

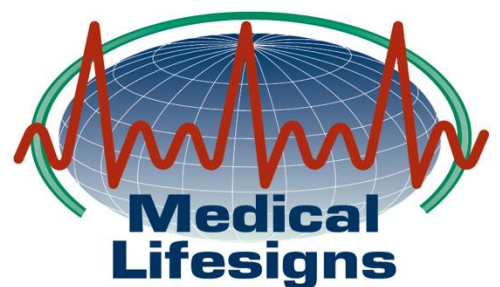


Providing Safe, Socially Distanced First Aid Training

COVID-19 UPDATE

Version: June 2020

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This is a fluid document and will be updated whenever new guidance becomes available in this dynamic situation.

Class induction process

Upon arrival, the tutor is to screen all candidates and exclude anyone exhibiting COVID-19 symptoms which are:

- a new continuous cough and/or
- a temperature $>37.8^{\circ}\text{C}$ and/or
- a loss of taste/smell.

If you have the ability to check temperatures safely and non-invasively, do so.

Classroom set up

Candidates must be seated **2 metres** apart. This is highly likely to determine the maximum class size, so the venue must be assessed, and the maximum class size ascertained prior to organising the course.

Check that no Candidate is in a situation where they should be self-isolating (e.g. a family member has had symptoms, or the Candidate should be shielding as they are in an at-risk group). Exclude from the course as necessary.

UPON ARRIVAL, ask all Candidates to thoroughly sanitise their hands. Instruct them that if they need to cough/sneeze this should be done into a tissue that is disposed of immediately. Failing that they should cough into a bent elbow and NEVER cough/sneeze without covering their mouth/nose. If someone coughs on their hand or uses a tissue, they should use alcohol sanitizer immediately.

Supervise closely to ensure that everyone adheres to this throughout the course

Show Candidates the below videos on how COVID-19 spreads and how to wash your hands:

<https://youtu.be/1APwq1df6Mw>

<https://www.youtube.com/watch?v=aGJNspLRdrc>

Explain clearly that no one should touch their mouth, nose or eyes unless they have just washed their hands or sanitised.

During the course

You must provide sufficient alcohol hand sanitiser in the classroom for Candidates throughout the entire course and explain what facilities are available for hand washing.

Use as many manikins as possible to minimise sharing (ideally one per candidate) and keep one manikin to the same small group of Candidates throughout the course to prevent the possibility of course-wide infection spread.

Prior to CPR practise, explain to Candidates the protection that is in place to prevent infection during CPR practise.

At the end of every theory session, ask Candidates to sanitise or wash their hands.

Before and after each practical session, ask Candidates to sanitise or wash their hands.

The Centre must ensure that 2 meters of physical distancing is maintained between all Candidates and between Candidates and Trainers unless relevant close contact (less than 2m distance) is absolutely necessary for teaching or assessment purposes.

Personal Protective Equipment (PPE)

Face masks – Candidates should be trained in the correct use of 3-ply civilian face masks and BOTH people must wear them during any close contact <2m during practise/assessment. If civilian 3-ply masks become unavailable due to supply chain demands, you must adjust assessments to maintain 2 meters physical distancing as detailed below.

Gloves – We are aware that gloves are very difficult to source at the present time and we are conscious that it is not appropriate to deplete stocks that are required for healthcare settings. Therefore, an acceptable alternative is to sanitise hands immediately before and after any close contact practise/assessment. The Candidate should verbalise that they would wear protective gloves for the procedure before commencing.

CPR

Physical distancing must be maintained during CPR practise, so the Candidate should act as a solo rescuer.

You must carefully follow the manikin hygiene procedures detailed in this document.

The skill of providing rescue breaths must still be included in CPR training and assessment, however adaptations to protocols that ensure the safe performance of first aid during the current COVID-19 outbreak should also be taught.

Unconscious Casualty

1. To minimise close contact, Candidates must be assessed performing the primary survey part of the assessment on a manikin – Candidates **MUST NOT** place their ear close to another Candidate's mouth, even when both parties are wearing a face mask.
2. To minimise repeated close contact, during initial practise, Candidates should practise placing themselves into the recovery position.
3. For the recovery position assessment, the Candidate must place another Candidate into the recovery position. BOTH Candidates must wear 3-ply civilian face masks during the procedure.
4. GLOVES – Whilst the supply chain of gloves remains affected, it is acceptable for Candidates to sanitise hands immediately before and after the procedure. The Candidate should verbalise that they would "wear protective gloves" before commencing.
5. FACE MASKS – civilian face masks are currently available. If they become unavailable the assessment can take place with the following adjustment: The Candidate should verbalise how they would place a casualty into the recovery position and demonstrate this by placing themselves into that position. A professional discussion can follow to ensure the trainer is confident that the Candidate's knowledge and skills meet the assessment requirements.

