with the catering department if they are eating in dining rooms other than their House dining room;
- requiring staff to check that boys are carrying their AAI when on a school trip or fixture;
- removing some allergens from the menu altogether where a boy's sensitivity to an allergen is particularly high;
- providing allergen training for all catering staff.

Common anaphylaxis triggers include:

- **foods** - including nuts, milk, fish, shellfish, eggs and some fruits
- **medicines** - including some antibiotics and non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin
- **insect stings** - particularly wasp and bee stings
- **general anaesthetic**
- **contrast agents** - special dyes used in some medical tests to help certain areas of your body show up better on scans
- **latex** - a type of rubber found in some rubber gloves and condoms

Symptoms and signs – Not all may be present

Staff should be aware of the symptoms of an anaphylactic reaction. The most obvious of these include:

- **swelling or itching of the lips, tongue, throat or skin;**
- **hives (raised and itchy rash);**

Other symptoms include:

- difficulty breathing;
- cramps or nausea;
- increased heart rate;
- chest pain.

Someone suffering from an anaphylactic response may experience:

- sudden feelings of weakness;
- feeling faint;
- confusion;
- anxiety;
- an 'overwhelming sense of doom';
- a collapse or loss of consciousness.

What to do if you suspect someone is suffering from an anaphylactic reaction.

Instructions for use of AAIs are clearly printed on the device itself.

The guidance below is taken from the NHS (<https://www.nhs.uk/conditions/anaphylaxis/>).

If someone has symptoms of anaphylaxis, you should:

- **use an adrenaline auto-injector if the person has one** – but make sure you know how to use it correctly first
- **call 999 for an ambulance immediately (even if they start to feel better)** – mention that you think the person has anaphylaxis
- **remove any trigger if possible** – for example, carefully remove any wasp or bee sting stuck in the skin
- **lie the person down flat** – unless they're unconscious, pregnant or having breathing difficulties
- **give another injection after 5-15 minutes** if the symptoms don't improve and a second auto-injector is available

Staff should call the Medcentre as soon as practicable, but after calling 999, if they think someone is suffering from an anaphylactic reaction.

DIABETES

Most people with diabetes manage their condition well with diet and/or self-administered insulin. Sometimes sugar levels may increase or drop and the patient needs urgent first aid. These conditions are called hypoglycaemia (low blood sugar levels) and hyperglycaemia (high blood sugar levels).

Symptoms and signs – Not all may be present:

Hypoglycaemia:

extreme tiredness and loss of concentration
severe thirst
abdominal pain nausea or vomiting
dizziness and loss of coordination
erratic or argumentative behaviour
rapid loss of consciousness if not treated promptly
persistent headache
pale or sweaty skin
can seem drunk

Hyperglycaemia:

Increased thirst and/or hunger
Frequent urination
Sugar in your urine
Headache
Blurred vision
Fatigue
Shortness of breath
Fruit-smelling breath (pear drops)
Dry mouth
Additionally, stomach pain, nausea, vomiting, and confusion

1. If the patient is **unconscious**, support the patient on their side and call 999 for an ambulance. Then call the Medcentre (term-time) or the First Aider. Do not attempt to feed the patient.
2. If **conscious**, see if the patient can check their blood sugar level and act appropriately (e.g. inject insulin) or give the patient nourishment as described below and call the Medcentre (term-time) or the First Aider. If the patient is still fully conscious, has low blood sugar and is able to swallow, give a sweetened drink, chocolate or glucose sweets to suck – an improvement usually occurs within minutes. If no improvement or deteriorating, call 999 for an ambulance. When the patient is more alert, offer a more substantial carbohydrate meal of a sandwich /toast or crisps/biscuits/ fruit etc. A Doctor should see the patient as soon as possible. Give frequent reassurance during recovery because the patient may be confused.

ASTHMA

Symptoms and signs – Not all may be present

- Breathlessness and difficulty speaking more than a few words without a gasp of air
 - Wheezing
 - Persistent cough, often moist and ‘rattling’
 - poor skin colour, especially blueness of lips and fingertips
 - obvious difficulty breathing
1. Help the Patient to rest and be calm. Help the patient into a position of greatest comfort. Usually this is sitting upright, leaning forward with arms resting on a table.
 2. Assist with medication. Help the patient take any ‘reliever’ medication they have (normally a blue coloured inhaler). If a spacer is available, the patient should use it to take the medication, one puff at a time. Give several puffs of the medication and then repeat this dose after about 5 minutes if no improvement has occurred. If the patient has no medication or the medication is having no effect – call 999 for an ambulance. Then call the Medcentre (term-time) or the First Aider. Continue to assist the patient with puffs of inhaler every 5 minutes until an ambulance arrives.

