

## Providing safe and socially distanced first aid training during COVID-19

This guidance document has been created to help you to design a safe course leading to any of Highfield's first aid qualifications, including paediatric first aid, during this period.

This is a live document and will be updated whenever new evidence or guidance is released.

### First Aid AO Forum guidelines

Training must only take place where this is permissible in accordance with the UK Government and devolved administrations or regional restrictions. However, where training takes place, the following guidance must be followed.

- A training provider must risk assess their training delivery and mitigate all risks of possible spread of COVID-19.
- A training provider must design lessons to ensure that a distance of 2m is maintained between students and between the students and trainers unless close contact is absolutely necessary for teaching or assessment purposes. Sensible adaptations to training and assessment activities must be introduced to achieve this.
- A training provider must ensure appropriate handwashing facilities and/or alcohol hand sanitisers are available for use as learners enter and exit the training room and throughout their time in the classroom.
- Where close contact is absolutely necessary and it is teaching and assessment related to a situation where a first aider would be expected to wear PPE, PPE must be used.
- A training provider must have in place a process for preventing those with possible COVID-19 symptoms (fever, a new cough or loss of smell/taste) from entering the classroom. They must also have in place a process to manage instances of people who develop symptoms during the delivery of any training.
- All equipment that is used by learners must be thoroughly cleaned before use by an individual learner.
- The skill of providing rescue breaths **may** 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. Guidance must be supported by a responsible body of medical opinion and the Resuscitation Council UK.

<https://www.resus.org.uk/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/>

This statement has been adapted to provide instructions directly to centres for the purpose of delivering regulated first aid qualifications during the COVID-19 pandemic. The original FAQP statement can be found here: <http://www.firstaidqualifications.org.uk/wp-content/uploads/2020/06/FAQP-statement-030620.pdf>

**Update February 2021:**

The following statement has been agreed between the First Aid Quality Partnership.

**Practical demonstration and assessment of Rescue Breaths while  
COVID-19 transmission remains high**

In response to the increased prevalence of asymptomatic COVID-19 cases and the increased transmission of the new variants, the FAQP and HSE supports the position of Resuscitation Council UK that practical demonstration of rescue breaths may be omitted from first aid training courses, as a precautionary measure while COVID-19 transmission rates remain high.

Specifically;

- If a training provider, a trainer, a learner or an employer is concerned about the removal of a face covering in order to demonstrate rescue breaths, the learner(s) may demonstrate chest compressions only for adult resuscitation. This will not affect the validity or duration of certification, however attendance on annual refresher training is strongly recommended.
- There is good evidence that rescue breaths form an essential part of Cardiopulmonary Resuscitation particularly in children, infants and those who have drowned. The benefits of teaching rescue breaths to those who have a duty to provide first aid to these groups far outweighs the extremely small theoretical risk of transmission in the classroom whilst practising this skill. For this reason, rescue breaths should continue to be taught on paediatric first aid courses, lifeguard training, and with other groups such as emergency service workers.
- The above recommendation is **temporary** and will be reviewed on a regular basis. As the roll out of vaccines continues to grow at a pace and the current peak subsides we intend to reintroduce the mandatory practising, performance and assessment of rescue breaths in the classroom once the prevalence in society subsides.

We will issue further notifications when reviews take place.

## Venue and class size

To align with government guidelines, learners should be seated 2 metres apart. This is highly likely to determine the maximum class size for each training venue. Therefore, the venue must be assessed, and the maximum class size determined before a course is booked and advertised, in accordance with local and government guidelines.

## Before a course starts

On arrival, we recommend that screening of all learners should take place and anyone exhibiting respiratory COVID-19 symptoms should be excluded. This includes:

- a new continuous cough
- a high temperature (greater than 37.8°C)
- a loss of, or change in, your normal sense of taste or smell (anosmia)

If you have the ability to, you may wish to check temperatures of learners safely and non-invasively (with the learner's permission).

Check that no learner is in a situation where they should be self-isolating (e.g. a family member has had symptoms, or the learner should be shielding as they are in an 'at risk' group). If a learner falls into this category, they could be excluded from the course.

## On arrival

Each learner should be provided with an alcohol wipe/gel/sanitiser to thoroughly sanitise hands.

Learners should either bring a face mask with them (or be provided with one) to use during the course delivery and assessment.

Explain clearly that no one should touch their mouth, nose or eyes unless they have just washed their hands or sanitised. Explain what you have available for sanitising hands (e.g. sanitising gel or alcohol wipes) and where they can wash their hands. Continue to supervise this during the course.

Show learners the information and videos below:

### How COVID-19 spreads

Highfield guidance: <https://www.highfieldlearning.com/guidance/coronavirus-covid19>

World Health Organisation video: <https://youtu.be/1APwq1df6Mw>

### How to wash your hands

Handwashing: <https://vimeo.com/395442604>

Hand sanitising: <https://vimeo.com/395442618>

## During the course

Instruct learners that if they need to cough or sneeze at any point, this should be done into a tissue that is disposed of immediately. Failing that, they should cough into a bent elbow (better than a bare hand) and NEVER cough or sneeze without covering their mouth/nose. If someone coughs on their hand or uses a tissue, they should wash their hands, use alcohol wipes/sanitiser immediately. Supervise closely to ensure that everyone adheres to this throughout the course.

