

First Aid Response Education and Training Standard

Mission Statement

"The Pre-Hospital Emergency Care Council protects the public by independently specifying, reviewing, maintaining and monitoring standards of excellence for the safe provision of quality pre-hospital emergency care"

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Version History

(Please visit the PHECC website to confirm current version.)

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Version	Date	Details	
1	May 2014	New Standard approved by Council	
2	May 2018	Revised to include 2017 FAR CPGs, recogntion of FAR by HSA as national standard	
		for occupational first aid training in the workplace.	

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First Aid Response Education and Training Standard

Background

PHECC has designed the First Aid Response (FAR) Standard to offer appropriate training to individuals and groups who require a first aid skill set including cardiac first response. This standard is designed to meet first aid and basic life support (BLS) requirements that a person known as "First Aid Responder" may encounter. The FAR Standard meets the <u>Health and Safety Authority (HSA)</u> requirement for occupational first aid training for the workplace. <u>The Child and Family Agency (TUSLA) guidance</u> also recognises FAR as the standard for child care.

Role and responsibility of a First Aid Responder

A First Aid Responder may be a healthcare practitioner, or a member of the public who has undertaken a First Aid Response course incorporating the Cardiac First Response (CFR) standard. In addition to CFR skills, the First Aid Responder possesses defined skills in the further management of a patient who has become suddenly ill or injured in the pre-hospital environment until the arrival of emergency medical services (EMS). The First Aid Responder is able to assess and manage these patients in accordance with PHECC Clinical Practice Guidelines (CPGs). The First Aid Response Standard adopts a uniform approach to interacting with patients and other emergency medical services in the pre-hospital setting. Finally, First Aid Responders must be able to demonstrate a commitment to the process of continuous responder competence and will be required to maintain their skill levels in First Aid Response including CFR at defined intervals.

First Aid Response Standard Rationale

The First Aid Responder will possess the following general skills. The ability to:

- deal with life threatening or potentially life-threatening conditions in the pre-hospital environment until arrival of emergency medical services
- provide First Aid Response for conditions not thought to be life-threatening but are necessary to prevent further harm before the emergency medical services arrive
- provide pre-hospital First Aid Response in a wide range of environments including home,
 recreational and workplace settings
- display the requisite personal skills including composure, competence and self-confidence while understanding their limitations.

Learning outcomes

There are competencies that students who achieve the First Aid Response Standard are required to demonstrate. Upon completion of a recognised First Aid Response course the student will be able to:

- 1. **Recognise and Assess** the causes and effects of sudden illness and/or injury in a prehospital environment and call for emergency medical services.
- 2. **React** to such pre-hospital emergencies utilising PHECC CPGs.
- 3. **Respond** in a safe, effective, and appropriate manner to such emergencies utilising the First Aid Response skill set and in accordance with PHECC CPGs as part of the pre-hospital continuum of care.



- 4. **Record and Report** actions and interventions taken while responding to and managing such incidents and during handover to emergency medical services.
- 5. **Retain** a caring attitude in their role as First Aid Responders.

The learning objectives in the Standard refer to the management of adults and children unless stated otherwise. Consideration should be given when delivering the course to using 'Plain English' to explain medical or clinical terms for responders who do not regularly interact with the pre-hospital emergency environment.



Framework for the First Aid Response Standard

Learning Outcome	Modules
Recognise and Assess the causes and effects of sudden illness and/or injury in a prehospital environment and call for emergency medical service assistance.	Patient assessment
React to such pre-hospital emergencies, utilising PHECC CPGs.	Incident procedures
Respond in a safe, effective, and appropriate manner to such emergencies utilising the First Aid Response skill set and in accordance with PHECC CPGs as part of the pre-hospital continuum of care.	Cardiac First Response- Community ¹ Common medical emergencies Injury management and shock Care of the unconscious patient Burns and electrical injury care Hypothermia and hyperthermia
Record and Report actions and interventions taken while responding to and managing such incidents and during handover to emergency medical services.	Information management Communications
Retain a caring attitude as First Aid Responders.	The well-being of the First Aid Responder

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¹ The Cardiac First Response Community Standard course is to be completed as part of the First Aid Response Standard.