EPILEPSY

The most common cause of a fit is epilepsy. Other reasons are: a head injury, some brain damaging diseases, low oxygen or glucose levels in the brain, some illegal drugs, poisons or alcohol.

Signs of epilepsy will be sudden unconsciousness, convulsive movements and rigidity and arching of the back. Breathing may become difficult or cease. There may be loss of bladder and bowel control. Usually after a few minutes the muscles will start to relax and breathing becomes normal. Consciousness is recovered but they may be dazed, confused and drowsy.

1. Protect the patient from injury. Ease their fall if possible, make space around them, clear bystanders. If possible, protect their head with soft clothing underneath it, loosen clothing around the neck. Note the time the seizure started and finished.
2. When the seizure has finished, open airway and check breathing, place in recovery position if breathing. If not, be prepared to perform CPR.
3. If any of the following apply, call 999 for an ambulance: if unconscious for longer than 10 minutes; if the seizure is longer than 5 minutes; if they are having their first ever seizure or having repeated seizures; if there is no known reason for a seizure.
4. Otherwise please call the Medcentre (term-time) or First Aider

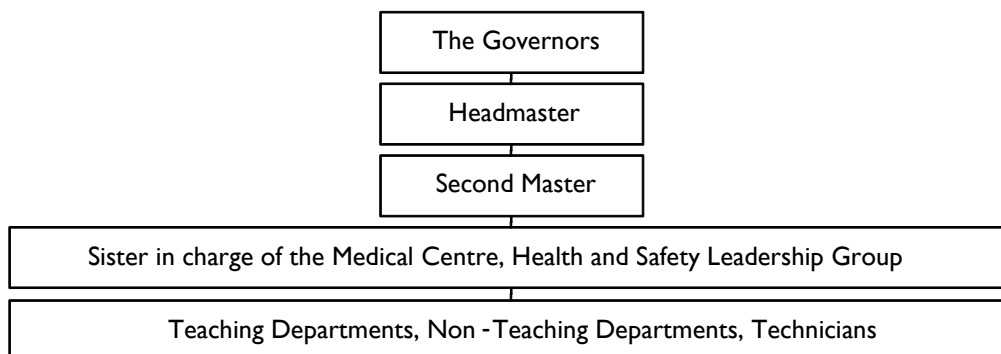
AREAS OF RESPONSIBILITY

Term-time

Responsibility for First Aid lies with the School Governors, but is delegated through the Headmaster to the nominated and trained First Aiders who, together with the Medical Centre Sisters, are the 'Suitable Persons' as defined in the Regulations and ensure that, together with other trained staff, the School provides the required number of trained personnel as stipulated in the Regulations. The Regulations also identify other Duties of the Employer to their staff, including:

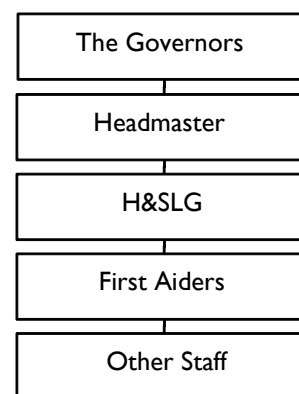
- The provision of First Aid equipment (including first aid kits);
- The provision of First Aid facilities, i.e. a room suitable for first aid and treatment (the Medical Centre and the Sports and Media Centre);
- Notification of the above provisions to all staff;
- Ensuring that Heads of Departments holding the notified First Aid equipment maintain their upkeep and stock;
- Record-keeping of all actual and potential incidents and their evaluation;
- Recording of all staff training and the need for refresher courses; and
- Identification of areas of 'Specific Hazard' and ensuring that adequate training and facilities are available for these.

