

# COVID-19 SECURE

## Guidance & Actions for Training Rooms / Classrooms



- Information sources: Resus Council UK, NUCO, FAAO, PHE, GOV.UK, HSE
- Document covers guidance for ALL CLASSROOM SETTINGS
- Document supports Children & Adult learners
- Guidance supports Accredited Qualifications and Awareness Sessions

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## **Return to Training for non-essential Learners**

Training must only take place where this is permissible, in accordance with the UK Government and devolved administrations, or regional restrictions.'

**Power Medics** will ensure that they are aware of the COVID threat level before commencing training and will prioritise Government restrictions over the guidance issued by Nuco (First Aid Awarding Organisation).

### **This document is also supported by**

- Covid 19 Secure Document
- Risk Assessment / Venue Check List
- Covid - 19 Secure Risk Assessment
- Venue Hire RA (Client)

Power Medics will re-evaluate all documents and continue to follow guidance in an ever changing environment





## **Power Medics** will ensure that...

- The training provider will risk assess their training delivery and mitigate all risks of possible spread of COVID-19
  - The training provider will design lessons to ensure that there is no close contact between learners and or trainers and a 2m distance is always maintained. Sensible adaptations to training and assessment activities must be introduced to achieve this
  - The training provider will 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
  - The training provider will 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
  - The training provider will have a process in place to be notified, then 'track and trace' other learners if someone on the course develops symptoms within 2 weeks of attending first aid training
  - All equipment that is used by learners must be thoroughly cleaned before use by an individual learner
  - The first aid taught must reflect protocols that ensure the safe performance of first aid during the current COVID-19 outbreak that is supported by a body of medical opinion and the Resuscitation Council UK. This must still include the teaching of rescue breaths
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## **Statement from NUCO, guidelines set by FAAO and Resus Council UK**

The change to the guidance is with respect to the assessment of the recovery position and bandaging. The change requires these to be assessed on a live casualty, if PPE is available, and if the learners are willing. If PPE is not available due to shortages, or the learners are not willing, then we will accept them demonstrating on themselves and verbally confirming each step to the trainer/assessor.

## **Teaching COVID-19 First Aid Protocols**

When delivering 'regular' first aid protocols, you should also teach COVID-19 protocols to your learners. This explains how they should respond, should they have to deal with a casualty who is suspected of having COVID-19. The Resuscitation Council have created the following protocols for first aiders, which you should adopt and teach alongside 'regular' protocols





## **Adult advice**

Because of the heightened awareness of the possibility that the victim may have COVID-19, Resuscitation Council UK offers this advice:

Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives. Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.

If there is a perceived risk of infection, rescuers should place a cloth/towel over the victims mouth and nose and attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.

Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.

If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.

After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative.

They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.





## Paediatric advice

We are aware that paediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child's chances of survival.

However, for those not trained in paediatric resuscitation, the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation.

For out-of-hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur. Therefore, if there is any doubt about what to do, this statement should be used.

It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.





## **Risk Assessment of Venues**

The delivery of the courses have been risk assessed and the guidance above should be followed to meet the outcomes.

Power Medics have risk assessed their venues before starting the course, ensuring they are able to meet these requirements by looking at areas such as:

- Access to the toilets
- Limiting numbers depending on access routes, the size of the training room and the effect on maximum number of learners
- Learner arrival at the venue to ensure social distancing is maintained
- Movement around the venue and building has been considered and suitable measures taken
- Consistant pairing where possible throughout training

## **Track and Trace**

- Organisations in certain sectors should collect details and maintain records of staff, customers and visitors on their premises to support NHS Test and Trace.
  - Power Medics will keep records of learners on file for 21 days, assisting with track and trace where necessary
  - Further information can be obtained upon request of Track and Trace
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