**AIR CADET TRAINING ORDER (ACTO) 8**



**FIRST AID TRAINING**

**AMENDMENT SHEET**

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| **Version No** | **Amendment** | **Amended By** | **Date** |
| 4.00 | Changes in RED | J Partington |  |
| 5.00 | Insert Front Cover and Amendment Sheet | J Stones | 28/05/2017 |
| 6.00 | Change ACO to RAFAC, New Para 18, 20, New Annex P. New Progressive Training Syllabus and the introduction of the AEDs. | Wg Cdr Molloy | 16/10/2017 |
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**AIR CADET TRAINING ORDER TRAINING ORDER NO 8**

**FIRST AID TRAINING**

1. This Training Order sets out the policy for First Aid Training within the Air Training Corps (ATC). It is one of the thirteen core activities essential for the Cadet Experience and defined in ACTO 11. Refer to Annex A for your points of contact for First Aid Trg.

2. The ATC has entered into a partnership. This is with the other cadet forces, the Army Cadet Force Association (ACFA), the British Heart Foundation (BHF) and St John Ambulance (SJA). This enables the ATC to offer First Aid Trg from HeartStart, Youth First Aid (YFA) up to Activity First Aid (AFA). Annex B shows the Organisation and Structure for the ATC.

3. Terms of reference for your Rgnl, Wg and Sqn First Aid Officers are at Annex C, D and E

respectively.

**First Aid Trg Cadets**

4. First Aid Trg is mandatory for all cadets. See Annex F

5. Within the first three-months of joining the sqn, cadets must complete the HeartStart programme (Annex G). Cadets must complete the YFA programme within an eighteen-month period.

6. Eligible cadets can complete the adult AFA course. Sqns must comply with the current regulations regarding this training. See Annex H

7. Uniform badges are now available for HeartStart (Blue), YFA (Bronze) and AFA (Silver) courses. These are bespoke badges for the BHF and SJA. If your cadets have completed other equivalent courses, they cannot wear these badges.

8. The above first aid courses have a validity period of three years. Add the qualifications to the cadet’s SMS record. After that period, cadets who do not requalify must remove their first aid badge.

9. Cadets may also qualify for the First Aid Gold Badge. See Annex P

**First Aid Trg Adults**

9. All Cadet Force Adult Volunteers must hold some form of first aid qualification. Within the ATC, the minimum requirement is the two-hour HeartStart programme. The RAFAC provides this training free of charge. However, the course needs completing within 6 months of joining the ATC.

10. There may be situations where a CFAV is unable to undertake any form of first aid training. This may be because of a disability or other circumstances. In these cases, apply for an exemption from the Corps First Aid Officer (CFAO) through the WFAO and RFAO. The CFAO will assess

each case.

11. The ATC preferred first aid course for adult staff, is the SJA 18 Hour Activity First Aid. This is specifically tailored to the needs of the Cadet Forces. All the National Governing Bodies of sport and adventure training accept it. The MOD also accepts this qualification for shooting and fieldcraft activities. SJA also offer a 12-hour version of this course and a number of other providers use the

term Activity First Aid. Many NGBs, for AT in particular, require a minimum of 16 hrs training plus assessment. Therefore, qualifications delivered outside the Cadet Forces may not meet these requirements. We accept qualifications gained outside of the organisation, compatible with the

RAFAC requirements. The Wing or Regional First Aid Officer should be contacted for advice in these cases.

12. ACP 5, Procedure 22 lists the minimum levels of first aid cover required to support a range of activities.

13. All volunteers are responsible for ensuring their BADER SMS record reflects their first aid qualification. A copy of the certificate needs uploading onto SMS.

**General**

14. Please see Annex I reference Training Material and Resourcing.

15. To aid First Aid Trg, trainers can utilise Casualty Simulation (CASSIM). For more information on that, see Annex J.

16. In addition to CASSIM, competitions provide a good opportunity for your cadets to show off their new skill. For further information on competitions, see Annex K

17. If any cadet, or member of staff, administers first aid to a casualty following an incident or accident, the participant may become eligible for recognition. For further information on this, see Annex L.

18. Automated External Defibrillators (AEDs.) are commonly available at venues and in public places. These will also be supplied to Regions, Wings and other key locations Annex M provides you with the information on their use and the training required.

19. Sqns who have Muslim Cadets on their sqn, see Annex N.

20. Trainer and assessor criteria for each course are found at Annex O.

21. The Cadet First Aid Instructor Award has been introduced as part of the progressive training syllabus. Details are found in Annex P

21. The MOD indemnifies all CFAVs and cadets who administer first aid as part of their role within the cadet forces. UK law also protects those delivering first aid to members of the public. However, CFAVs and cadets are not to offer their services to other organisations outside of the cadet forces as first aid cover for events. The MOD indemnity would not extend to this role. Should members of the RAFAC attending a public event in another capacity witness an accident then they

can offer first aid to the casualty. They continue until the appointed first aid team for that event arrives.