The Headmaster’s Health and Safety Advisor and the Safety and Security Officer carry out the above duties. Areas of “Specific Hazard” will be in liaison with the appropriate Head of Department. Thus, the lines of responsibility are as follows:



Holiday Time

As for term-time, but the Medical Centre is closed. The official 'First Aiders' for this 'place of employment' during School holidays and half terms will be those designated as trained First Aiders. Suitable facilities will be provided in the Lowry complex as it can afford privacy, access to necessary facilities and it is close to Reception and the Porters’ Lodge. The name of the duty First Aiders will be available from Reception. Records will be kept by the Safety and Security Officer and shared with the Headmaster’s Health and Safety Advisor at the beginning of each term, as appropriate. The lines of responsibility are as follows:



Special Hazards and Risk Assessments

The Head of each teaching and non-teaching Department maintains a current Assessment of Risk for all activities and First Aid requirements, if any. Copies of these are kept with the Health and Safety Advisor for the Houses and teaching departments, and the Safety & Security Officer for the administrative and support departments.

Evaluation and monitoring

Evaluation of incidents will be by the Health and Safety Advisor(s) and / or the Safety and Security Officer in liaison with the Medical Centre Sister, as events dictate or annually if otherwise. Specific areas of responsibilities for these two officers are outlined in the main Health and Safety Policy.

Evaluation of this document and updating of the School's provision and procedures will take place towards the end of each academic year, unless events dictate otherwise.

DATA PROTECTION

Personal information supplied to the School will not be disclosed to other parties outside Tonbridge School in accordance with our Privacy Notice which is available on our website.

CURRENT PERSONNEL

School Doctors	Dr R Claxton Dr J Moore
Medical Centre Sister-in-Charge	Clare Moore
Medical Centre Sisters	Heather Palin Anne-Marie Perera-Slater Emma Leisinger Jane Brown Sandra Barber
Headmaster's Health & Safety Advisor	Chris Morgan
School Safety and Security Officer	Barry Evans

ANNEX I: Part I**First Person on Scene (Intermediate - 30 hours)**

Barry Evans (Safety and Security Officer) 18/06/17

First Aid at Work (FAW - 18 hours)

Kayleigh Brightman (Premises) 31/07/2017

Cherry Ann Brogan (Catering) 31/07/2017

Abigail Louise Dawson (Premises) 31/07/2017

Alexandra Hadaway (Administration) 31/07/2017

Monica Morvan (Classroom Support) 31/07/2017

Matthew Newlands (Classroom Support) 31/07/2017

Joseph Venus (Premises) 31/07/2017

Jonathan Waight (Classroom Support) 31/07/2017

Basic Life Support (BLS - 4 hours)

Nicola Buckner (Welfare) 18/05/2018

Nicola Butler (Welfare) 18/05/2018

Wendy Challis (Welfare) 15/05/2018

Elizabeth Hamilton (Welfare) 18/05/2018

Anna Vallerie Hughes (Welfare) 18/05/2018

Sarah Lamprell (Welfare) 18/05/2018

Clair Miller (Welfare) 15/05/2018

Heather Palin (Welfare) 15/05/2018

Catherine Parsons (Welfare) 18/05/2018

Nicola Pye-Finch (Welfare) 18/05/2018

Sarah Roberts (Welfare) 18/05/2018

Paula Suzanne West (Welfare) 15/05/2018

Maxine Williams (Welfare) 15/05/2018

Phillipa Wood (Premises) 18/05/2018

Academic First Aid (ACAFA - 2 hours)