Learning Outcome 1

Recognise and Assess the causes and	Patient assessment
effects of sudden illness and/or injury in a	
pre-hospital environment and call for	
emergency medical service assistance.	

Patient assessment

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. State the purpose of a Primary Survey and identify when it should be conducted
- 2. State the purpose of a Secondary Survey and identify when it should be conducted
- 3. Identify the key anatomical areas to be examined during a "Survey"
- 4. Describe the procedure for patient assessment primary and secondary
- 5. State the 6 Vital Signs –circulation, breathing, blood pressure (pulse and capillary refill), colour, temperature, and level of consciousness
- 6. State the normal and abnormal characteristics of the 6 vital signs
- 7. Define the terms 'sign' and 'symptom'
- 8. Identify the components of a patient's history based on the mnemonic SAMPLE: <u>Signs & Symptoms, Allergies, Medication, Pertinent medical history, Last oral intake, Event (SAMPLE).</u>

Attitudinal Objectives

At the completion of this module, the student will be able to:

- 1. Recognise and respond to the feelings the patient may experience during examination in a non-judgemental and compassionate manner
- 2. Communicate with empathy during examination to patient/s as well as with family members, friends and bystanders showing appreciation and understanding for the effects of pain and fear.

Skills Objectives

- Demonstrate how to conduct a Primary Survey
- 2. Demonstrate how to conduct a Secondary Survey
- 3. Demonstrate how to obtain a SAMPLE history
- 4. Demonstrate how to record the findings of patient assessment.



Vital Signs assessment tools:

Circulation

pulse palpation – neck and wrist

Breathing

look, listen and feel

Blood Pressure

- capillary refill and radial pulses *Skin Colour* - visual inspection

Temperature

- touch

Level of consciousness

– AVPU: <u>A</u>lert, responds to <u>V</u>oice, responds to <u>P</u>ain, <u>U</u>nresponsive (AVPU)

Vital signs characteristics: normal/not normal – if not normal then:

Circulation

– strong/weak, fast/ slow, regular/irregular

Breathing

– quiet/noisy, fast/slow, laboured/un- laboured, regular/irregular

Blood Pressure

- fast/slow refill, palpable pulses

Colour

- dark/light, flushed, blue, yellow, white

Temperature (skin)

- warm/cool, hot/cold, moist/dry

Level of consciousness

- AVPU



Learning Outcome 2

React to such pre-hospital emergencies	Incident Procedure
utilising PHECC CPGs.	

Incident procedure

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. Outline the reasons and importance of making the 999/112 call
- 2. Describe the importance of scene safety for responders
- 3. State the First Aid Responder's personal responsibility related to personal and scene safety
- 4. List the First Aid Responder's role in the continuum of care
- 5. Outline how to apply the principles of standard infection control precautions e.g. hand washing, glove use and disposal and clinical waste disposal
- 6. List the Care Principles outlined in the PHECC CPG manual.

Attitudinal Objectives

At the completion of this module, the student will be able to:

1. Demonstrate a calm, caring attitude, showing awareness of self-protection and safety.

Skills Objectives

- 1. Demonstrate pre-approach checks
- 2. Demonstrate a safe approach
- 3. Demonstrate good glove disposal and hand washing technique.



Learning Outcome 3

Respond in a safe, effective, and
appropriate manner to such emergencies
utilising the First Aid Response skill set and
in accordance with PHECC CPGs as part of
the pre-hospital continuum of care.

Cardiac First Response - Community Common Medical Emergencies Injury Management and Shock Care of the Unconscious Patient Burns and Electrical Injury Care Hypothermia and Hyperthermia

Cardiac First Response – Community

See the Cardiac First Response (CFR) Community Education and Training Standard.