Annexes

A. Points of Contact

B. Organisation and structure

C. Rgnl First Aid Officer – Terms of Reference D. Wg First Aid Officer – Terms of Reference E. Sqn First Aid Officer – Terms of Reference F. Training Criteria – Cadets

G. HeartStart Programme

H. Training Criteria - Adults

I. Training Material and Resourcing

J. Casualty Simulation

K. Competitions

L. Awards

M. The Use of Automated External Defibrillators (AEDs) N. First Aid Training – Implications for Muslim Cadets

O. Trainer and Assessor Requirements for Courses

P. Cadet First Aid Instructor Award

**ANNEX A to**

**ACTO 8**

**First Aid Training - Points of Contact**

1. First Aid Trg in the ATC is standardised, whilst still allowing flexibility of delivery. To help with this, there are specialist volunteers who provide technical assistance. These specialists sit at rgn level.

2. If you need to contact them, you can do so using their BADER email. Please see the table below for the Corps and Regional First Aid Officers.

|  |  |
| --- | --- |
| Corps First Aid Officer | [firstaid@aircadets.org](mailto:firstaid@aircadets.org) |
| SNI | [firstaid.sni@aircadets.org](mailto:firstaid.sni@aircadets.org) |
| North | [firstaid.north@aircadets.org](mailto:firstaid.north@aircadets.org) |
| Central & East | [firstaid.ce@aircadets.org](mailto:firstaid.ce@aircadets.org) |
| Wales & West | [firstaid.ww@aircadets.org](mailto:firstaid.ww@aircadets.org) |
| London & South East | [firstaid.laser@aircadets.org](mailto:firstaid.laser@aircadets.org) |
| South West | [firstaid.sw@aircadets.org](mailto:firstaid.sw@aircadets.org) |

**Table 1 - Contact Emails**

3. Please deal with your Wg First Aid Officer for most everyday first aid matters.

4. As with all activities, First Aid Trg has a desk officer at HQ Air Cadets. This sits within the responsibility of TG1. If you have reason to contact him, you can reach him on the email address:  [[tg1@aircadets.org](mailto:tg1@aircadets.org)](mailto:aco-hqac-tg-1@mod.uk) or by telephone: 01400 267615.

Figure 1 -Organisation and Structure in block form

**ORGANISATION AND STRUCTURE**

HQ AIR CADETS Lead: TG1

CORPS FIRST AID ADVISOR OC FIRST AID TRAINING

COMPETITION DIRECTOR

REGIONAL FIRST AID OFFICER RFAO

,,

WING FIRST AID OFFICER WFAO

,,

SON FIRST AID OFFICER SFAO

ANNEX B to

ACT08

Rgn appointments are made by the Rgnl Comdt

TOR are available at

Annex C

Wg appointments are made by the OC

TOR are available at

Annex D

Sqn appointments are made by the OC

TOR are available at

Annex E

Training opportunities are available to all. Especially those appointed above.

For further information contact your RFAO

**ANNEX C to**

**ACTO 8**

**Regional First Aid Officer (RFAO) – Terms of Reference**

**Qualifications**

1. The RFAO will:

a. Hold and maintain a current recognisable first aid or suitable professional medical qualification1 evidenced by a current CPD portfolio.

b. Hold a current SJA Trainer and Assessor qualification with pin number.

c. Undertake the role of a Training Standards Verifier (TSV) and Training Standards

Assessor (TSA). Training will be provided to support this role

**Tasks**

2. To organise, supervise and conduct training and testing of adult staff and cadets in first aid training, as follows:

a. Arrange/conduct courses, in conjunction with the relevant Wgs, which lead to the award of recognised first aid qualifications for CFAVs and cadets.

b. Monitor/assess, in conjunction with the relevant Wgs, the recognised first aid qualifications for CFAVs and cadets.

c. Ensure that all CFAVs and cadets undergoing First Aid Trg are provided with the first aid instruction and testing at the appropriate stages of their training.

d. Carry out observations annually or arrange observations of your WFAO or other Trainers and Assessors appointed in your Region. Check the standard of first aid instruction, assessing carried out by these individuals.

e. Check, on a regular basis, that all first aid courses delivered meet the requirements of the ATC syllabus and SJA.

f. Hold standardisation meetings and arrange CPD sessions for WFAOs, Trainers and

Assessors within the region

g. Select and or coordinate the training of the Regional First Aid Teams for the National

First Aid Competition.

3. Advise the Rgnl Comdt on all aspects of First Aid Trg by:

a. Attending the National First Aid Trg Panel Meetings,

b. Maintain links with and provide First Aid Trg advice to other Rgnl Staff Officers and your WFAOs,

c. Maintain links with the other cadet forces,

1 In accordance with Annex C or with approval from Corps First Aid Officer

d. Maintain a current database of all your registered trainers and assessors for all courses.

4. Maintain your first aid portfolio of training and assessing, and, a record of personal competences and development.

5. Maintain contact with the Corps First Aid Officer to provide information and feedback on the delivery of first aid within the region.

