



First Aid as a Life Skill

Training Requirements for Quality Provision of Unit Standard-based First Aid Training

Contents

Introduction3
Application Date4
Section One: Framework Outline4
1. Safety 5
2. Severity of Illness
3. Airway management in the unconscious patient
4. CPR – Cardiopulmonary resuscitation
5. Bleeding control
6. Common medical emergencies
7. Common injuries
Section Two: First aid training requirements
Provision of First Aid Training9
Trainer Eligibility9
Training and Qualification Requirements for a First Aid Trainer
Unit Standard-based First Aid Training11
First Aid Certificates
First Aid Refresher Training
Links
Further Information
Sections 3 – 5 to be added Section Three: First aid training guidelines
NZRC documents
St John
Red Cross
Wellington Free
Diabetes NZ
Epilepsy NZ etc contributors
Course content 8.46
Oddioc comtont o. 10
oddio odikon o romania marka na marka n
Section Four: Compliance Documentation
Section Four: Compliance Documentation
Section Four: Compliance Documentation

A living document owned by the industry, held by the current SSB, Toitū te Waiora. To be reviewed every six months by a panel consisting of members from AECTP (4), TTW (2) representing SSB and other interchangeable invitees).

Introduction

This document has been developed to outline requirements to training providers, learners, and employers for first aid training based on currently registered Toitu te Wairoa (TTW)¹. The document has two sections. Section One: Framework Outline is based on the clinical framework for first aid in New Zealand developed for the New Zealand Qualifications Authority (NZQA) in 2005 by a panel of medical practitioners, researchers, first aid practitioners and Industry Training Organisation. Section Two: First as training requirements is based on guidance originally found in the Department of Labours' 2001 Guidance Notes on Providing First Aid Equipment Facilities and Training. These guidelines were revised in 2009. In discussions between the Department of Labour (now Worksafe New Zealand) and NZQA it was agreed that detailed first aid training-related guidance would be more appropriate in an NZQA-managed document. First Aid as a Life Skill has been developed in response. This document has since been transferred to the custody of Skills 2015-2021 and now as outlined below TTW.

First Aid as a Life Skill is designed to be a 'living document'; being updated in line with any requirement changes or updates. Toitu te Waiora is the standard setting body (October 4 2021) and works in conjunction with

- NZQA
- The Association of Emergency care training providers (AECTP) being the recognised peak body for the First Aid industry.
- Other Industry stakeholders

A clinical perspective has been used to provide a simple framework for the areas of first aid that are most needed by New Zealanders, both at work and in the community, and most likely to make a significant difference to clinical outcome.

This document seeks to promote a generic approach to the unwell or injured person.



¹ Standard setting body was transferred to Toitu te Wairoa in November 2021??. At publication currently registered unit standards relates to 6400, 6401 and 6402.

Section Two outlines NZQA requirements for provision of unit standard-based first aid training. It is recognised that there are many factors which may impact on the length of time needed for a learner to attain the minimum level of first aid knowledge outline here and in the individual TTW first aid unit standards. Prior learning, class sizes, and the particular needs of individual workplaces and social situations will all affect the time needed to complete a quality programme of first aid training and assessment. Experience of quality training provision for first aid in New Zealand indicates there are minimum training times needed for quality provision of training for first-time and revalidation learners. Requirements for this and others aspects of training provision are contained in this document, which should be read in conjunction with current Worksafe New Zealand guidance; First Aid at work February 2020.

Application Date

These training requirements apply to all providers of TTW unit standards-based first aid training from {insert date}

Section One: Framework Outline

This framework is intended to represent a minimum level of first aid knowledge that NZQA and the clinical sector would like to see all New Zealanders possess. For maximum knowledge and skill retention, first aid and CPR should be learnt at the same time. Certain groups of learners may, by nature of the work they are involved in or their physical location, require additional training that is more advanced. All first aid teaching must be consistent with good clinical practice as detailed in the primary reference provided in TTW unit standards Section 3 First aid training guidelines, S4 compliance documentation, section 5 miscellaneous documentation and Worksafe New Zealand first aid training guidelines².