Common medical emergencies

For the purpose of the First Aid Response Standard common medical emergencies (CMEs) are defined as:

- 1. Inadequate breathing (Asthma)
- 2. Low/high blood sugar (Diabetes)
- 3. Seizures
- 4. Poisoning/overdose
- 5. Fainting
- 6. Cardiac chest pain (Angina)
- 7. Anaphylaxis

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. List the common medical emergencies (CMEs)
- 2. Identify the key manifestations (origin, nature and cause) of each CME
- 3. State the key signs and symptoms of each CME
- 4. Outline methods to assess patients for each CME.

Attitudinal Objectives

- 1. Demonstrate an ability to empathise with the regimes that patients may need to follow for their underlying conditions and be able to describe the risks of stereotyping
- 2. Demonstrate an ability to respond to the needs of patients who have failed to adhere to their usual medication regimes in a non-judgemental and compassionate manner showing appreciation for the effects of fear.



Skills Objectives

At the completion of this module, the student will be able to:

1. Demonstrate how to care for patients who have suffered a CME, according to FAR CPGs.



Injury management and shock

(To include bleeding injury, musculoskeletal injury, spinal injury and shock)

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. State the main types of serious bleeding injuries and causes using CLIPS²
- 2. State the main types of musculoskeletal injuries (fracture, sprains, strains and dislocation) and causes
- 3. Explain hypovolaemic shock, causes and progression
- 4. Describe the care management of bleeding injuries external and internal
- 5. Describe the care management of a nose bleed
- 6. Describe the care management of musculoskeletal injuries
- 7. Describe the care management of suspected spinal injuries
- 8. Describe the care management of shock.

Attitudinal Objectives

At the completion of this module, the student will be able to:

1. Demonstrate an ability to empathise with patients, their friends and families when managing traumatic injury in a non-judgemental and compassionate manner

Skills Objectives

At the completion of this module, the student will be able to:

- 1. Demonstrate how to control external blood loss at various wound sites
- 2. Demonstrate how to manage a patient with internal blood loss
- 3. Demonstrate how to manage soft tissue injuries
- 4. Demonstrate how to immobilise a limb injury any painful, swollen or deformed limb
- 5. Demonstrate how to manage hypovolaemic shock
- 6. Demonstrate how to maintain active spinal motion restriction.

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Care of the unconscious patient

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. List the common causes of an altered level of consciousness
- 2. Describe the difference between each of the 'AVPU' levels
- 3. List the main signs and symptoms of concussion and outline the reason for on-going observation post injury
- 4. List the main signs and symptoms of (cerebral) compression
- 5. Describe the management of a head injured patient
- 6. Describe the management of a suspected spinal injury
- 7. List steps to care for the general well-being of an unconscious patient.

Attitudinal Objectives

At the completion of this module, the student will be able to:

- 1. Demonstrate an ability to empathise with patients who may not appear to be fully conscious, in a non-judgemental and compassionate manner
- 2. Demonstrate an ability to respond to the needs of patients, showing an appreciation for the effects of pain and fear.

Skills Objectives

- 1. Demonstrate how to assess a patient's conscious level
- 2. Demonstrate how to examine a patient's head
- 3. Demonstrate how to manage a patient's airway using the head tilt & chin lift
- 4. Demonstrate how to provide advice to a patient with a suspected spinal injury
- 5. Demonstrate how to care for an unconscious patient's general wellbeing.



Burns and electrical injury care

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. List causes/types of burn
- 2. Describe severity of burn including reference to face, hands, feet and flexion points, perineum (FHFFP) and circumferential burns
- 3. Describe the factors that indicate severity of a burned patient
- 4. Describe the burns potential of electrical injury
- 5. Describe physiological threats associated with burns
- 6. Describe the associated threats resulting from electrical injury
- 7. List the care management for burns including the importance of standard infection control precautions
- 8. Outline why inhalation injuries are common following certain burns injuries.