6. Discuss suitable candidates for progression to SJA trainer with Corps First Aid Officer

**ANNEX D to**

**ACTO 8**

**Wing First Aid Officer – Terms of Reference**

**Qualifications**

1. The Wing First Aid Officer will:

a. Hold and maintain a current recognisable first aid or suitable professional medical qualification2 evidenced by a current CPD portfolio.

b. Hold a current SJA Trainer and Assessor qualification with pin number.

c. Undertake the role of a Training Standards Assessor (TSA). Training will be provided to support this role. The WFAO must be a registered SJA Trainer to act as a TSA.

**Tasks**

2. To organise, supervise and conduct training and testing of adult staff and cadets in first aid training, as follows:

a. Arrange/conduct courses, in conjunction with the relevant sqns, which lead to the award of recognised first aid qualifications for CFAVs and cadets.

b. Monitor/assess, in conjunction with the relevant sqns, the recognised first aid qualifications for CFAVs and cadets.

c. Ensure that all CFAVs and cadets undergoing First Aid Trg are provided with the first aid instruction and testing at the appropriate stages of their training.

d. Arrange annual observations of all approved Trainers and Assessors within your Wing. This is to include first-aid instruction and assessment carried out by other trainers within the wing.

e. Check, on a regular basis, that all first aid courses delivered meet the requirements of the ATC syllabus and SJA.

f. Select and or coordinate the training of the Wing First Aid Teams for the Regional First

Aid Competition.

3. Advise OC Wg and Sqn Staff on all aspects of First Aid Trg by:

a. Attending any Rgnl First Aid Trg Officers’ Meetings

b. Maintaining links with other Wg Staff Officers and the First Aid Instructors at sqn level and provide advice and training when required.

4. Maintain, direct and motivate a suitable team of qualified adult volunteers to meet the needs of First Aid Training within the wg by:

a. Organising meetings of sqn FA instructors, as appropriate, to maintain best practice and broadcast issues raised at the rgnl meeting.

2 In accordance with Annex C or with approval from Corps First Aid Officer

b. Monitor SMS to ensure all CFAV’s hold a minimum of HeartStart and this is evidenced by a certificate uploaded to SMS

c. Encourage CFAVs to hold a minimum of AFA or its equivalence.

d. Maintain a current database of all registered HeartStart trainers and YFA trainers and assessors in your wg. Forward this data regularly to your RFAO or when asked for.

e. Provide training when required.

f. Nominate those suitably qualified and experienced CFAVs for trainer training to your

RFAO.

5. Carryout or arrange for routine maintenance to be carried out on first aid training equipment held at wing level. This will include the following

a. Ensuring the face of manikins are cleaned between use on each course.

b. Replace the lungs in manikins after each course

c. Deep clean the face and when necessary the chest piece of manikins after a course

d. Maintain a stock of clean training dressings and triangular bandages.

**ANNEX E to**

**ACTO 8**

**Sqn First Aid Officer – Terms of Reference**

**Qualifications**

1. The sqn First Aid Trg Officer is to hold and maintain a current recognised first aid qualification3 or suitable professional medical qualification.

**Tasks**

2. Organise, supervise and conduct training, and testing, of cadets in First Aid Trg as follows:

a. Arrange and or conduct training that leads the Cadet to achieve the HeartStart and

YFA qualification.

b. Arrange HeartStart training for all CFAVs who don’t hold other first aid qualifications.

c. Ensure that all cadets undergoing First Aid Trg are provided with first aid instruction and testing at the appropriate stages of their training.

d. Check, on a regular basis, that all first aid courses delivered meet the requirements of the ATC syllabus and SJA.

e. Notify your WFAO of HeartStart and YFA courses and complete all the relevant paperwork.

f. Select and coordinate the training of a first aid team for the wg First Aid Competition.

3. Advise the sqn cdr and staff on all aspects of First Aid Trg by:

a. Attending WFAO meetings as directed

b. Maintain links with the OC and other staff members and provide First Aid Trg advice when asked.

c. Ensure you mentor your more senior cadets who provide First Aid Trg to your younger cadets.

d. Ensure that cadet and CFAV records on BADER are up-to-date regarding First Aid Trg.

e. Contact your WFAO for advice if necessary.

4. Carryout or arrange for routine maintenance to be carried out on first aid training equipment held at sqn level. This will include the following

a. Ensuring the face of manikins are cleaned between use on each course.

b. Replace the lungs in manikins after each course.

c. Deep clean the face and when necessary the chest piece of manikins after a course.

d. Maintain a stock of clean training dressings and triangular bandages.

3 In accordance with Annex C or with approval from Corps First Aid Officer

**ANNEX F to**

**ACTO 8**

**Training Criteria – Cadets**

1. This annex covers the criteria for First Aid Trg for cadets.

2. To deliver any First Aid Trg to cadets, the instructor must be qualified to do so. This means, as a minimum, a HeartStart Instructor to deliver the HeartStart course.