At the end of every theory session, ask learners to sanitise or wash their hands. Before and after each practical session, ask learners to sanitise or wash their hands.

The learner should sanitise their hands before and after touching any shared equipment.

Learners should minimise close contact and maintain physical distancing throughout the entire course.

We recommend the use of face masks for learners and tutors.

## Delivery of first aid practise

Prior to practising CPR, explain to the learners the protection that is in place to prevent infection during CPR practise. Added reassurance can be given by replacing the manikin lungs in front of Learners prior to practise.

Give learners information on the following manikin infection prevention and control measures and follow them carefully:

- Frequently replaced lungs/airways/valves
- One-way valves which stop air coming back out of the manikin mouth and direct expired air out of the back of the head via a filter.
- Alcohol/sanitising wipes to be used between Learners, with an emphasis on scrubbing
- Anti-surfactant wipes (e.g. Trionic wipes) used after each session (removes any biofilm as well as disinfecting)

These steps alone are sufficient to prevent infection and that is all that is normally used on most first aid courses. Explain that the Health and Safety Executive and Consultant Microbiologists at NHS England have approved these measures as being sufficient.

However, in the current climate, also issuing each learner with a personal CPR face shield provides double failsafe protection.

- Learners must use the face shield facing the same way up each time. Check the writing is the correct way up, for example.
- Nip the manikin nose as usual through the face shield. Note – you should still use alcohol/sanitising wipes on the manikin between learners, even when using a face shield.

Between learners, use alcohol/sanitising wipes on the manikin face and also wipe the forehead and chest where hands were placed (to prevent hand to surface/surface to hand contamination). Use alcohol/sanitising wipes on the training defibrillator. More than one wipe may be required. Allow the sanitiser/alcohol to dry naturally before the next person uses the manikin.

Keep one manikin and training defibrillator to the same small group of learners throughout the course to prevent the possibility of course-wide infection spread. Use as many manikins and training defibrillators as possible to reduce sharing.

Physical distancing of 2m should be maintained during CPR practise and the learner should, therefore, act as a solo rescuer.

## Permitted assessment adjustments

### CPR

Carefully follow the manikin hygiene procedures detailed in this guidance. Tutors should ensure that learners are fully aware of the RCUK guidance on performing real-life CPR during the COVID-19 pandemic and the protective measures that should be taken:

<https://www.resus.org.uk/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/>

### Update February 2021:

#### Adult First Aid courses

Training and assessment may continue to include rescue breaths provided safety measures have been employed. However, if a training provider, a trainer, a learner or an employer is concerned about the removal of a face covering in order to demonstrate rescue breaths, the learner(s) may demonstrate chest compressions only during assessment of adult resuscitation. This will not affect the validity or duration of certification, however attendance on annual refresher training is strongly recommended and rescue breaths covered at that time.

#### Paediatric First Aid courses

The HSE and DfE **still require rescue breaths to be trained and assessed**. We will update you if this changes.

### Unconscious Casualty

The trainer can demonstrate the recovery position on a learner if both people are wearing face coverings or masks and both sanitise their hands before and after the practical demonstration.

Learners may practice by performing the primary survey on a manikin and placing themselves into the recovery position. Learners should be assessed by placing another person into the recovery position, using suitable PPE, including face masks.

The learner should wash or sanitise their hands before and after touching any shared equipment.

## **Secondary Survey**

The secondary survey should be performed on a conscious person acting as a casualty. The 'casualty' and the learner should maintain 2m physical distance and the learner should perform the head to toe assessment verbally, speaking with the 'casualty' to ascertain if there are any identifiable injuries.

## **Choking Casualty**

Learners should wash or sanitise their hands before and after conducting the demonstration. The learner should demonstrate back blows and the correct hand positioning for abdominal thrusts on a manikin. Wipe down any shared equipment between learners.

## **External Bleeding and Shock**

The learner 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 learner's knowledge and skills meet the assessment requirements.

The learner should wash or sanitise their hands before and after touching any shared equipment and new bandages should be provided for each learner.

## **Slings**

Learners may demonstrate slings on another person if it is felt safe to do so and due to the close proximity, face masks should be used.

Alternatively, the learner 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.' Clean slings should be provided for each learner.

## **Spinal Injuries**

The learner can demonstrate how they would support the head on a CPR manikin or the learner can place themselves into a spinal recovery position. A professional discussion can follow to ensure the trainer is confident that the Learner's knowledge and skills meet the assessment requirements. The learner should sanitise hands before and after touching any shared equipment.

## **Management of Anaphylaxis (where applicable)**

The learner can demonstrate how to administer a 'trainer' Adrenaline Autoinjector (AAI) 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 learner's knowledge and skills meet the assessment requirements.

The learner should sanitise hands before and after touching any shared equipment. Use alcohol/sanitising wipes on the trainer AAI. Allow the sanitiser/alcohol to dry naturally before the next person uses the AAI.