Attitudinal Objectives

At the completion of this module, the student will be able to:

1. Demonstrate an ability to respond to the needs of patients who have suffered from burns, electrical and related injury/illness showing appreciation for the effects of pain and fear

Skills Objectives

- 1. Demonstrate how to assess the extent of burns injuries
- 2. Demonstrate how to treat burns injuries using equipment listed on CPGs
- 3. Demonstrate an awareness of safety considerations
- 4. Demonstrate the care management of patients with burns



Hypothermia and hyperthermia

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. State the normal range in body temperature
- 2. Describe common causes of overheating (hyperthermia)
- 3. Describe common causes of overcooling (hypothermia)
- 4. List the signs and symptoms of overheating
- 5. List the signs and symptoms of overcooling
- 6. Outline the additional requirements when checking vital signs on a patient that has symptoms of overcooling
- 7. Describe basic treatment methods to avoid progression of heat related conditions.

Attitudinal Objectives

At the completion of this module, the student will be able to:

1. Demonstrate an ability to respond to the needs of patients who have suffered from a heat related condition showing appreciation for the effects of pain and fear

Skills Objectives

- 1. Demonstrate how to care for patients with hyperthermia
- 2. Demonstrate how to care for patients with hypothermia.



Learning Outcome 4

Record and Report actions and interventions	Information management
taken while responding to and managing such	Communications
incidents and at handover to emergency	
medical services.	

Information management

At the completion of this module, the student will be able to include all the required information on an Ambulatory Care Report³ (ACR) in accordance with the PHECC Completion Guide (or other patient care/accident/incident record). This module may be extended to include any subsequent patient care report developed by PHECC as relevant. Note for occupational first aid incidents in the workplace the responder should also refer to their organisations' and/or HSA reporting requirements.

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. Explain the rationale for recording patient health information
- 2. Outline what information is required on the Ambulatory Care Report (ACR) (or other patient care/accident/incident record) and how it should be entered
- 3. Explain the essential elements of a verbal handover report to other pre-hospital First Aid Response teams and members of the EMS.
- 4. Explain the management and storage for ACRs or other patient care/accident/incident record in line with relevant legislation.

Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Understand how recording data contributes to a high standard of patient care
- 2. Explain why documentation should be completed in a timely manner but should not distract from care and communication with the patient.

Skills Objectives

At the completion of this section, the student will be able to:

- 1. Complete an ACR (or other patient care record) for a given patient scenario
- 2. Demonstrate a "hand over" report to a member of the EMS.

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³ The PHECC ACR is used to enhance information management during training. It is acknowledged that alternate patient records and/or occupational first aid incident/accident report forms may be selected and used in training and subsequent practice.

Communications

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. Describe the principle barriers to effective patient and team communication
- 2. State the personal qualities that make an effective therapeutic communicator
- 3. Explain how to seek a patient's consent for treatment.

Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Whilst taking control of an emergency situation, demonstrate a courteous approach toward the patient, their family and bystanders
- 2. Outline the role of the First Aid Responder in the continuum of patient care.

Skills Objectives

- 1. Demonstrate the use of open questioning technique and obtain important and relevant clinical information
- 2. Demonstrate communicating with the EMS services.



Learning Outcome 5

Retain a caring attitude in their performance	The well-being of the First Aid Responder
as First Aid Responders	

The well-being of the First Aid Responder

Objectives

Knowledge Objectives

At the completion of this module, the student will be able to:

- 1. List the role and responsibilities of the First Aid Responder
- 2. List the emotional reactions that a First Aid Responder may experience when faced with trauma, illness, death and dying.
- 3. List the signs and symptoms of critical incident stress (and review the CFR CISM information)
- 4. State the possible steps that the First Aid Responder may take to reduce/alleviate critical incident stress.
- 5. Discuss the relevant legislation relating to the provision of first aid (such as Good Samaritan reference within the Civil Law (Miscellaneous Provisions) Act 2011).

