



Darlington 21st Allstars JFC

First Aid and Medical Procedures during COVID 19

Storage of Medication

For medication that is normally kept with team officials (Creams, Inhalers and Epi-Pens) these will continue to be kept with them.

Administration of Medication

If a child within the group you are working requires their medication and you have it present you may administer this medication only if you have a care plan signed by a parent giving you consent to do so. If you do not have written permission then you must contact the parents to come and administer the medication instead.

Sickness / Unwell

If a child complains of feeling unwell then you must contact parents immediately and ask for the child to be collected ASAP. Whilst you are waiting for the child to be collected they are to be kept 2m away from other bodies.

Medical Isolation / Normal Treatment

If a child is displaying any of the COVID 19 symptoms (temperature, continuous dry cough, loss of taste or smell etc) they are to be placed in the medical isolation room which will be the Allstars Committee Room. If a child requires normal medical attention then the usual medical procedures should be followed.

Administering First Aid

When administering first aid full PPE must be worn and social distancing guidelines followed as much as possible. We understand that in some situations this will not be possible.

First Aid trained officials are able to administer first aid as long as in Full PPE.

Officials' mobile phones can be used to call 999 in an emergency.

Allergies/ Medical Conditions/ Ailments

Officials are to know their individual teams medical/allergy needs. A care plan should be in place for all individuals who have a medical/allergy need.

Reporting and Recording Accidents

Minor accidents must be recorded in a small First Aid Book. More serious accidents must be recorded in the small First Aid Book and on the Accident Report Form (obtainable from Adam) . A copy of the completed First Aid Book page is given to parents and the duplicate copy is retained by the club. All details need to be filled in, including any treatment given.

Darlington 21st Allstars JFC has the legal responsibility to report injuries, diseases and dangerous occurrences, as specified by the Health and Safety at Work Act (1974) and the Regulations 1995 (RIDDOR) as amended 2012.

PPE (Personal Protection Equipment)

All PPE equipment is obtainable from the Club Committee. Full PPE must consist of an apron, gloves and a surgical masks. Full PPE must be worn for all first aid related incidents. PPE must be changed for every new case, PPE is not to be reused or used to treat various individuals.

Removal and Disposal of PPE

Once you have finished with PPE it's important that it is removed safely and then disposed of correctly. Firstly, remove your apron, just snap the part that ties around your back and on your neck. Next, peel each glove off trying not to touch the outside of the glove. Place these items in the clinical waste bags and then in the bin. Wash your hands with either soap or sanitizer and then remove your mask placing this in the clinical waste bag too. Wash your hand again thoroughly. All PPE must be placed into the yellow clinical waste bag.

Sudden Cardiac Arrest

UNDER 18 – Normal CPR procedures apply as per those in your training.

OVER 18 - During this Covid-19 pandemic rescue breathing is considered outside the scope of first aid practice. In adults, it is recommended that you do not perform rescue breaths or mouth-to-mouth ventilation; perform chest compressions only^{12,17}.

- Confirm no signs of life;
- Early call for medical assistance will be vital: – Ambulance; – AED

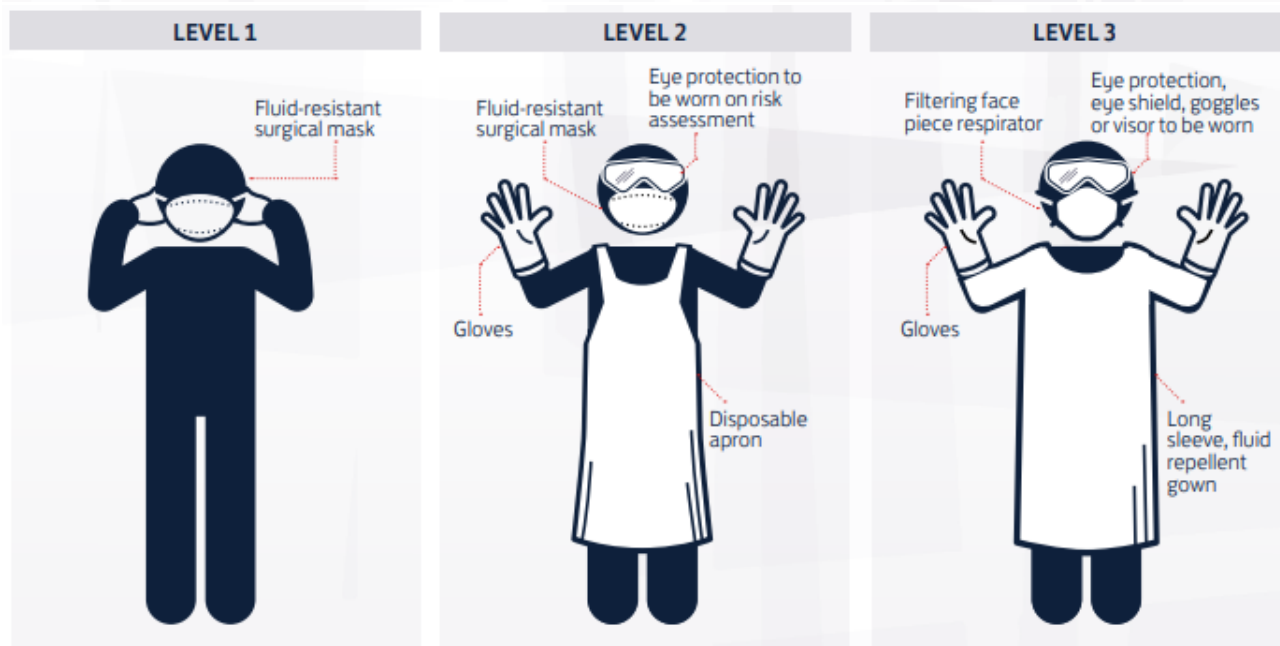
Before performing chest compressions on any individual a covering must be put over their mouth as this is classed as an AGP.

