

FIRST AID TRAINING MATTERS

promoting quality in the first aid industry



Association of Emergency Care Training Providers

AECTP
Volume 2 : Issue 1 : May 2013

First Aid Conference 2013

AECTP's 2013 National First Aid Conference to be held on Tuesday 19th November

Emergency Care Instructors (ECI) Level 2 Revalidation Course

Due to demand, Steve Jenkins has agreed to run the will be taking an *Emergency Care Instructors Level 2* revalidation course the day before Conference, at **5pm Monday 18th Nov 13** at the NZ Resuscitation Council, The Terrace, in Wellington. Attendees must book using the *NZ Resuscitation Council website*. Early booking is strongly recommended.

2013 First Aid Conference—Tues 19th Nov 2013 at Tawa Rm, Brentwood Hotel, Wellington

Our speakers are now confirmed and members will receive the Conference programme details in June. Like last year, we will have our AGM 8.30—9.30am followed by morning tea and then Conference at 10am till 4.30pm.

This year we will issue conference certificates of attendance as members have suggested this would be helpful their records and for external reviews and to provide a record of their on-going professional development.

NZQA Industry Consultation meeting

AECTP Board members attended an industry consultation meeting following NZQA's agreement to review the First Aid unit standards. Different views were heard and it was agreed that a full review of the USs be undertaken to address First Aid emergency situations (whether at work, on the road, during sports and recreation or at home).

The new USs (which do not include Shock, Head, Neck, Spinal, Eyes, Poisons, Environmental (hot/cold) do not offer New Zealanders a well-rounded First Aid option and does not meet medium or higher risk industry needs as the gap between L2 & PHEC is too great. Meanwhile course time-frames and the Lifeskill document must be strictly adhered to, and will be the subject of the focussed reviews.

6400 series reinstated—The Board is happy that the L3 6400 was reinstated because the L2 26551 & 26552 were not a suitable equivalent. Concern that these L2 units are only suitable for low risk industry and the AECTP Board continues to liaise with NZQA to address the issue. NZQA is listening to the issues raised and is committed to addressing the problem through wide consultation the industry. We encourage members to participate where possible to restore a L3 UStd.

ECI 2 Revalidation Course 18 Nov 2013

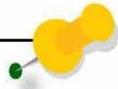
We confirm that Steve Jenkins will be taking an ECI2 *Emergency Care Instructors Level 2* revalidation course the day before Conference, at **5pm Monday 18th Nov 13** at the NZ Resuscitation Council, Wgt, the day before Conference. You must book directly at *NZ Resuscitation Council website*. Early booking is strongly recommended.

FA Unit Standards Review Plan

AECTP attended the high level scoping meeting of the FA USs review headed by Richard Thornton, NZQA DCE Qualifications. We are pleased to report that Richard's commitment to quality FA training provision supports Dr Karen Poutasi's conference presentation.

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Letter From The Chair

Hello AECTP Members

It seems to be a particularly busy time for a number of us in the First Aid industry. Many are trying to juggle priorities around changes in the industry and for those lucky enough to have on the horizon the NZQA focussed reviews, then there is an additional level of focus and all the best and good luck while you maintain business as usual (whatever that might be!)

The board has been representing your interests at different forums and meetings. We continue to grow the membership and process applications as they come around and we ask that if members are aware of others in the industry who would benefit from joining the association then get them to contact us. A rough calculation would have AECTP representing between 65 - 75 % of the providers in the First Aid industry. This is great and we have come a long way and with your support will go further.

The conference subcommittee are working behind the scenes, lining up venues, developing the program, and ensuring the list of guest speakers will add depth to our understanding of the area that we work in. I thank them in advance and on your behalf for the support and lengths they are going to.

The board members, each and every one of them, give freely of their time and assume all the costs of getting to and from board meetings and they continue to serve the industry and our membership with a level of positive enthusiasm that is a credit to them and an inspiration.