3. To deliver YFA, the instructor must hold a current recognisable first aid qualification.4 They must also have completed a familiarisation of the course and material. To do this, contact your WFAO who will help you with this training.

4. To assess YFA, the assessor must hold a current recognisable first aid qualification.5 They must also have completed a familiarisation of the course and material. To do this, contact your WFAO who will help you with this training.

5. Instructors must register all courses through their WFAO. Ensure you complete all the paperwork before and after the courses. At the end of the course, please submit your paperwork as soon as possible.

6. The training and assessing of cadets must meet the following criteria5. a. Instructor to student ratio is one to twelve.

b. Assessor to student ratio is one to six for YFA. HeartStart does not have an end of course assessment requirement.

c. Assessors cannot assess any student they have taught. Concurrent courses running side-by-side, can take place. Trainers on one course can assess students on the other.

d. The assessment requires 3 separate elements, CPR, Unconscious Casualty and Incident Management. These are to be conducted as separate assessments individually with each student.

4 In accordance with current regulations or seek further advice and approval from the Corps First Aid Officer

5 In accordance with SJA course regulations 2006

**ANNEX G to**

**ACTO 8**

**HeartStart**

1. HeartStart is an initiative coordinated by the British Heart Foundation (BHF). It promotes and develops Emergency Life Support (ELS) training. The scheme is available throughout the UK.

2. If you have any questions or queries on HeartStart, then contact your WFAO.

3. ELS training includes:

a. CPR.

b. Unconscious, breathing casualties.

c. Dealing with heart attacks.

d. Choking.

e. Severe bleeding.

4. The design of the HeartStart programme is to improve the action taken by the public in life- threatening situations. It is suited to all who have no knowledge of first aid. However, this initiative may promote interest in obtaining further training in first aid.

5. Affiliation with the HeartStart programme is through WHQ and done on a wg by wg basis. The main advantage of which, is the additional training equipment supplied to wgs from the BHF. This equipment is available for all First Aid Trg.

6. HeartStart courses can be run with both CFAVs and cadets on the same course

7. In line with all FA qualifications, HeartStart needs renewing every 3 years. This is unless the individual holds a higher-level qualification.

**HeartStart Certificates**

8. The Trainer completes TG Form 9 and follows the instructions on the form regarding submission. The WFAO records the numbers of CFAVs and cadets trained and submit the form to RAF Cranwell Graphics for printing.

8-G-1

**ANNEX H to**

**ACTO 8**

**Training Criteria – Adults**

1. This annex covers the criteria for First Aid Trg for CFAV.

2. To deliver any First Aid Trg to CFAVs, the instructor must be qualified to do so. This means, as a minimum, a HeartStart Instructor to deliver the HeartStart course.

3. Only SJA Trainers with a pin number issued through HQAC can deliver AFA courses. Only registered Assessors, through HQAC, can assess AFA courses.

4. Register all AFA courses through your RFAO to the Corps First Aid Officer. Applications need a notice of at least 4-weeks. Trainers who have not received approval within 2 weeks should contact the Corps First Aid Officer to check on progress.

5. The training and assessing of AFA courses must meet the following criteria6:

a. Instructor to student ration is one to twelve.

b. Assessor to student ratio is one to six. This means that for a course of twelve, you will need two assessors. You can use more as this will significantly reduce the assessing time required.

c. Assessors cannot assess any student they have taught. This ensures independent assessment.

d. Concurrent courses, courses running side-by-side, can take place if you have enough qualified staff. Trainers on one course who are also assessors can assess students on the other.

e. Students on a course cannot be either a trainer or assessor on the same course.

f. The assessment requires 3 separate elements, CPR, Unconscious Casualty and

Incident Management. These assessments need conducting separately with each individual

student.

6. If the trainer does not receive the AFA student packs before the course starts, they are not to run the course. You should receive your student packs in plenty of time.

7. Any course cancellations must be reported to the Corps First Aid Officer.

6 In accordance with SJA course regulations 2006

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**Training Material and Resourcing**

**ANNEX I to**

**ACTO 8**

1. The link with SJA and BHF provides beneficial sources for training courses and materials.

2. RFAO or WFAO can supply the HeartStart video and supporting materials.

3. The YFA video and PowerPoint presentations can be supplied by the WFAO or RFAO. Alternatively, you can download them from the SJA website under the heading of ACFA First Aid.

4. The Youth First Aid Workbook is available from RAF Cranwell Graphics. Email them asking for the copies you require. Delivery is normally within 7 working days.

5. Trainers must provide AFA course students with the course student packs supplied by HQAC. The trainer will receive these when they book the course. Each pack contains a reference guide to first aid. Students must retain these for reference.

6. For training purposes only, copy other written SJA material. For all other training material, WHQ are to make this available to trainers through local arrangements. Please contact you WFAO for details.

**Resourcing**

7. HQ Air Cadets provides and funds all First Aid Trg certificates – cadet and CFAV –

registered through the ATC system.

8. Manikins are a major resource for training. Along with other valuable and attractive items, replacements are on a one-for-one basis when they become unserviceable. Requests should go through your RFAO. For additional purchases, submit your request through your RFAO to HQ AC(TG1).