² Contact information for all organisations referred to in this document can be found on p.?

1. Safety

Learners need to be able to assess the scene by identifying potential threats to their own safety, to the safety of the patient, and to bystanders. They also need to understand appropriate ways to deal with whatever threats to safety may be present.

Rationale:

It is of paramount importance that those responding to any type of emergency first evaluate how safe it is to respond. This should include recognition of threats to the first aider themselves, so that in responding they are not placing themselves at undue risk, or risking the safety of the patient. Situations such as a road traffic accident, electrocution, drowning, fire, hazardous chemicals, and precautions in the presence of body fluids should be covered.

2. Severity of Illness

Basic assessment of the patient suffering illness/injury needs to be undertaken, with key emphasis on when to call 111.

https://www.stjohn.org.nz/what-we-do/when-to-call-111/

Learners must know how to recognise common life-threatening symptoms associated with acute coronary syndromes, and stroke, and the need for urgent ambulance assistance in treating this. What happens when you call 111 (See section 3, whiteboard video availability tbc) and how to decide whether to see a GP or go to the emergency department, are key knowledge areas for a first aider.

Rationale:

When a first aider is faced with an unwell or injured patient, one of the first decisions they have to make is whether the problem requires urgent medical attention (such as an ambulance), routine medical attention (such as a visit to the GP), or no medical attention at all. This is a basic question, and relatively simple guidelines may help people make good decisions in this area. In response to significant life-threatening illnesses such as stroke and acute coronary syndromes, people are typically slow to call an ambulance. Delays in treatment significantly increase mortality and morbidity for these two conditions.



Greater public awareness is therefore needed that in the presence of chest pain, shortness of breath or symptoms of stroke, an ambulance should be called immediately.

A general discussion of when to use Heathline to help assess whether or not to immediately seek medical attention would assist people in making a decision on whether to see a GP, go to an emergency department, or call an ambulance (section 3)

3. Airway management in the unconscious patient

Learners must know how to open an airway using head tilt and chin lift. Learners must know how to place a patient in the recovery position (or on their side supported), maintaining an open airway.

Rationale:

Learners must know how to open the airway of an unconscious patient, and how to position a patient in a stable position with an open airway. These skills are potentially life-saving.

Cervical spine immobilisation is not seen as a basic first aid skill because this adds considerable complexity to airway management skills. Maintaining an airway takes priority over any assumed cervical spine injury.

4. CPR - Cardiopulmonary resuscitation

Learners need to know when CPR is required, how to assess for signs of life, and how to perform CPR.

CPR will have an emphasis on learning about adult, child and infant collapse, with a minimum of an adult or child and infant being assessed with a focus on correct rate, depth and site of chest compressions.

Mouth-to-mouth resuscitation should only be taught as part of CPR.

Rationale:

Bystander CPR has been consistently shown to increase survival from cardiac arrest in adults, and to increase survival from respiratory arrest in children. (Stats to be included) This is as basic skill that all New Zealanders should have.



Major barriers in the performance of CPR in New Zealand are a fear that harm will result, or that the rescuer will perform the technique incorrectly.

The fear that harm will result from the performance of CPR needs to be addressed through the first aider knowing that ventilation and chest compression will not cause harm to a collapsed patient.

Familiarisation with automatic external defibrillators (AEDs) are to be a part of CPR instruction with a demonstration carried out by the instructor.

5. Bleeding control

Learners will know to apply direct pressure to stop external bleeding.

Rationale:

There is reasonable evidence to suggest that direct pressure will be an effective approach to dealing with external bleeding. Elevation may be considered to control bleeding.

The use of tourniquets to control bleeding should be considered to control life threatening bleeding.