Mark Ackroyd (Academic Teaching) 07/01/2019

Fian Andrews (Academic Teaching) 07/01/2019

Timothy Ansdell (Academic Teaching) 17/01/2019

Christopher Ashurst (Academic Teaching) 07/01/2019

Graham Barnes (Academic Teaching) 17/01/2019

Christopher Battarbee (Academic Teaching) 07/01/2019

Kim Bellward (Welfare) 31/08/2018

William Biddle (Academic Teaching) 07/01/2019

Jonathon Blake (Academic Teaching) 07/01/2019

John Bleakley (Academic Teaching) 05/02/2018

Elliot Bonnell (Premises) 07/01/2019

Lucy Bradley (Administration) 07/01/2019

Janine Brent (Classroom Support) 07/01/2019

Steven Leonard Brent (Premises) 07/01/2019

Gavin Bruce (Academic Teaching) 07/01/2019

James Burbidge (Academic Teaching) 07/01/2019

William Burnett (Academic Teaching) 07/01/2019

Richard Burnett (Academic Teaching) 17/01/2019

Peter Carpenter (Academic Teaching) 07/01/2019

Benjamin Cawston (Classroom Support) 31/08/2018

Corinne Clugston (Academic Teaching) 07/01/2019

Adam Cooke (Academic Teaching) 07/01/2019

David Cooper (Academic Teaching) 07/01/2019

Rhys Crane (Classroom Support) 17/01/2019

Richard Day (Academic Teaching) 07/01/2019

Vanessa Hadfield (Classroom Support) 07/01/2019

Sophie Hall (Administration) 07/01/2019

Philip Deakin (Academic Teaching) 17/01/2019

David Dickinson (Academic Teaching) 07/01/2019

Fiona Dix Perkin (Academic Teaching) 07/01/2019

Julian Dobson (Academic Teaching) 07/01/2019

Toby Duncan (Academic Teaching) 07/01/2019

Simon Dungate (Academic Teaching) 07/01/2019

Andrew Edwards (Academic Teaching) 07/01/2019

Barry Evans (Safety & Security Officer) 07/01/2019

Richard Evans (Academic Teaching) 23/01/2019

Samuel Farmer (Academic Teaching) 07/01/2019

Thomas Fewster (Academic Teaching) 07/01/2019

Gregory Fisher (Academic Teaching) 07/01/2019

James Fisher (Academic Teaching) 07/01/2019

Ralph Fleming (Academic Teaching) 07/01/2019

Mark Forkgen (Academic Teaching) 07/01/2019

Russell Freeman (Academic Teaching) 07/01/2019

Keith Froggatt (Academic Teaching) 07/01/2019

Luis Fuentes Olea (Academic Teaching) 07/01/2019

Graeme Gales (Academic Teaching) 07/01/2019

Jadeine Gent (Academic Teaching) 07/01/2019

John Gibbs (Administration) 07/01/2019

Teresa Gilbert (Catering) 07/01/2019

Emily Glass (Academic Teaching) 07/01/2019

Hugh Grant (Academic Teaching) 07/01/2019

Josie Green (Academic Teaching) 17/01/2019

Andy Pruvost (Academic Teaching) 07/01/2019

Prem Sing Rana (Premises) 17/01/2019

ANNEX I: Part 2**Academic First Aid (AFA - 2 hours) Continued**

Jonathan Harber (Academic Teaching) 07/01/2019	Camilla Read (Academic Teaching) 07/01/2019
Stefan Hargreaves (Academic Teaching) 07/01/2019	Kim Reeves (Administration) 07/01/2019
Richard Hartley (Academic Teaching) 07/01/2019	Adam Reid (Academic Teaching) 17/01/2019
Christopher Henshall (Academic Teaching) 07/01/2019	Nicholas Rendall (Academic Teaching) 07/01/2019
Elizabeth Hevey (Library) 07/01/2019	John Richards (Academic Teaching) 07/01/2019
Richard Hoare (Academic Teaching) 07/01/2019	Paul Ridd (Academic Teaching) 07/01/2019
Andrew Hopkinson (Premises) 17/01/2019	Melanie Robinson (Academic Teaching) 07/01/2019
Paul Huxley (Academic Teaching) 07/01/2019	Fernando Rodriguez (Classroom Support) 07/01/2019
Ian Jackson (Academic Teaching) 07/01/2019	Anna Rogers (Careers) 17/01/2019
Sholto Kerr (Academic Teaching) 07/01/2019	Ishmael Roslan (Academic Teaching) 07/01/2019
Jeremy King (Academic Teaching) 07/01/2019	Toby Sampson (Academic Teaching) 07/01/2019
Portia King (Administration) 07/01/2019	Eleazar Sanchez (Classroom Support) 17/01/2019