Choking Casualty

Candidates should sanitise their hands before and after demonstrations. The Candidate should demonstrate back blows and the correct hand positioning for abdominal thrusts on a manikin and wipe down any shared equipment between Candidates. A professional discussion can follow to ensure the trainer is confident that the Candidate's knowledge and skills meet the assessment requirements. We recommend against the shared wearing of choking vests.

Wounds and Bleeding

The usual assessment for wounds and bleeding can take place if PPE requirements are adhered to. The Candidate should sanitise hands before and after touching any shared equipment and new sealed bandages should be provided for each Candidate. If face masks become unavailable the following adaptations can be implemented:

- The Candidate can demonstrate applying a bandage to themselves – on a leg wound if necessary, followed by placing themselves in the appropriate position to treat shock. Alternatively, a head wound on a manikin can be simulated. A professional discussion can follow to ensure the trainer is confident that the Candidate's knowledge and skills meet the assessment requirements.

Assessment adjustments to allow for physical distancing

Slings The usual assessment for fractures can take place if PPE requirements are adhered to. Clean slings should be provided for each Candidate. If face masks become unavailable the following adaptations can be implemented:

- The Candidate can demonstrate how their own arm would sit into a support and elevated sling by placing the triangular bandage on their own arm. In replacement of tying the sling behind their neck, it is acceptable for them to hold the ends of the sling tight so they can show where the sling would sit and state 'I would tie it in this position'.

C-Spine/MILS

- To minimise close contact, Candidates must practise and be assessed performing Manual In-Line Stabilisation (MILS) on a CPR manikin. Candidates must avoid placing their head in close proximity to another Candidate, even when both parties are wearing a face mask.
- To minimise repeated close contact, during initial practise, Candidates should practise placing themselves into the spinal recovery position.

- For the spinal recovery position assessment, the Candidate should place another Candidate into the spinal recovery position. BOTH Candidates must wear 3-ply civilian face masks during the procedure.
- GLOVES – Whilst the supply chain of gloves remains affected, it is acceptable for Candidates to sanitise hands immediately before and after the procedure. The Candidate should verbalise that they would “wear protective gloves” before commencing.
- FACE MASKS – civilian face masks are currently available. If they become unavailable due to supply chain issues, the assessment can take place with the following adjustment: The Candidate should verbalise how they would place a casualty into the spinal recovery position and demonstrate this by placing themselves into that position.

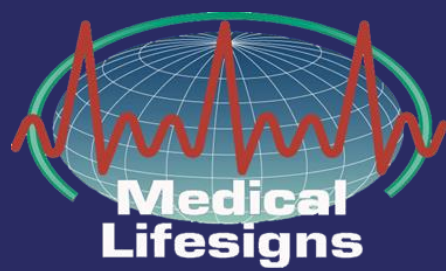
A professional discussion can follow to ensure the trainer is confident that the Candidate's knowledge and skills meet the assessment requirements.

Secondary Survey

The secondary survey must be performed on a 'conscious casualty'. The casualty and the 'First Aider' can maintain 2m physical distancing and the First Aider should perform the head to toe assessment verbally, speaking with the casualty to ascertain if there are any identifiable injuries. During the COVID-19 outbreak, it is acceptable for the casualty to feel their own head/neck for bumps/tenderness/ injury, enabling the survey to remain contact free and physically distanced. If Candidates do approach each other within 2m, PPE requirements as discussed above must be observed.

Management of Anaphylaxis

The Candidate can demonstrate how to administer a 'trainer' Adrenaline Auto Injector on their own thigh before placing themselves into the correct casualty positioning for anaphylactic shock. A professional discussion can follow to ensure the trainer is confident that the Candidate's knowledge and skills meet the assessment requirements. The Candidate should sanitise hands before and after touching any shared equipment. Use alcohol/sanitising wipes on the trainer Auto Injector between Candidates.



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