9. After each student has used a manikin, clean the mouth area with the cleaning solutions available. Pay particular attention to the inside of the manikin’s mouth area. After completion of a course, give the manikin a full clean and replace the lungs (see para 13 below).

10. Trainers, who travel away from their parent units to deliver training and or assessment, should seek prior approval from their wg or rgn.

11. To comply with the awarding body regulations (timescales), first aid courses need adequate resources. Trainers are to ensure the following items are available.

a. Manikins 1 per 2 students.

b. Training dressings and triangular bandages 1 each.

c. Gloves, at least 1 pair per student.

d. Sufficient floor space to practice.

e. Rooms or areas that can be used to allow the 3 independent assessments to take place without other students being able to observe.

12. Add additional time where there are limited resources. Students need to receive the correct amount of practice time.

**Cleaning of Equipment**

13. The use of first aid training equipment will result in the need to clean any items that have been used during training to ensure the risk of infection is minimal.

14. Dressing can normally be reused without risk but eventually they can become dirty and will need to be replaced.

15. Resuscitation manikins are a significant risk as those undertaking training will have breathed expelled air into the lungs. Over time bacteria could develop and be a risk to other users. At the end of a course the following actions are to be taken to reduce the risk of infection.

1. Face piece to be removed and cleaned inside and out using cleaning wipes, suitable cleaning fluid or placed in a dishwasher. The face is then to be dried.
2. The chest piece to be cleaned using warm soapy water and dried afterwards. Alternatively, T-shirts can be used during training to reduce the need to clean the chest piece. The T-shirts can easily be removed and laundered as required.
3. The lungs are to be removed from the manikin and disposed of.
4. A new set of lungs are to be placed into the bag containing the manikin but not fitted to the manikin.
5. At the start of a new course the lungs are then fitted before use.

**Casualty Simulation (CASSIM)**

**ANNEX J to**

**ACTO 8**

1. Casualty Simulation (CASSIM) is the art of using materials to simulate injuries or illnesses to enhance the realism of First Aid Trg.

2. The use of CASSIM needs careful supervision to ensure that it is appropriate to the training conducted.

3. You can also use props and equipment in setting up scenarios for first aid training and it needs careful management

4. You must carry out a risk assessment before using this training material. You must ensure there is no risk to simulated casualties or to first aiders during training. For risk assessments look at the following.

a. DO NOT USE cadets or CFAVs with existing medical conditions depicting those conditions. This is in case they suffer an episode of their condition during the CASSIM exercise, and this is mistakenly assumed to be ‘good acting’.

b. CASSIM often contains food dyes, glue and grease paint. Check for known reactions to ensure that there is no risk of causing harm to the participants. Do not use products containing raw or cooked meats

c. If you use weapons in your scenarios, a suitably qualified Weapon Instructor or Range Conducting Officer is required. They are to ensure the weapons are unloaded and no ammunition is present at the scenario.

d. Other props need risk assessing to ensure that there is no risk of injury to participants. Participants already trained in the use of these props will mitigate your risk. You can use Theatrical glass instead of actual glass; theatrical knives instead of real knives, plastic bottles to simulate glass bottles. DO NOT connect electrical items to a power supply.

e. Take extra care where medical props are used. Asthma Inhalers must have all active medication removed. Where Epi-Pens or other auto injectors are used, ensure you use the training devices only.

f. When using vehicles in a scenario, ensure they are stationary with the handbrake applied. You can use additional precaution of wheel chocks. Engines are to remain off and the ignition keys removed from the vehicle.

5. The CASSIM ‘artist’ should research the recognition signs and symptoms of injuries, illnesses and medical conditions included in the scenarios and should replicate them in their application of CASSIM.

6. In some cases, it may be necessary to exaggerate slightly signs of illness or condition to allow the first aider opportunity to identify correctly the possible avoiding undue exaggeration.

7. Although realistic CASSIM is important, the simulation needs to reflect the injuries the casualty would have sustained in the incident. The casualty’s actions and behaviour also needs to reflect the likely signs and symptoms of the injury.

**Removal of CASSIM**

8. You must ensure your casualties remove all CASSIM as soon as possible after the completion of the scenarios. Use soap and water or moistened cleansing wipes.

**Sources and Costs**

9. You can fabricate some CASSIM materials cheaply. However, there are several commercial sources of theatrical CASSIM makeup and prosthetic wounds. You can purchase this material, but at the expense of the sqn or wg. You must have prior approval before making any purchase.

10. These materials, however, can prove expensive and you should consider whether you can manufacture the CASSIM or whether you should use other scenarios to avoid unnecessary expense.

11. For further assistance in the use of CASSIM, contact your RFAO.

**ANNEX K to**

**ACTO 8**

**Competitions**

1. The purposes of first aid competitions are to:

a. Take first aid out of the classroom.

b. Provide realistic and practical lifesaving skills.

c. Give the confidence to act effectively, safely and promptly with any emergency. d. Provide and develop leadership and team skills.