Veryan Larmour (Administration) 07/01/2019	Rupert Scarratt (Academic Teaching) 07/01/2019
Shirley Lauryn (Classroom Support) 07/01/2019	Adrian Schweitzer (Academic Teaching) 07/01/2019
William Law (Academic Teaching) 07/01/2019	Christopher Scott (Classroom Support) 07/01/2019
Christopher Lawrence (Academic Teaching) 07/01/2019	Stuart Seldon (Academic Teaching) 07/01/2019
Jamie Lawson (Academic Teaching) 07/01/2019	John Shafer (Academic Teaching) 07/01/2019
Andrew Leale (Academic Teaching) 07/01/2019	Belinda Jayne Shepherd (Administration) 07/01/2019
Nicholas Lord (Academic Teaching) 07/01/2019	Glenn Shorter (Premises) 17/01/2019
David Love (Classroom Support) 07/01/2019	Emma Sim (Media) 07/01/2019
Yam Bahadur Rana Magar (Premises) 07/01/2019	Adam Sixsmith (Academic Teaching) 07/01/2019
David Makey (Classroom Support) 07/01/2019	Scott Sneddon (Academic Teaching) 07/01/2019
Deirdre McDermot (Academic Teaching) 07/01/2019	Robert Stephen (Academic Teaching) 17/01/2019
Lindsay McDonald (Academic Teaching) 07/01/2019	James Storey-Mason (Academic Teaching) 07/01/2019
Alastair McGilchrist (Academic Teaching) 23/01/2019	Colin Swainson (Academic Teaching) 07/01/2019
Hayley McLintock (Classroom Support) 07/01/2019	Henry Swales (Academic Teaching) 07/01/2019
Hannah Moorhouse (Events) 07/01/2019	David Tennant (Administration) 07/01/2019
Christopher Morgan (Academic Teaching) 07/01/2019	Vesh Thapa (Premises) 07/01/2019
Kay Moxon (Academic Teaching) 07/01/2019	Julian Thomas (Academic Teaching) 07/01/2019
Vadim Myslov (Academic Teaching) 22/01/2019	Christopher Thompson (Academic Teaching) 07/01/2019
James Nicholls (Academic Teaching) 07/01/2019	Rochelle Thomson (Academic Teaching) 07/01/2019
Robert Oliver (Academic Teaching) 07/01/2019	Lawrence Thornbury (Academic Teaching) 07/01/2019
Andrew Oxburgh (Classroom Support) 07/01/2019	Joseph Venus (Premises) 17/01/2019
Joe Painter (Academic Teaching) 07/01/2019	Leo Walsh (Academic Teaching) 07/01/2019
Mathew Parker(Commerical & Ops Director) 07/01/2019	Christopher Walker (Academic Teaching) 07/01/2019
Thomas Pavie (Classroom Support) 07/01/2019	Maria Wallace (Business Development Manager) 07/01/2019
John Pearson (Academic Teaching) 07/01/2019	Zi Wang (Academic Teaching) 07/01/2019
Andrew Pearson (Academic Teaching) 07/01/2019	Jessica Watson-Reynolds (Academic Teaching) 07/01/2019
Rebecca Peek (Catering) 07/01/2019	Bronwyn Waugh (Academic Teaching) 07/01/2019
David Peters (Academic Teaching) 07/01/2019	Nicholas Waywell (Academic Teaching) 07/01/2019
David Pinker (Academic Teaching) 07/01/2019	Mark Weatheritt (Academic Teaching) 07/01/2019
Sarah Pinto del Rio (Academic Teaching) 07/01/2019	Andrew Whittall (Director Tonbridge Society) 07/01/2019
Camille Piton (Classroom Support) 07/01/2019	David Williams (Academic Teaching) 07/01/2019
Frances Potter (Premises) 07/01/2019	Huw Williams (Academic Teaching) 07/01/2019
Christopher Powell (Academic Teaching) 07/01/2019	Jonathan Woodrow (Academic Teaching) 07/01/2019
Helen Precious (Classroom Support) 07/01/2019	Charles Wright (Academic Teaching) 07/01/2019
James Edwin Priory (Academic Teaching) 07/01/2019	Justin Wu (Academic Teaching) 07/01/2019
Helen Clare Priory (Classroom Support) 31/08/2018	Xiang Yu (Academic Teaching) 07/01/2019

ANNEX I: Part 3**Outdoor First Aid (2 Day)**

Mark Ackroyd (13/01/2019)

Graham Barnes 13/01/2019

Greg Fisher (13/01/2019)

Natalia Gerard (13/01/2019)

Chris Henshall (13/01/2019)

Patrick North (13/01/2019)

John Shafer (13/01/2019)

Jessica Watson-Reynolds (13/01/2019)

Emergency First Aid at Work (EFAW - 6 hours)