Attitudinal Objectives

At the completion of this module, the student will be able to:

1. Understand the normal responses to trauma, illness, death and dying.

Skills Objectives

No skills objectives



Approval criteria for the Course: First Aid Response

Council set the requirements for submitting an application as well as maintaining status as a PHECC recognised institution in Council Rules. The detailed course approval criteria are described in subsections below. The information supplied by the applicant institution against each of the criteria must satisfy Council that arrangements are in place to provide a high-quality course ensuring the validity of the joint PHECC/recognised institution award in *First Aid Response*.

1. The First Aid Response (FAR) standard incorporates the CFR Community standard:

If course participants are holders of CFR Community certificates, recognition of prior learning may be applied. However, as the retention of CFR skills is known to diminish after time, it is recommended that such students participate fully in the CFR component of the course. If students are CFR Advanced certified, they must attend a separate CFR Advanced course to recertify at that level.

2. Entry Criteria:

There is no specific entry criterion including a minimum age for undertaking the course. However, a course participant should be mature enough to comprehend the knowledge, skills and implications associated with defibrillation and have a maturity to complete assessment to receive certification.

3. Duration:

The duration of a First Aid Response course incorporating the CFR Community standard and assessment shall be no less than 18 contact hours (excluding breaks - averaging 6 hours instruction per day).

4. Ratio:

The instructor student ratio shall not exceed 1:8 for practical skills sessions.

5. Assessment:

Course participants may have their skills formally assessed throughout, or at the end of the course. The timing of this is at the discretion of the instructor. However, both formative and summative assessments should be utilised in course delivery. Skill assessment sheets are developed and published by PHECC. They are available for viewing on the PHECC website. The *Responder Level Examination Handout for Recognised Institutions* (PUB034) should be utilised. The mandatory components are:

- a) Assessment using the PHECC's CFR Community skill assessment sheet and the First Aid Response skills assessment sheets.
- b) A 30-minute, 20 question MCQ written exam; the pass mark is 60%.

6. Remediation:

Should be in-line with the recognised institution's own assessment policy and procedures. Course participants should be supported with remediation efforts.

7. Certification:

Award of joint PHECC/recognised institution *First Aid Response* cards/certificates to successful participants is mandatory. The established naming convention provided by PHECC must be used for these awards. Certification lapses after 2 years. A First Aid Response certificate may be used as evidence of successful completion of a CFR course necessary for entry to other recognised course: e.g. CFR instructor (Community only) or EFR. CFR Community certificates shall not be awarded.



8. Design of the First Aid Response course:

The applicant institution must design the course to:

- a) Balance theory and practice to achieve the learning outcomes (course and domain specific) and competencies specified in the standard.
- b) Utilise a range of teaching/learning strategies providing a balance between presentations, small group interactions, demonstrations, practical and self-directed learning. Electronic learning approaches are welcomed.
- c) Promote a commitment to self-directed and lifelong learning and must be dynamic to reflect ongoing changes in the First Aid Response standard and changes in PHECC Clinical Practice Guidelines (CPGs).

9. Course information:

The applicant institution must provide information as set out in the current application for course approval. Such information includes but is not limited to:

- a) Evidence of recognition of prior learning (RPL) procedure for First Aid Response to support the institution's RPL policy.
- b) Sample lesson plans, timetable and materials to be used.
- c) Assessment and awards procedures for First Aid Response to support the institution's policy.

10. Recertification:

Recertification in First Aid Response is required every 2 years. The duration of the First Aid Response recertification course incorporating the CFR Community standard shall be no less than 12 contact hours including assessment (excluding breaks; averaging 6 hours instruction per day). It is acceptable that the course may be delivered over a reasonable extended period of time (such as several weeks/weekends). Recertification should be designed according to the identification of the training needs of the individuals (ITN) followed by assessment and emphasised by the RI and instructor. Recertification should include at a minimum:

- a) Verification of valid FAR certification
- b) CFR skills practice and skills assessment
- c) FAR skills practice and skills assessment
- d) Provision of clinical updates as necessary i.e. PHECC CPGs at CFR Community and FAR level (this includes consideration of medication updates and equipment)
- e) Documentation/record management updates
- f) An MCQ exam.