Regards

Julian Price, AECTP Deputy Chairperson

Workplace Health & Safety Report—link www.hstaskforce.govt.nz

The Report of the independent taskforce on Workplace Health & Safety has been released. This extensive report has several important impacts on the First Aid training industry. The recommendations include that “those in governance roles assume a due diligence duty to be held by directors and people (e.g. chief executives) who participate in decision-making”. The recognition of H&S being as strong as other fiduciary responsibilities, and that the ‘all practicable steps’ test approach should also be changed to the Model Law ‘reasonably practical’ test will also likely to have an impact on related educational matters, which will add strength to the need to be FA trained by quality training providers.

Quality FA—Frequently Asked Questions

We are happy to announce the release of a FAQ sheet for members to use to promote good quality First Aid training provision. This FAQ sheet may be distributed whenever a client asks what to look for, or if there is confusion about what constitutes a compliant FA course. We trust it is helpful as we work to increase understanding of compliance within the industry. Any feedback about the sheet is welcome.

New Members

AECTP welcomes new applications for both full or associate membership. Forms are sent out and the membership subcommittee assesses each for adherence to current best practice.

AECTP Meetings

Jan—Aug 2013, Members welcome

- 24 Jan 13, NZQA Peak Body forum*
- 31 Jan 13, NZQA Stakeholder forum*
- 22 Feb 13, Board Meeting, Wgt*
- 24 May 13, Board Meeting, Wgt*
- 28 June 13, Board Meeting, Wgt*
- 5 July 13, NZQA Project Advisory Gp*
- 10 July 13, NZQA Peak Body forum*
- 2 August 13, Board Meeting, Wgt*

Reporting against the AECTP Annual Plan

Measuring our progress against the annual plan shows positive results and will be finalised for the end of the 12/13 financial year. Our final plan achievements will be sent to members after the next meeting in late June.

AECTP Website

The Board is still considering the option for an AECTP website.

The benefits, which include the public having access to AECTP information and member entry for information, need to be balanced against the on-going expense.

We look forward to any ideas and your feedback or thoughts on this

AECTP Rules document

The AECTP Rules will be ratified as final in November at our 2013 Annual Meeting.

If you have any final amendments which you would like reviewed or reconsidered, please let us know.

Board members are always happy to hear from members.

Newslink

Scoping Meeting for the FA Unit Standards Review Plan

AECTP attended the high level scoping meeting of the FA Unit Stds review headed by Richard Thornton, NZQA DCE Quals. We are pleased to report that Richard's commitment to quality FA training provision supports Dr Karen Poutasi's conference presentation.

NZQA Rules programme

The Rules 2013 work plan is:

- Programmes of training and workplace training
- Cross-crediting/Recognition of Prior Learning
- Approval of standard-setting bodies.

NZQA Rules taking effect from January 2013:

- NZQF Programme Approval and Accreditation Rules, Jan
- EER External Evaluation & Review Rules, Jan
- Student Fee Protection Rules, Jan
- PTE Registration Rules Jan

NZQA Peak Body Forum

The forum continues to discuss agenda items including quality changes, school-specific issues, TRoQ, non-compliance, Rules, sanctions and incentives etc. With Tim Fowler leaving to become the TEC CE, NZQA's new Deputy CE QA will address the next meeting.

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NZQA Training schemes—NZQA are allocating Scheme applications to analysts along with their usual on-going business. The large number of applications has caused a backlog of work to be completed. Each TEO will be notified when their individual applications come up and Sector Relationship Managers are able to assist should this be needed.

NZQA Focussed reviews—Eleven First Aid providers are currently being visited by NZQA Reviewers to complete the focussed review process. For smaller TEOs this may take 1 day and for larger organisations up to 3 days.

The focus areas are: Subcontracting, course times and staff qualifications and PDD. AECTP wishes our members well as this progresses and we are happy to discuss this on a one-to-one basis should you wish to.

NZQA Compliance Assessment Monitor—The NZQA's QA Risk Team have appointed their a compliance assessment monitor who is now actively working to ensure First Aid training providers meet the minimum requirements as outlined in the Lifeskill and Requirements documents. The Board looks forward to improvements to compliance within the industry and supports any processes which are deemed appropriate to facilitate this.

NZQA rules work programme: changed compliance requirements—The NZQA's changed compliance requirements are released into one useful updated reference document, which is attached to this newsletter as it provides a good summary of the completed Rules which have taken effect since the Education Amendment Act 2011, between 31 Aug 2011 to 31 Jan 2013.