Jonathan Bartlett (Premises) 25/08/2017

Helen Chappenden (Theatre) 25/08/2017

Pietro Greco (Premises) 25/08/2017

Andrew Hopkinson (Premises) 25/08/2017

Wesley Laker (Premises) 25/08/2017

Katherine Portman Smith (Theatre) 25/08/2017

Sila Rana (Porters) 25/08/2017

Kim Reeves (Administration) 25/08/2017

Ramona Szalczinger (Classroom Support) 25/08/2017

Vesh Thapa (Premises) 25/08/2017

ANNEX 2: FIRST AID TRAINING

<p><u>Academic First Aid (AFA – 2hrs)</u></p> <p><i>All academic staff on induction. Mandatory annual refresher.</i></p> <ul style="list-style-type: none"> • DRSABCD • Barriers • Hand washing and gels • Airway management • CPR – adult/child (theory and practical) • Cardiac arrest • AED introduction • Choking adult/child • Allergies • Asthma • Epipens • Medical Centre • Boys with head injury • Reporting 	<p><u>Basic Life Support (BLS – 4hrs)</u></p> <p><i>House Matrons. Medical Centre Assistants.</i></p> <p><i>Valid 3 years.</i></p> <ul style="list-style-type: none"> • DRSABCD • Chain of survival • Barriers • Hand washing and gels • Initial assessment • Airway management • Recovery Position • Cardiac arrest • CPR – adult/child (theory and practical) • AED • Choking adult/child • Drowning • Burns • Allergies • Asthma • Epipens • Medical Centre • Boys with head injury • Reporting
<p><u>Emergency First Aid at Work (EFAW - 6hrs)</u></p> <p><i>Externally accredited. Valid 3 years.</i></p> <ul style="list-style-type: none"> • Roles & responsibilities of first aider • DRSABCD • Casualty assessment • Unresponsive casualty • Airway management • CPR – (theory & practical) • Recovery Position • Choking adult/child • External minor bleeding • Minor injuries • Shock • AED • Reporting 	<p><u>First Aid at Work (FAW – 18hrs)</u></p> <p><i>Externally accredited. Valid 3 years.</i></p> <ul style="list-style-type: none"> • Incident assessment • Roles & responsibilities of first aider • DRSABCD • Casualty assessment • Unresponsive casualty • Airway management • CPR – (theory & practical) • Recovery Position • Choking adult/child • Internal/External bleeding • Minor injuries • Shock • AED • Secondary survey • Injuries to bones, muscles and joints

	<p align="center"><u>First Aid at Work (FAW – 18hrs)</u> <u>(Cont'd)</u></p> <p><i>Externally accredited. Valid 3 years.</i></p> <ul style="list-style-type: none"> • Head or Spinal injury • Chest injury • Burns & Scalds • Eye injury • Poisoning • Reporting
<p><u>First Person on Scene (FPOSi – 30hrs)</u></p> <p><i>Externally accredited. Valid</i></p> <ul style="list-style-type: none"> • Scene safety • Incident management including triage • Patient assessment • Advanced trauma and medical emergency management • Management of catastrophic bleeding (including tourniquet & Quick Clot) • Direct & indirect treatment of bleeding • Advanced airway management • Respiratory assessment • Management of breathing difficulties • Basic and Intermediate life support • CPR • AED • Bag Valve Mask • Oxygen therapy • Cannulation • Extremes of temperature (hypothermia, heat stroke/exhaustion) • Assisting emergency services 	<p><u>National Pool Lifeguard Qualification (NPLQ)</u></p> <p><i>Nationally accredited.</i></p> <ul style="list-style-type: none"> • Continuation training each month • CPR • AED • 2 training sessions held per month • Unable to perform role unless training attended <p>Additional training and competency test required if compulsory missed</p>
<p><u>Nursing & Midwifery Council</u></p> <p><i>National registration. Term-time only.</i></p> <ul style="list-style-type: none"> • Qualified Nurse • 450 Practice hours required • CPR • AED • CPD • Must maintain registration 	<p><u>Outdoor First Aid (OFA – 16 hrs)</u></p> <p><i>Externally accredited. Valid 3 years.</i></p> <ul style="list-style-type: none"> • Action & priorities in an emergency • Primary and secondary survey • Unconscious casualty • Basic Life Support (Adult and Child CPR) • AED • Choking adult/child • Heart Attack • Stroke • Anaphylaxis

	<p style="text-align: center;"><u>Outdoor First Aid (OFA – 16 hrs)</u> <u>(Cont'd)</u></p> <ul style="list-style-type: none">• Diabetes• Seizure• Fractures• Minor and major bleeding• Head injuries• Spinal injuries• Hypothermia and Hyperthermia
--	---