2. Competitions are divided into 2 groups, Cadets and Young Adults

a. Cadet teams consist of 4 enrolled cadets who must all be under 18 on 31 Dec of the competition year. No reserves are allowed.

b. Young Adult teams consist of 2 members who must be over 17 on 01 Jan and under 26 on 31 Dec of the competition year. These teams can be CFAVs, cadets or a mix of CFAV and cadet. No reserves are allowed.

**Wing & Regional Competitions**

3. Wings and regions may make their own arrangements to select teams for their competition. Ideally, they should follow a similar format to the national event but wings, regions may manage the training, and selection for the national competition in any way they wish that is practicable for them.

**National (Corps) Competition**

4. These rules apply to both cadet and Young Adult participants except where otherwise stated.

**Qualifications of team members**

5. All cadets must hold a current Youth First Aid certificate or higher.

6. All Young Adults must hold a current Activity First Aid certificate or equivalent

**Ineligibility**

7. Healthcare students or professionals are not permitted to participate in the Young Adult competition. This category includes student nurses, paramedics, and doctors. For guidance, please contact the Competition Director.

**Participation in the National Competition**

8. Each Region may enter 2 Cadet teams and 2 Young Adult teams

**Substitution of Team members**

9. Teams competing at the National Competition should have competed at the regional competition as a qualifying event. The actual team members have qualified for the national event

not the Sqn or Wing. Therefore, to ensure that teams entering the national competition are the best each region has available the following rules apply to substitutions;

a. One team member from the regional competition may be replaced for the national competition.

b. If it is necessary to replace two or more team members, the runner up team from the regional event is to represent the region in the national competition.

**Competition Format**

10. The national competition will consist of the following elements;

a. A team test in which all team members must participate lasting 8 minutes

b. An individual test in which all team members must participate lasting 4 minutes

11. Other first aid related concurrent activities may take place as determined by the competition organiser but the results will not be part of the national competition. Separate trophies or medals might be available for concurrent activities.

**Marking**

12. Marks to determine the winning team should give equal weighting to the individual tests and team test and will be allocated as follows:

|  |  |  |
| --- | --- | --- |
|  | **Each test** | **Total** |
| Team test | 160 | 160 |
| 4 x Individual tests | 40 | 160 |
| **TOTAL** | | 320 |

**Table 2 - Marking Grid**

13. The following is a *guide* to the allocation of marks for the team test but this will vary according to the particular injuries and scenario portrayed:

**Table 3 - Allocation of marks**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | *Casualty 1* | *Casualty 2* | *Management* | ***Total*** |
| Approach, assess & make safe |  |  | 10 | 10 |
| Primary survey (DRABC) | 20 | 20 |  | 40 |
| Secondary survey and diagnosis | 10 | 10 |  | 20 |
| Treatment of injuries | 30 | 30 |  | 60 |
| Communication (Telephone etc.) |  |  | 20 | 20 |
| Incident management |  |  | 10 | 10 |
| **Total marks possible** | **60** | **60** | **40** | **160** |

14. Teams may use aide memoires, templates and notebooks. They may also use timing devices other than mobile phones. The competition is a realistic test of practical skill that the use of these aids should not affect.

15. Team members are not permitted to carry or use mobile phones or messaging devices at any time throughout the duration of the competition.

16. Teams can expect to have to deal with several casualties and an onlooker. They will need to deal with the casualties, obtain help, and handle the situation as realistically as possible. They cannot speak to the judge, ask questions or tell the judge what they find. There may be separate judges for each casualty and for overall management. Casualty make-up will be used and casualties will act the part so far as possible. Marks for diagnosis, appreciation of the situation, recognition features etc will be given on the basis of communication with casualties, bystanders, emergency services, and between team members, especially between the team leader and other team members.

17. **Draws.**  In the event of a draw, the team who had the best team score will win. However, if there is still a draw, the team leader’s result will come into play.

**Recognition**

**ANNEX L to**

**ACTO 8**

1. Any cadet or CFAV who carries out any first aid at the scene of an incident or accident should receive recognition. This is especially important when despite their best efforts the casualty didn’t survive.

2. Recognising the willingness to try is as important as achieving a good result.

3. The level of recognition will depend on a number of factors which will include:

a. The age of the first aider.

b. The level of experience.

c. The severity of the injuries.

d. The level of first aid given.

e. The level of risk to the individual.

4. OC Wings, Regional Commandants and the Commandant Air Cadets can give recognition. There is also the possibility of external recognition by SJA, the Royal Humane Society and others.

5. To ensure recognition at the most appropriate level is achieved anyone wishing to nominate

a cadet or CFAV for recognition should complete form TG 019. These are available from the Forms folder in the HQAC Key Documents folder on SharePoint. Follow the instructions on the form regarding submission.