The RI may allow a short grace period if the person's FAR certificate has lapsed and they are seeking recertification. However, this grace period should be restricted to extenuating circumstances and be considered on a case by case basis. This decision rests with the RI course director. (PHECC considers a maximum of 30 days to be an appropriate grace period).

Recognition of prior learning (RPL) for existing occupational first aiders:

11. Existing holders of occupational first aid (OFA) certificates may apply to have their qualifications individually assessed by a participating recognised institution in accordance with their recognition of prior learning (RPL) policy and procedures. Recognised institutions may also reserve the right to refuse RPL applications.



- 12. First Aid Response certification by RPL must include at a minimum:
 - a) Verification of valid OFA certification (FETAC/QQI award).
 - b) Provision of FAR clinical instruction in accordance with the standard and CPGs.
 - c) Assessment using the PHECC's CFR Community assessment sheet and other First Aid Response skill assessment sheets.
 - d) A 30-minute, 20 question MCQ written exam; the pass mark is 60%.
- 13. **Awards**: Award of joint PHECC/recognised institution First Aid Response cards/certificates to successful course participants by the recognised institution is mandatory. The established naming convention provided by PHECC must be used for these awards.

Who can teach First Aid Response courses?

- 14. The teaching faculty (instructor) requirement for a First Aid Response course is a First Aid Response instructor.
- 15. The course director requirement for a First Aid Response course is an experienced FAR instructor.
- 16. Tutors/assistant tutor (also facilitators) and EFR instructors are concurrently permitted to teach First Aid Response courses. There is no requirement for tutors/assistant tutors or EFR instructors on the PHECC Register to certify as First Aid Response Instructors. However, they must attain and maintain their CFR Advanced instructor certification.



Approval criteria for the Course: First Aid Response Instructor

Council set the requirements for submitting an application as well as maintaining status as a PHECC recognised institution in Council Rules. The detailed course approval criteria are described in subsections below. The information supplied by the applicant institution against each of the criteria must satisfy Council that arrangements are in place to provide a high-quality course ensuring the validity of the joint PHECC/recognised institution award in *First Aid Response Instructor*.

1. Entry criteria:

- a) Certification in First Aid Response or evidence of PHECC practitioner registration.
- b) Valid CFR instructor certification and this must be maintained.
- 2. Duration: The First Aid Response Instructor (Responder Instructor) Standard is set out in full in the Teaching Faculty Framework. The Responder Instructor Standard includes tuition in instructional methods and a period of supervised teaching practice. The instructional methods component is no less than 2 days/12 hours. The period of supervised teaching practice is not dictated and may be extended until the specific learning outcomes are achieved. The typical pathway is to assist on the first course, part teach the second and deliver a third independently while being monitored.
- 3. **Ratio**: The ratio of instructor trainers to student instructors is 1:6 for practical skill sessions.
- 4. **Assessment**: Evaluation of First Aid Response instructor skills will be undertaken by an instructor trainer using the RI's standard evaluation forms. Assessment must take place as the student instructor progresses through the period of supervised teaching practice.
- 5. **Remediation** should be in-line with the recognised institution's own assessment policy and procedures.
- 6. Certification: Persons who successfully complete the 2-day First Aid Response Instructor course⁴ plus the additional supervised teaching practice and evaluation will be certified as a First Aid Response instructor. Award of joint PHECC/recognised institution First Aid Response Instructor cards/certificates by the recognised institution is mandatory. The established PHECC naming convention for these awards must be used.
- 7. **Design of the First Aid Response instructor course:** The Applicant institution must design the course to:
 - a) Balance theory and practice to achieve the learning outcomes (course and domain specific) and competencies specified.
 - b) Utilise a range of teaching/learning strategies providing a balance between presentations, tutorials, small group interactions, demonstrations, practical and selfdirected learning including electronic learning approaches.
 - c) Promote a commitment to self-directed and lifelong learning and must be dynamic to reflect ongoing changes in the First Aid Response instructor standard and in PHECC Clinical Practice Guidelines (CPGs).
- 8. **Course information:** The applicant institution must provide course information as set out on the current application checklist/form. Such information includes but is not limited to:
 - a) Evidence of recognition of prior learning (RPL) procedures for First Aid Response Instructor candidates to support the institution's RPL policy.