Correct Level 3 PPE should be worn.

PPE Defined

| What are the hazards? | Gloves | Apron | Fluid-resistant long-armed gown/coveralls | Fabric/cloth mask [^] | Fluid-resistant Surgical Face mask Type IIR | Filtering Face Piece Respirator 3 (FFP3) mask ^{^^} | Eye Protection Goggles/Full face visor in addition to personal spectacles |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------------------------------------|--------------------------------|---------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------------|
| | SINGLE USE* | SINGLE USE* | SESSIONAL USE** | SESSIONAL USE** | SESSIONAL USE** | SESSIONAL USE REUSABLE*** | SESSIONAL USE REUSABLE*** |
| NON-MEDICAL SCENARIO Where social distancing may be compromised ⁷ including at training | X | X | X | ✓ | X | X | X |
| LEVEL 1 Where government-advised distancing may not be maintained at all times | X | X | X | X | ✓ | X | X |
| LEVEL 2 Within 2m of player, which may include face to face contact for assessment and management of all individuals including those who are positive or symptomatic | ✓ | ✓ | X | X | ✓ | X | ✓ |
| LEVEL 3/AGP Aerosol-generating procedure (AGP or high potential for aerosol) | ✓ | X | ✓ | X | X | ✓ | ✓ |

[^] 3 layers: 1st water absorbent cotton | 2nd filter layer | 3rd is water resistant¹⁶
^{^^} Please be aware WHO¹⁶ does recommend FFP2 mask as an alternative in FFP3. However FFP3 is included in this framework as this is in line with PHE
* Single use: Equipment that must be changed after each contact
** Sessional use: Worn for a period of time when undertaking duties in a specific clinical care setting/exposure environment; a session ends when the responder leaves this defined remit; however, it should be disposed of if it becomes moist, damaged or visibly soiled;
*** Reusable equipment appropriately decontaminated to PHE standards that can be reused¹³.



Adult Algorithm

- **Safe approach** in appropriate gloves, apron, fluid-resistant surgical mask (FRSM) and eye protection*
- Look for signs of life and normal breathing (but **do not** listen at the mouth for breath sounds, keep a distance)
- Collapsed and unresponsive to verbal stimuli - presume sudden cardiac arrest
- Head Tilt Chil Lift (HTCL)/Jaw thrust as required.
- If no PPE worn – establish signs of life from the Government advised social distance.

SIGNS OF LIFE?

YES
(player is breathing normally)

NO
(player is NOT breathing normally)

CALL FOR HELP

- First aid responders PPE as above
- Ambulance if required

CALL FOR HELP

- Ambulance
- Request AED immediately
- First aid responders (EAP) PPE as above

PLAYER CONSCIOUS

PLAYER UNCONSCIOUS

Open the airway HTCL/Jaw Thrust
Begin chest compressions ONLY with covering over face*
Apply AED as soon as it arrives
Continue until ambulance arrives or player shows sign of life

+/- Manual in line stabilisation dependent on mechanism of injury

Airway – clear /noisy
• HTCL /Jaw thrust only

Breathing – with O₂ (if present)

Circulation – check colour/ signs of bleeding

Dysfunction – check response

Everything else – if requires extrication await ambulance crew. If player able to safely walk from field of play take to side of pitch – social distance from other players

Apply Manual in line stabilisation

Airway – jaw thrust if required

Breathing – with O₂ (if present)

Circulation – check colour/ signs of bleeding

Dysfunction – check response

Everything else – ensure no other injuries.

Consider positioning if airway at risk (2 person log roll)

Do not extricate – await ambulance arrival

Do not begin rescue breathing await ambulance* ^
If the player shows signs of life, move to blue side of algorithm

Child Algorithm