Current issues—The Board keenly awaits the NZ Resuscitation Council decision about whether or not CPR can be demonstrated on the table. At present CPRL2 assessment demonstration is required from a pool of scenarios which means that those with temporary or permanent inability to demonstrate CPR on the floor may not attain their certificate if their given scenario is a collapse onto the ground or floor. Furthermore, workplaces send staff for FA training expecting that their staff will then be able to apply their CPR skills in their workplace. However if the person is unable to demonstrate CPR in a scenario similar to their workplace (e.g. Rest home worker who couldn't perform CPR if the collapse is onto the floor) may potentially have an employment issue as they will then not have a current FA Certificate. The Council is deliberating on several issues, for example that enabling learning and providing positive learning outcomes will support the probability of active participation in a real life situation, and that employers need to take responsibility for the ability of their staff to do the job they are employed for. CPR is readily demonstrated on firm hospital beds. We'll release the decision as soon as it's available.

Outdoor training providers—Outdoor First Aid and/or PHEC providers may like to check out <http://adventuresmart.org.nz/resources/safety-codes.asp>.

In 2009 NZ's outdoor sector worked collaboratively to develop a consistent preventative outdoor safety message and resulted in NZ's Outdoor Safety Code, a 5 point code aimed at reducing risk in land-based outdoor activity. This complements the NZ Search & Rescue Council (NZSAR), the Maritime sector and the Water Safety sector which produced the Boating Safety code and the Water Safety code; and compliment the Firearms Safety Code and the Snow Responsibility Code.

Member Q & A

Member's question: *We are finding a lot of learners come to refresher First Aid courses expecting to be taught "Compressions only CPR" as the current CPR method, is this true?*

Answer: *No. CPRL2 must be taught and assessed as "30:2 no matter who" as is outlined in the Resuscitation Council Guidelines and as required for CPRL2 for US6402.*

The AECTP Board have agreed providers should be teach and assess 30:2, and outline the times when compressions only might be appropriately used.

It appears the problem may have arisen when there are, e.g. community sessions, club or church demonstrations, open days, demos for children, fairs, show days, street carnivals, life-saving demonstrations, defibrillator demos, shopping mall promotions etc. where CPR only is shown. Volunteers have their own ways, which may not be the same as required for CPRL2. This appears to be causing misinformation to be thought of as the required technique.

Tutors may find dispelling the misconception that it is best to do compressions only, may take some time in the classroom. However spending the extra time to explain why it is important to do CPR 30:2 compressions and breaths is not in vain because research shows that adequate compressions and breaths is the most important for survival rates.

Tools to help include the NZ Resuscitation Council Guidelines and the clearly laid out diagrammatic algorithm.

We will be happy to receive any feedback to see if some areas of NZ have a higher problem with this than others.

Board Member Notes

Shirley Kerr: A Personal Perspective

My current role with St John is the National Private Training Establishment and NZQA Manager. I have been involved with St John for 28 years in many different roles starting as a volunteer ambulance officer working up to an upskill paramedic and as a casual relief filling in for ambulance officers on leave. During this period I was the Secretary/Treasurer for the St John Taieri Area Committee and am currently a member of the Dunedin Area Committee.

In my role as an ambulance officer I was constantly reminded what a vital role the first aider played in the Chain of Survival and without their amazing skills many people would never make it to hospital let alone survive. It was just as obvious the number of people finding themselves faced with an emergency situation and completely out of their depth due to a lack of first aid knowledge and confidence. As a result of this I decided the path for me was to pass on my knowledge and educate the members of the public to empower them to be able to act in an emergency.

As part of my tutor role I became the regional then national moderator which added to my depth of knowledge with unit standards and assessment. Following this I moved onto the regional training manager position, and my present national position. As part of my current role I have been privileged to become an AECTP board member. This affiliation is invaluable enabling me to be involved with board members who have the same values and providing up to date quality first aid training and sharing with the members the many changes that are occurring in the first aid sector.

AECTP offers to its members an opportunity to provide professional development through their annual conference and providing refresher training for NZRC L2 CPR skills. We are always looking for new members with a passion for first aid and I would support and encouraging people to join.

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