6. Common medical emergencies may include but not limited to:

<u>Chest pain – know the symptoms of acute coronary syndromes, the need to call an ambulance early rather than seeing a doctor.</u>

<u>Stroke</u> – recognise symptoms and know the importance of calling for an ambulance promptly.

<u>Seizures</u> – recognise symptoms, know how to protect the patient during a seizure, and when to access ambulance services.

<u>Breathing difficulties</u> – recognise symptoms and know when to access ambulance services.

Diabetic emergencies – recognise and treat diabetic emergencies

<u>Choking – recognise choking and know simple manoeuvres to treat choking.</u>



Rationale:

It is important for learners to understand the most common and potentially significant medical problems, with an emphasis on recognising symptoms rather than diagnosis, and knowing when to access the ambulance service.

7. Common injuries may include but are not limited to:

Learners need to know how to manage common injuries such as:

Burns

Wounds

Fractures

Head injuries

Eye injuries

Rationale:

The most commonly presenting injuries are fractures, lacerations and minor burns. It therefore seems important that treatments for these injuries are part of the first aider's repertoire. The emphasis is on simple management of these conditions.

8. Managing First aid in an emergency situation

Learners need to know how to manage an emergency situation with more than one casualty; from discovery to handover.

Rationale:

Events often will present with more than one injured person and issues arising from the environment. Therefore, managing the scene until trained help arrives can be required by the first aider/s. Ensuring the environment is secure and the risk of further harm to self, patient and others is applied.



Section Two: First aid training requirements

Provision of First Aid Training

Training of first aid personnel in workplaces shall be carried out by individuals who are employed by an organisation granted consent by NZQA to assess first aid unit standards.

Trainer Eligibility

Trainers may be:

- a) Registered medical practitioners, registered general or comprehensive nurses, or registered enrolled nurses, who hold a current practising certificate; or ambulance officers, who have current first aid and National First Aid Instructors Certificate, or equivalent, as well as knowledge and experience of first aid in places of work and of modern teaching and learning methods; or
- b) Qualified secondary teachers/graduate lecturers who hold a current first aid certificate and National First Aid Instructors Certificate, or equivalent, issued by an organisation whose training and qualifications for first aid trainers are quality assured by NZQA, and who have knowledge of occupational safety and health, hazards, risks and the application of first aid in places of work or;
- c) Lay persons, and other qualified teachers, who hold a current first aid and CPR certificate issued by an organisation which is quality assured by NZQA, and which shows that they have a high level of practical and theoretical knowledge of first aid in the workplace and they are competent to teach and assess NZQA qualifications-based unit standards, or equivalent.

Note: All trainers must qualify under either points a, b, or c.



Organisation with consent to assess first aid unit standards will be subject to the appropriate Consent and Moderation Requirements (CMR 0121) approved by NZQA. All organisation training and assessment staff will comply with the industry or sector- specific requirements for consent to assess as outlined in Criterion 3 of the Requirements for Consent to Assess (RCA) of the CMR. In cases where the requirements are not maintained, the non-compliance procedure as specified in the Moderation Requirements (MR) of the CMR will be followed.

Training and Qualification Requirements for a First Aid Trainer

Organisations offering first aid training must be able to ensure that teaching and assessing staff have had training in standards-based assessment. They will either have obtained credit for unit standard 4098, *Use standards to assess candidate performance*, or will be able to demonstrate equivalent skills and knowledge.

The organisations must be able to ensure that teaching and assessing staff have obtained credit for adult education unit standards or have evidence of their ability to use learner centred techniques consistent with unit standards such as those found in the Delivery of Adult Education and Training domain on the Directory of Assessment Standards (DAS).

The organisations must be able to ensure that instructors have:

- Achieved current TTW first aid unit standards
- Achieved unit standard 4098, and unit standards in adult education, or will be able to demonstrate equivalent skills and knowledge
- Achieved unit standards in the Pre-hospital Emergency Care domain 29321 or comparable knowledge and skills
- National Instructor Certificate or equivalent.

