

Questions & Answers

Understanding Standards

Regulated First Aid Qualifications: Guidance

Trainer/Assessor/Internal Verifier qualifications and experience

IQAs/internal verifiers are not normally able to deliver courses, given reduced numbers if there is more than one IQA/internal verifier available can an IQA/internal verifier, in the short term, do some delivery as long as they are sampled by the other IQA?

Internal verifiers (IV)/Internal quality assurers (IQA) can only train/assess regulated first aid awards (GNOT 46, GNOV 46, GP71 46, GP72 46) if they also hold formal teaching and/or assessing qualifications as detailed in Appendix 2 of the assessment strategy documents and the <u>Assessment Principles for Regulated First Aid Qualifications</u>.

If an internal verifier trains/assesses a course/part of a course, they must be internally verified by a different IV/IQA. If they are working towards a formal teaching and/or assessing qualification, any delivery/assessment must be supervised by another suitably qualified trainer/assessor (who is also up-to-date with their own internal verification observations).

Does the guidance addressing trainer/assessor/IV qualifications and experience apply only to the SCQF level 4/5 and 6 (Higher) first aid courses?

This guidance is only for the **regulated** First Aid Awards Emergency First Aid at Work (GNOT 46), First Aid at Work (GNOV 46), Emergency Paediatric First Aid (GP71 46) and Paediatric First Aid (GP72 46) at SCQF level 6.

SCQF level 4/5 awards may want to use this guidance as good practice.

SQA assessment strategy guidance states that where any first aid training requires formal assessment of learning outcomes, this must be delivered in accordance with current Resuscitation Council UK practice and <u>First Aid at Work Health and Safety guidance</u>. Detailed advice on the specific requirements for delivery can also be found in the assessment strategy and guidance documentation for each relevant award.

The Resuscitation Council have issued <u>further advice</u> on non-regulated first aid training during COVID-19.

We have had no staff or students on campus due to COVID since March 2020, therefore no FAW courses have run. It is hoped this may change in April, however if not, what does that mean for staff who would not have delivered in the last 12 months?

Whilst the First Aid Awarding Organisation Forum (FAAOF) stipulate that trainers must be able to provide evidence that they have delivered over 36 hours of training in the last year, delivered 1 course every 6 months as a minimum and have an annual observation by the IV – assessors if not also trainers, must evidence at least 6 regulated first aid assessments over 3 years.

Although many trainers/assessors may have already achieved the minimum requirements, we understand that the current situation does not allow this for all centres. Where a trainer has not been able to train due to the current situation, we would ask that they are observed by an IV for a minimum of 4 hours on delivery of their first course.

I assume needing certain hours to be able to train and assess over the 12 months is exempt due to the current pandemic?

If a trainer/assessor is nearing or exceeding 12 months since observation, then this should be done on the first available course. As per FAAOF guidelines; 4 hours observation for an experienced trainer and 6 hours observation for a new trainer. Where assessors are not also training, they should be observed conducting all the practical and summative assessments for the course.

Does being a nurse make up these hours, although not running courses in centre?

As a nurse you could detail the hours you have worked as part of your Continuous Professional Development (CPD), providing detail of what you have learned and how this has impacted your practice. If you are teaching first aid as part of your nursing role, you may add these hours to your training log. A formal teaching and/or assessing qualification is still required to train or assess regulated first aid awards.

My First Aid Certificate expires soon. The college are not updating our training due to Covid-19. Can my certificate be extended under current circumstances?

First Aid at Work or Emergency First Aid at Work certificates that expired after 16 March 2020 can remain valid until 31 October 2020 or 6 months from date of expiry, whichever is later. All re-qualification training for these certificates should be completed by 31 March 2021. (Refer to the <u>Health and Safety Executives First aid during the coronavirus (COVID-19) pandemic</u> website for further guidance.) Until informed otherwise, after 31st March 2021, requirements for re-qualification would revert back to a maximum of one month after expiry.

Currently there is no plan for the Health and Safety Executive to extend this deadline further as first aid training is allowed to continue under the restrictions for lockdown in each of the devolved nations, where it is essential, and all guidance is followed. The First Aid Quality Partnership and FAAOF are monitoring the situation regarding certificate expiry and may suggest that this is reviewed in the future. If your college remains closed, then you should be able to enrol on a course with another provider as some training centres are still operating. For quality assurance, it is strongly recommended that any re-qualification training is undertaken with an SQA centre or another centre registered with a member of the FAAOF. Acceptable equivalent qualifications to First Aid at Work are listed in Appendix 1 of the First Aid at Work Assessment Strategy and <u>Guidance</u> and the <u>Assessment Principles for Regulated First Aid Qualifications</u>.

Can you confirm that as a nurse and with evidence of being on the NMC register, I am not required to attend a FAW course every 3 years?

Yes, that is correct. Trainers/assessors/internal verifiers are exempt from undertaking the First Aid at Work (or equivalent) re-qualification every 3 years as long as they hold current and valid registration with either the Health Care Professions Council, General Medical Council or Nursing and Midwifery Council. This is outlined in the <u>Assessment Principles for</u> <u>Regulated First Aid Qualifications</u> and the assessment strategy document for each award.

Resources, equipment, environment

I have been asked to assess CPR baby by asking students to use a teddy while I watch via Teams. I have concerns...is this acceptable?

Whilst some elements of blended learning are allowed for **regulated** first aid qualifications, all practical elements of the course must be delivered and assessed face-to-face. Where simulation is required, for example, for cardiopulmonary resuscitation (CPR) practice, first aid manikins must be used.

The marking instructions for each award clearly state that candidates must demonstrate both chest compressions and rescue breaths to a satisfactory standard in order to be assessed as competent in CPR. Adult/junior/infant CPR manikins must be used (as appropriate) to gauge adequate depth/rate of compressions as well as effective rescue breaths. This applies to adult and paediatric first aid courses at all times (including during the current pandemic).

Where COVID-19 protocols for CPR should also be taught, they do not currently need to be assessed. More information about this can be found on the <u>Resuscitation Council website</u>.

The assessment strategy guidance for each award states clearly which assessment outcomes must be taught and assessed face to face, in the classroom for each unit:

- ◆ HV82 04 2.1, 2.2, 3.2, 3.4, 4.2 and 5.2
- ♦ HV83 04 1.2, 2.3, 3.3
- ◆ JISH 46 2.1, 2.2, 3.2, 3.4, 3.5, 4.2 and 5.2
- ◆ J1SJ 46 1.3, 2.3, 9.3

For more information on blended learning for regulated first aid qualifications, see current guidance from the FAAOF on <u>Blended Learning in First Aid Quality Assurance Standards</u> or the SQA assessment strategy for each award:

Emergency First Aid at Work Assessment Strategy and Guidance

- First Aid at Work Assessment Strategy and Guidance
- Emergency Paediatric First Aid Assessment Strategy and Guidance
- Paediatric First Aid Assessment Strategy and Guidance

Can the Lifesavers App be used as evidence of practice?

The lifesaver resource is not a recognised instrument of assessment. Whilst it can be used formatively to learn and practice CPR, this does not remove the requirement for all practical elements of the course to be delivered and assessed face-to-face. We would expect CPR to be taught and assessed formally, using first aid training manikins as per the answer to the previous question.

For more details of what is allowed, refer to the current guidance from the FAAOF on Blended Learning in First Aid Quality Assurance Standards.