

## ***SETTING UP A FIRST AID POST***

### **GENERAL**

1. The first aid post is the central area from which Brigade members perform most of their patient care services. A well-organized first aid post will improve efficiency, and will enhance the image of the Brigade for those visiting the post.

### **ARRANGING PATIENT CARE SERVICE**

2. When the client requests patient care coverage, have them complete the *Request for Brigade Coverage for Community Service* form (see Annex A), either over the telephone, in person, or by mail/fax.
3. Essential information to be supplied includes the date and time of the event, the location of the event, the expected number of people, and any other expectations of the client. From this information, the Community Services Coordinator should be able to determine the number of Brigade members required, as well as specific equipment.
4. The Community Services Coordinator should then contact members to arrange coverage of the event, and call the client to confirm the arrangements. This is the ideal time to inform the client of an appropriate level of donation, by providing the flyer *How much is your peace of mind worth?*, available from your Provincial/Territorial Council.
5. Determine whether the event organizer is providing meals or snacks for volunteer Brigade members. Encourage the event organizer to inform the public present that volunteer community services are being provided by the St. John Ambulance Brigade.

### **INDOOR FIRST AID POST**

6. A room is usually set aside for the First Aid Post (eg. in an arena, school, commercial hall, etc.). There should be good signage to let all participants know where the First Aid Post is located.
7. All Brigade members on duty should arrive early, to become oriented to the facility and to the first aid post. Specifically, they should determine the following:
  - where is the nearest phone?
  - what supplies are available?
  - where are the supplies located?
  - is ice/running water available, and where?
  - where are emergency numbers posted?
  - is there a doctor or nurse available, and how can they be reached?

- are radios or a telephone available for emergencies?
- where are the emergency exits and the fire extinguishers?
- where are the public washrooms?
- what is the nature of the event?
- how many people are expected at the event, and where will they be located?
- who else is on Brigade duty?

## **OUTDOOR FIRST AID POST**

8. With very few exceptions, Brigade vehicles are used as mobile first aid posts / patient care stations, and not for patient transport. Sometimes a tent is provided for additional shelter when the vehicle is used as an outdoor first aid post. When Brigade vehicles are used to transport patients, special arrangements must be made. See StJCI 2-7-3 on Property and Equipment for details on the use of Brigade vehicles.

## **ON DUTY**

9. It is important to maintain a professional bearing while providing community service. The following checklist will help ensure this happens:
  - a. remember that the safety of the caregiver is the number one priority;
  - b. use the list of suggested first aid supplies in Annex B, and ensure all members use protective gloves and masks where required (see StJCI 2-4-7 on Risk of Viral Infection);
  - c. wear appropriate dress, especially for outdoor duties;
  - d. discuss emergency plans, determining procedures for possible emergencies specific to the event being covered, and the exact procedure for obtaining additional emergency assistance (ie. ambulance, fire, police);
  - e. ensure that both you and the first aid post are clearly visible and identifiable as St. John Ambulance Brigade;
  - f. prepare the first aid post:
    - i. make sure the location is as clean as possible;
    - ii. ensure there is adequate lighting, ventilation, water supply, heating and toilet facilities;
    - iii. check your communication devices; set up the treatment area(s);
    - iv. check availability and working order of all equipment
  - g. greet casualties/patients immediately, and remain calm, efficient, firm and friendly;
  - h. ensure the privacy of every casualty/patient;
  - i. ensure all appropriate documentation is completed accurately and in full; keep records confidential and safe (see StJCI 2-7-4 on Patient Care Records);

- j. at the conclusion of the duty, clean and pack away the equipment and secure the location as appropriate. Ask the client to complete the *Evaluation of Brigade Coverage for Community Service* (see Annex C) to seek feedback on the services you provided.

## **PERSONNEL ON DUTY**

10. a. See StJCI 2-9-3, paragraphs 5 to 8, on Seniority, to determine the appropriate person to be responsible for the duty. The person in charge is responsible for:
    - i. the establishment and operation of the physical resources assigned;
    - ii. conduct of all members at the duty;
    - iii. the prompt and accurate maintenance of all reports required to support the duty;
    - iv. crowd control.
  - b. A Medical Officer on-site has the entire charge and control of the First Aid Post only as far as medical matters are concerned. If present, the Medical Officer will give instructions to the officer in charge as necessary for the medical treatment of patients.
  - c. A Nursing Officer on duty where a Medical Officer is not present is in charge only as far as medical matters are concerned.
  - d. The performance of patient care procedures by a Brigade member other than a nurse or doctor is limited to those procedures that are specified in the courses of instruction authorized by St. John Ambulance, to the level to which the individual is qualified.
  - e. Youth, through their Officers, may arrange to attend community service, for the purpose of assisting and learning. Youth (under age 18) may not perform unsupervised public duties. They must be accompanied by an adult member or Youth Officer to whom they are accountable. The tasks performed by Cadets and Crusaders on public duty should be similar to those performed by adult members, except that they will be under supervision.
11. In the case of Brigade units being asked to take part in a public duty outside their Council, the Provincial/Territorial Commissioners of both Councils concerned should be consulted and approve the duty.
  12. A public duty is an opportunity to recruit potential Brigade members, to educate the public about St. John Ambulance, and to encourage members of the public to take a St. John Ambulance course or purchase St. John Ambulance products. Uniformed volunteers are the most visible part of St. John Ambulance, and should have an ample supply of promotional materials for distribution at all events.

13. It is the duty of members of Brigade who are patient care providers to render patient care, when necessary, irrespective of time or place and whether in uniform or not. Membership in the Brigade does not, however, confer upon the individual the right to take up a position in public for the purpose of rendering patient care, or to force their services upon persons who may be injured or in need of assistance.

### **PROTECTION UNDER THE LAW**

14. As front-line caregivers, Brigade members are legally protected from being successfully sued as long as:
  - a. they identify themselves as first aiders and get permission to help the injured or ill person before touching them (this is called consent);
  - b. they use reasonable skill and care while helping the person;
  - c. they do not abandon the person.
15. The law says everyone has the right not to be touched by others, and caregivers must respect this right. After identifying themselves to their patients, caregivers must ask for permission to help. If the patient says yes, the caregiver has consent and can proceed to help. If the patient does not answer, or does not object, the caregiver has implied consent and can proceed to help. Some specific situations follows:
  - a. If the patient is unresponsive and relatives are present, the caregiver must ask the consent from a member of the patient's immediate family.
  - b. If the patient is an infant or young child, the caregiver must ask for consent from the child's parent or guardian. If there is no parent or guardian at the scene, the law assumes the patient would give consent if they could, and the caregiver has implied consent to help.
16. A person has the right to refuse an offer of help and not give consent. In this case, the caregiver must not force assistance on a conscious casualty. Instead, other actions may be taken, such as controlling the scene or calling for medical help.

### **REPORTING**

17. Members are encouraged, for their protection, to report in writing to their Divisional Superintendent every instance of patient care rendered by them, whether they were on or off duty. (See StJCI 2-7-4 on Patient Care Records.)
18. Be sure to document consent. Refusal of care should be recorded on the Patient Care Record.

19. Any incident occurring in the course of normal voluntary service which is deemed to be newsworthy, or any exceptionally meritorious act of service of a Brigade member, should be communicated through proper channels to the Provincial/Territorial Commissioner, to ensure appropriate recognition takes place. Instances of life-saving performed by Brigade members may warrant formal recognition (see StJCI 1-4-1 on Life-saving Awards).