**Annex M to**

**ACTO 8**

**Use of Automated External Defibrillators (AEDS)**

1. Sudden cardiac arrest (SCA) is a leading cause of premature death. You can save many

lives with immediate treatment. SCA occurs because the electrical rhythm that controls the heart is replaced by a chaotic disorganised electrical rhythm called ventricular fibrillation (VF). The quicker VF can be treated by defibrillation the greater the chance of successful resuscitation.

2. Many SCA casualties can be saved if persons nearby recognise what has happened, summon the ambulance service with the minimum of delay, perform cardiopulmonary resuscitation (CPR) and use an AED to provide a high energy electric shock to restore the heart’s normal

rhythm. Each of these stages is a link in a chain of events that provide the best chance of success, but the critical factor is the speed with which the shock is given.

3. An AED is easy to use, compact, portable and very effective. Designed to be used by laypersons; the machines guide the operator through the process by verbal instructions and visual prompts. They are safe and designed not to give a shock unless the heart’s rhythm requires it. You can store them for long periods without use and require very little routine maintenance. There are different types and can be either fully or semi-automatic.

4. The crucial element of survival is the interval between collapse and the use of the AED to deliver a shock. Any AED should be positioned and freely available. The whereabouts made known to as many people as possible. This ensures it is readily accessible by someone nearby.

They can take this to the person who has collapsed. If required, the machine is ready to use before the arrival of professional help. It should not be locked up in an office for instance, that are not

manned at weekends, evenings etc.

5. The ATC has acquired funding to provide 1 AEDs to every Region, 2 to every Wing and 1 or 2 to each National AT Centre. The equipment will be required to always be available for use and must be taken to major events were large numbers of cadets and CFAVs are present or where strenuous activity is being undertaken such as sports events. Where multiple events are being undertaken at the same time then a decision based upon the most significant risk should be used to decide where the allocated AEDs should be deployed. The WFAO or RFAO should be consulted if required.

6. AEDs are expensive items and an individual should be nominated by each Region, Wing and National AT centre to manage the AEDs ensuring they are returned promptly after events and the routine checks are carried out as detailed in para 7 below.

7. The AEDs do not require routine maintenance but will require regular visual checks to be undertaken on the battery state and the accessories are intact. Specific instructions will accompany each AED on the checks to be undertaken and the frequency. These checks should be recorded and any issues reported to [tg1@aircadets.org](mailto:tg1@aircadets.org) immediately, Batteries and pads have an expiry date and will both require to be replaced at these time intervals. These will be supplied and funded by HQAC when required.

8. Should an AED be used on a casualty then the pads will require to be replaced immediately. Depending on the amount of use the battery may remain operational. The AED will indicate if a replacement battery is required.

9. Although anyone can operate an AED best practice is to ensure staff responsible for first aid at major events should receive training to give additional confidence in the use of the equipment. Regional First Aid Officers and Wing First Aid Officers will make arrangements to deliver training as required to staff and staff cadets to meet this requirement.

10. AED awareness training will be incorporated into all Activity First Aid courses to improve the understanding of the basic principles of AEDs. This training will be cascaded through RFAOs and WFAOs to AFA trainers. Two levels of training will exist;

1. AED Competent Operator – Certificated through HQAC
2. AED Awareness – included as part of an AFA course

11. Access to an AED is not to be refused based on a lack of a trained AED Competent Operator as the equipment is designed to be used without the need for training (see para 3 above).

**ANNEX N to**

**ACTO 8**

**First Aid Training – Implications for Muslim Cadets**

1. The Muslim Council of Britain has provided the following guidance:

*“a. There is no problem with cadets of either gender being trained in techniques using mannequins/dummies and also live persons provided it is same gender and also no alcohol or meat products have been consumed immediately prior to training. If the mouth has been cleaned thoroughly leaving no traces then there is no problem.*

*b. The training should include an explanation that if the techniques are used on a person if possible resuscitation should be carried out by First Aiders of the same gender as the casualty. i.e. male to male or female to female.*

*c. However, in an emergency, should same gender resuscitation not be possible and life is at serious risk, Shari`ah (Muslim Law) accepts that the preservation of life is paramount and therefore cross gender resuscitation would be acceptable.*

*d. It is also strongly recommended that where there is an absolute necessity*

for cross gender resuscitation that gloves be worn especially if the casualty is not fully dressed. This applies to both genders equally. It is also strongly recommended that in such circumstances a piece of cloth like a handkerchief also be placed over the mouth in mouth- to-mouth resuscitation if it is possible. A genuine effort has to be made to ensure minimum bare skin to skin contact at all times.”