Teaching and/or assessing staff must be given opportunities to maintain currency and must provide evidence of up-skilling in best practice in first aid tutoring and first aid practice. Currency must be demonstrated through participation in refresher training and other professional development programmes annually.



Unit Standard-based First Aid Training

These are the minimum requirements for both the initial and revalidation training.

Training may be conducted either centrally, away from the place of work or, where suitable training facilities exist, at the place of work.

Quality assured training will be monitored by NZQA through organisational evaluation. For training, where assessment is against unit standards, then this assessment will also be moderated by the TTW through national external moderation as per the Consent and Moderation Requirements (CMR 0121).

The duration and content of a workplace first aid training should take account of:

- Class sizes
- Capabilities of the people being trained
- The identified hazards and risk associated with the workplace they will be working in (where practicable).

The minimum duration of first training and assessment will be, for training based on:

- 6400, 6401 and 6402 a minimum of 12 hours training and assessment; recommend workplace first aid; National certificate in First Aid including 3 x fifteen minute breaks
- ▼ 6401 and 6402 a minimum of eight hours training and assessment including 2 x fifteen minute breaks

First aid training must cover the outcomes of TTWs first aid unit standards being assessed and any additional modules identified through the workplace risk assessment process as outlined in Worksafe New Zealand guidelines.

Unit standard achievement must be recorded on the candidate's Record of Achievement, maintained by NZQA.



First Aid Certificates

The workplace first aid certificate issued by a training provider is evidence that the holder has completed the training requirements and meet the criteria of the unit standards. First aid certificates are valid for a period of up to two years.

Certificates are to include:

- Title i.e. Workplace first aid certificate or 8 hour certificate
- the date of achievement
- period valid for i.e. 2 years
- Provider number

First Aid Revalidation Training

Revalidation training in required every two years to maintain the certificates. The revalidation training should ensure the certificate holder is current in first aid practice appropriate to their individual workplace requirements.

If a certificate is not renewed prior to the 2-year expiry it will be necessary for the certificate holder to complete full first aid training to maintain currency.

For the purposes of workplace first aid emergency management, employers will need to ensure that their first aid personnel maintain competency.

- For revalidation training, where the learner's certificate is no older than two years from date of issues, a minimum of six hours training and assessment.
- Revalidation/refresher training for the National Certificate must be minimum of 6 hours
- People who have completed an 8-hour certificate covering 6402 & 6401 must complete 4 hours every two years to be hold valid certificates.
- Only NZQA unit standard based certificate can be revalidated.



Section Three: First aid training Guidelines

to be added

Section Four: Compliance documentation

to be added

Section Five: Miscellaneous documentation

to be added

Links

- For Worksafe New Zealand guidance on first aid visit: http://www.business.govt.nz/worksafe/
- **TTW**
- The Health and Safety at Work Act 2015 is accessible from: http://www.legislation.govt.nz/act/public/2015/0070/latest/DLM5976660.html

Further Information

- Information on anaphylaxis emergency response plans for at-risk children is available from the Australasian Society of Clinical Immunology and Allergy and from Allergy New Zealand. https://www.allergy.org.nz/
- Information on Healthline (0800 611 116), a free, 24-hour telephone health advice service for all New Zealanders is available from:

 https://www.health.govt.nz/your-health/services-and-support/health-care-services/healthline
- Information on the international MedicAlert service, as it applies to New Zealanders and visitors to New Zealand, is available from: http://www.medicalert.co.nz/
- New Zealand emergency services guidance on when to seek help is available from: https://www.govt.nz/browse/law-crime-and-justice/crimes-and-emergencies/111-emergency-service/
- Guidance on seeking help relating to poisoning is available from: https://poisons.co.nz/
- Association of Emergency Care Training Providers (AECTP) https://aectpnz.org/
- https://www.stjohn.org.nz/what-we-do/when-to-call-111/

