Focus On: First Aid Training



Training your first aid attendants and first responders is a required part of every first aid program. But do you know what exactly should be covered or what training methods to use?

Risks

Hazards are present at all worksites, from offices to mines. So too are the chances of injuries and illnesses.

Sudden cardiac arrest, severe bleeding, shock, a near-drowning, or lack of oxygen during confined space work are all life-threatening emergencies. Without prompt and properly performed first aid a victim of any of these situations will very likely die or be permanently disabled while waiting for emergency services to arrive and begin care.

Be a Better Supervisor

Well-trained first aid responders are an important link between when an incident occurs and when emergency care can be given. Here are six things to consider related to first aid training.

1.Teaching Methods

Training programs should:

- Help trainees develop “hands-on” skills using mannequins and partner practice.
- Have the right first-aid supplies and equipment available.
- Expose trainees to acute injury and illness situations and responses using visual aids.
- Include course resources for reference both during and after training.
- Allow enough time for emphasis on commonly occurring situations.
- Emphasize skills training and confidence-building through “hands-on” practice.
- Emphasize quick response to first aid situations through practice scenarios and drills.

2. **Preparing to Respond to a Health Emergency**

Include instruction and discussion on:

- Prevention as a strategy to reduce fatalities, illnesses and injuries.
- Understanding the legal aspects of providing first aid care, including Good Samaritan legislation, consent, abandonment, negligence, assault and battery.
- Understanding the effects of stress, fear of infection, panic; how they interfere with performance; and what to do to overcome these barriers.

3. **Assessing the Scene and the Victim(s)**

When covering scene and victim assessments include discussion and practice (if applicable) on:

- Assessing scene for safety, number of injured, and nature of the event.
- Assessing toxic potential of the environment and the need for respiratory protection.
- Assessing each victim for responsiveness, airway blockage, breathing, circulation, and medical alert tags.
- Identifying the presence of a confined space and the respiratory protection and specialized training required to perform a rescue.
- Prioritizing care when there are several injured.
- Taking a victim's history at the scene and determining the cause of injury.
- Performing a logical head-to-toe check for injuries.
- Methods for safely:
    - Moving and rescuing victims.
    - Repositioning ill/injured victims to prevent further injury.
- Stressing the need to continuously monitor the victim.

4. **Responding to Life-Threatening Emergencies**

The training program should be designed or adapted for each worksite and should include standard first aid, CPR, and AED use as well as instruction in:

- Knowledge of the chemicals at the worksite and of first aid and treatment for inhalation or ingestion;
- Effects of alcohol and illicit drugs so the first-aid provider can recognize the physiologic and behavioral effects of these substances.
- Recognizing asphyxiation and the danger of entering a confined space without appropriate respiratory protection.
    - Additional training is required if first aid personnel will assist in the rescue from the confined space.
- Responding to Medical Emergencies
    - Chest pain, stroke, breathing problems.
    - Anaphylactic reaction and hypoglycemia in diabetics taking insulin.
    - Seizures and reduced level of consciousness.
    - Pregnancy complications.
    - Abdominal injury and an impaled object.

5. **Responding to Non-Life-Threatening Emergencies**

Common non-life-threatening injury and illness treatment includes:

- Wounds
    - Wounds assessment and first aid for wounds including cuts, avulsions, and amputations.

    - Principles of wound care, including infection precautions and use of PPE.
- Burns
    - Assessing the severity of a burn.
    - Recognizing type of burn is thermal, electrical, or chemical – and appropriate first aid.
- Reviewing corrosive chemicals at a specific worksite and hazard-appropriate first aid procedures.
- Musculoskeletal Injuries
    - Fractures, sprains, strains, contusions and cramps.
    - Head, neck, back and spinal injuries.
    - Appropriate handling of amputated body parts.
- Eye injuries
- Oral injuries and the importance of preventing aspiration of blood and/or teeth.

6. **Trainee Assessment and Skills Refresher**

- Assessment of successful completion of first aid training should include a skills test and a written assessment.
- Numerous studies have shown a retention rate of 6-12 months of first aid skills.
    - Skill reviews and practice sessions are recommended at least every 6 months for CPR and AED skills.
    - Instructor-led retraining for life-threatening emergencies should occur at least annually.
    - Retraining for non-life-threatening response should occur periodically.