**ANNEX O to**

**ACTO 8**

**Trainer and Assessor Requirements for Courses**

1. All First Aid Trg in the ATC can be delivered by our own CFAVs and in some cases Instructor Cadets. First Aid Trg is progressive within the ATC and the requirements for training and assessing differs at each level.

|  |  |  |
| --- | --- | --- |
| Courses | Trainer Requirements | Assessor requirements |
| 1. Heartstart (Blue Badge)  A 2 hour attendance course for delivery to all cadets, CFAVs, Civilian Committee members and parents.  **Should be delivered to all cadets and CFAVs within**  **3 months of joining. CFAVs are exempt if they**  **hold a higher qualification** | a. Must hold a current first aid certificate of 16 hours duration.  b. Must be a registered Heartstart Instructor (contact WFAO for details)  c. Cadets must hold a  16hr adult FA cert and the  MOI as a minimum. Must be a registered Heartstart Instructor | **No assessment required**  **on this course** |
| 2. Youth First Aid (YFA) (Bronze Badge)  A 12 hour course with 3 independent assessments of practical skills for delivery to all cadets regardless of age.  Should be delivered to all cadets within 18 months of joining | a. Must hold a current first aid certificate of 16 hours duration.  b. Must have a training skill e.g. MOI, SSIC  course or other accepted training qualification.  c. Cadets must hold a  16hr adult FA cert and the  MOI as a minimum.  d. Must be registered with the WFAO to deliver the course | a. Must hold a current first aid certificate of 16 hours duration.  Must be registered with the WFAO to assess the course |
| 3. Activity First Aid  (AFA) (Silver Badge)  A 16 hour course with an independent assessment of practical skills for delivery  to all CFAVs | a. Must hold a current  first aid certificate of 16 hours duration.  b. Must have a recognised teacher or training qualification at Level 3 or above. | a. Must hold a current  first aid certificate of 16 hours duration.  b. Must have a recognised assessing qualification |

|  |  |  |
| --- | --- | --- |
| Cadets who may need this qualification for NGB awards or to teach Heartstart and YFA can  also undertake this course | c. Must be registered through HQ Air Cadets with SJA as a Trainer and  have a PIN.  d. Must maintain a CPD folder which has been assessed annually and verified every three years | c. Must be registered with HQ Air Cadets as an assessor.  d. Must maintain a CPD folder which has been assessed annually and verified every three years |
| 4. AED Competent Operator  A 3 hour course with an assessment of practical skills for delivery  to CFAVs and Staff Cadets required to use AEDs | 1. Must be registered to deliver AED Competent Operator training with HQ Air Cadets. | 1. Assessed by the trainer. |
| Paramedics are exempt from requiring a current first aid certificate as long as they  remain registered with the HCPC.  Ambulance Technicians and Community First Responders may also be exempt but as the level of training varies considerably across the UK this will need to be  assessed on an individual basis.  Doctors and Nurses with current first aid or trauma experience can also claim exemption from holding a current first aid certificate.  Any members of staff wishing to train AFA courses who hold a training qualification  not listed above should in the first instance contact the Wing FAO who will seek clarification as required.  Qualified medical personnel listed above should hold a relevant teaching or assessing qualification as listed. | | |

Adult staff holding first aid qualifications not shown above should seek confirmation of eligibility to conduct cadet or CFAV training from their WFAO in the first instance.

**ANNEX P to**

**ACTO 8**

**Cadet First Aid Instructor Award (Gold Badge)**

1. The introduction of the Cadet First Aid Instructor Award is commensurate with the 4 stage Progressive Training Syllabus approach to all training areas within the ATC. Successful completion of the training will allow the cadet to wear the gold first aid badge.
2. The course is designed to equip suitable cadets with all the skills required to deliver high quality first aid training for the benefit of other cadets and CFAVs alike. They will also be able to deliver interactive, engaging and motivational sessions using the latest instructional methods used in training and education today.
3. The course is intended to be residential and delivered over an 8 day period, the same as an annual camp. Delivery will be either at a national or regional level as it will require a significant input of skills and resources to deliver the range of topics required. In line with the other training areas the gold award is not intended to be made available to every cadet.
4. Eligibility for the course will be;
   1. Over 17
   2. Master cadet
   3. Already hold a minimum of a YFA
   4. Recommended by Wing First Aid Officer as someone who will use the skills gained to benefit other cadets
5. The content of the course will include the following;
   1. Full AFA course to ensure the current level of knowledge and skill are at the appropriate level.
   2. First Aid Assessor Course. This will allow a better understanding of the standards required to assess first aid and also allow the cadet to assess adult level courses if they are over 18.
   3. Methods of Instruction course with an emphasis on first aid but not exclusively tied to first aid. This section will also allow cadets to meet the requirements of the Instructor Cadet qualification.
   4. Casualty Simulation training to allow delivery of more realistic and meaningful first aid training.
   5. Competition training to give cadets the ability to set up and run competitions within their Sqns and assist at a Wing level.
   6. AED training to enhance the cadet’s knowledge and awareness of AEDs.
   7. Input from local emergency services or regular/reserves medical services to enhance the knowledge and awareness of the next stage in the treatment of casualties.
6. Each section of the course will be assessed and the cadet will be required to obtain a pass in all sections.
7. The final assessment will be the delivery of a full 40 min session from the YFA package.
8. The award of the gold badge is subject to the cadet maintaining currency in delivering at least 2 YFA courses per year.
9. RFAO will advertise these courses to all Sqns in their Region and coordinate bids through the WFAOs.