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⁴ The FAR instructor standard (Responder level Instructor standard) is available in full in *PHECC's Teaching Faculty Framework*

- b) Sample lesson plans, timetable and teaching and assessment materials to be used.
- c) Assessment and awards procedures for the First Aid Response Instructor course to support the institution's policy.

Recognition of prior learning (RPL) for existing occupational first aid instructors:

- Existing OFA instructors may apply to have their qualifications individually assessed by a
 participating recognised institution in accordance with their recognition of prior learning
 (RPL) policy and procedures. Recognised institutions may reserve the right to refuse RPL
 applications.
- 10. First Aid Response Instructor certification by RPL should include at a minimum:
 - a) Verification of the OFA instructor certificate (FETAC/QQI award) <u>and</u> CFR instructor certificate
 - b) Assessment of CFR instructor and First Aid Response instructor skills/competencies by a First Aid Response instructor trainer using standard evaluation forms prepared by the institution.
 - c) Provision of clinical updates as necessary i.e. PHECC CPGs at CFR and First Aid Response level.
 - d) A FAR MCQ exam.
- 11. **Awards:** Award of joint PHECC/recognised institution First Aid Response Instructor cards/certificates to successful course participants by the recognised institution is mandatory.

Who teaches (and assesses) First Aid Response instructors?

- 12. Faculty required to teach and recertify First Aid Response instructors are suitably qualified persons having demonstrated appropriate education and experience against PHECC criteria outlined in PHECC's Teaching Faculty Framework. For example, PHECC tutors who have completed suitable 'train the trainer' courses or similar. There is no PHECC award for such individuals known as First Aid Response instructor trainers. Selection of First Aid Response instructor trainers remains the responsibility of senior faculty e.g. a facilitator in a recognised institution.
- 13. First Aid Response instructor trainers must maintain certification in CFR at instructor level and are also required to demonstrate by employment or association an ability to keep current with best practice including PHECC CPGs.

First Aid Response (and CFR) instructor recertification:

First Aid Response instructor and CFR instructor recertification may run concurrently. The approval criteria here permit dual recertification by denoting "(and CFR)"; however, recertification may be undertaken separately.

14. **Recertification of First Aid Response Instructors:** First Aid Response Instructor (and CFR instructor) certification is valid for 2 years. It is the responsibility of every instructor to recertify before their certificate lapses. The recognised institution may allow a short grace period but should be restricted to extenuating circumstances and considered on a case-bycase basis. This decision rests with a course director in a recognised institution. PHECC considers 30 days to be an appropriate/acceptable grace period.



- 15. Recertification courses for First Aid Response Instructors: It is expected that First Aid Response (and CFR) instructors who are faculty members will renew their instructor certificates with their recognised institution. Council also acknowledges that sole traders will have to attend a First Aid Response (and CFR) instructor recertification course at a recognised institution. Recertification courses shall be designed according to the identification of training needs (ITN) of the individuals. Nonetheless, First Aid Response (and CFR) instructor recertification courses should include at a minimum:
 - a) Verification of a valid First Aid Response (and CFR) instructor certificate
 - b) Evidence of a balance of OFA/FAR and CFR courses delivered; minimum 4 courses in the preceding 2 years
 - c) Assessment of First Aid Response (and CFR) provider skills
 - d) Assessment of First Aid Response (and CFR) instructor skills (mock class room set up)
 - e) Provision of any CPG updates (as applicable).
- 16. **Assessment** of First Aid Response (and CFR) instructor recertification will be undertaken by a First Aid Response (and CFR) instructor trainer using standard evaluation forms.
- 17. **Certification:** Award of joint PHECC/recognised institution First Aid Response (and CFR) instructor cards/certificates by the recognised institution is mandatory.



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