



CIVIL AVIATION ADVISORY PUBLICATION

CAAP 55

(Issue July 2011)

AVIATION EMERGENCY MEDICAL SERVICES

INFORMATION AND POLICY REGARDING FIRST AID FACILITY APPROVAL

1. PURPOSE

This Civil Aviation Advisory Publication (CAAP) provides information and guidance regarding the approval of EMS training facility, and EMS providers and/or Instructor.

2. STATUS OF THIS CAAP

This is the first edition of CAAP 55 it will remain current until withdrawn or superseded. This document involves the adoption of ICAO Annex 6 (Part I and III) requirements & recommendation to the contracting state in relation to the e emergency medical services provided on board.

3. APPLICABILITY

This CAAP applies to all UAE Operators.

4. REFERENCE:

Annex 6 (part I & III)

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CHAPTER 1-INTRODUCTION

The GCAA approves training center, training program and Instructors to provide Emergency Medical Services onboard. The Training programs are in accordance with ICAO Annex 6 and international best practice organization standards and guidelines.

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CHAPTER 2-Training center requirements

1. **Instructors**: to establish a training center, the center must have at least one authorized affiliated Instructor. The GCAA will approve the instructor to certify (issue Successful Completion Card/or certificate to) the cabin crew participants in the program via courses conducted through the training center.

Note: Training Center Manger may employ additional Instructor who is not affiliated with the Training center but he is approved by the GCAA to teach the programs offered.

- 2. The training center must have recognized training program for First Aid, CPR and AED.
- 3. The training center must have Training Center Manger who will be responsible for ensuring that the training center and its affiliated Instructors adhere to the standards and guidelines contained in this CAAP. This responsibility includes, but is not limited to:
 - 3.1 Ensure that all Instructors affiliated with or teaching classes for the training center are properly qualified and approved /or authorized by the GCAA
 - 3.2 Ensure that the training facility GCAA approval fees is paid to GCAA on annual basis
 - 3.3 Ensure that all the Instructors GCAA approval fees is paid every two years.
 - 3.4 Immediately notify the GCAA of any change in an affiliated Instructor's status
 - 3.5 Ensuring that appropriate equipment is available to Instructors for use during the courses in sufficient quantities to allow the student adequate hands-on practice of required psychomotor skills
 - 3.6 Ensure adequate classroom health and safety to prevent injury and minimize the risk of disease transmission
 - 3.7 Removing those Instructors from the Training center involved in dishonest, unprofessional, unethical or illegal conduct, including but limited to, issuing unearned certificate or withholding properly earned certificate and notifying the GCAA of their removal.
- 4. The Training Center must have policies and procedures that address, at a minimum:
 - 4.1 certificate and final exam security
 - 4.2 Classroom and Instructor quality assurance
 - 4.3 Equipment maintenance and contamination
 - 4.4 Professional conduct

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Note: These policies and procedures must be available in writing for inspection upon request.

5. Record Maintenance

The training centre need comprehensive and legally sound document retention practices to protect themselves and their employees and manager s in case of litigation or investigation .All training centre records are official documents that must be made available upon request by the GCAA Inspector. The Training Center is required to keep clear, legible and orderly records

pertaining to Instructors, courses and course evaluations for no less than five years, including:

5.1 Copy of GCAA Approval Letter for the Training Center

5.2 Copy of All Instructors approval letters

5.3 Copies of All Instructors course completion documentation

5.4 Copies of the original Instructor certification (e.g. Instructor's American Heart

Association Instructor card)

5.5 A completed course roster reflecting the participant's names, courses date, time, location, type of the course, Instructor's name, instructors' signature for each course

5.6 Records of students' scores for the courses in which written examination were given

5.7 Skill performance Evaluation Sheet

5.8 All Documentation related to Quality Assurance investigations or other types of problem

resolution.

Note: All records may be stored electronically.

6. Course Offerings

The course syllabus offered by the Training Center – must comply with an internationally recognized organization (e.g. AHA for CPR, ASHI for first Aid course). The GCAA must approve all Cabin Crew emergency medical training program .For the purpose of Aviation emergency medical services for the airline, the training centers are approved to provide the following

programs/or courses:

6.1 Basic First Aid for the aircraft Passenger (Adults/children/New Borne/Emergency Child

birth)

6.2 CPR and AED for the Aircraft passenger

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7. Training Center communication

Training Center Manger must maintain a valid email address. This email address will be used by the GCAA to communicate updates and other important information. The Manger is responsible for distributing all information provided by the GCAA to affiliated Instructors.

8. Training Centre Compliance with Laws and Regulations

Training center are responsible for being familiar and complying with all applicable UAE Laws and administrative rules governing personnel licensing as they pertain to the delivery and administration of the programs. Any state specific requirements for individuals or Training centre approvals shall be maintained.

CHAPTER 3: APPROVAL PROCEDURE FOR THE TRAINING CENTRE

This Civil Aviation Advisory Publication (CAAP) provides guidance and information to those individuals who propose to apply for approval to conduct Fist Aid training programs for Pilots, and flight attendants. The procedures enable an individual to determine their capability of meeting the GCAA's requirements. This procedure is intended to harmonise training policies and requirements with Annex 6.

1. Overview

The initial issue of Emergency Medical Training Centre approval takes place in five distinct phases:

- (a) Pre-application Phase
- (b) Formal application
- (c) Document evaluation
- (d) Inspection
- (e) Certification

2. Pre-Application Phase

All applicants must apply in writing expressing the intent to deliver Emergency Medical Training centre and requesting to be approved as training facility. The application must be made to the GCAA (Director General Office), Dubai, U.A.E. Email: customerservice@gcaa.ae.

The pre-application Statement of Intent is reviewed by the GCAA Aeromedical Inspector. It should contain at least the following information:

- (a) Training Programs details:
 - Types of First Aid Training programs /or courses intended to organize these programs must use the most current international CPR, AED and First Aid Guidelines.
 - The method used to deliver this training (e.g. Video/or DVD components, Hands-on practice or written workbooks).
 - The programs <u>approval</u> by other local agencies or external recognized organization (e.g. AHA,ERC,...etc)
 - Reason for licensure.

Note: all First Aid Training must cover the subjects and Medical Conditions required in accordance with **CAR-OPS 1.745 & 1.755**

3. Process

On the basis of information provided during this phase, the Aeromedical Inspector will provide the applicant with the following information:

- (a) Application procedures
- (b) Documents required
- (c) license requirements from other government authorities if applicable
- (d) GCAA Fees for training facility approval.

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4. Formal application Phase

The formal application phase commences when the applicant lodges a formal application for a Training Certificate, accompanied by various documents intended to prove or describe the manner in which he/she intends to conduct the training and the GCAA makes formal assessment of the applicant's proposal. The formal application for the facility approval (MED Form-30) and for the Instructor approval (MED Form-25) must be submitted to the GCAA.

The formal Application Form must be accompanied by:

- 1. Passport copy of the Instructors
- 2. Intended training courses and the syllabus.
- 3. Equipment List
- 4. Current Curriculum Vitae of the Instructor
- 5. Copy of the Applicant Instructor card.
- 6. Manuals and other training materials
 - AED Instructor Manual
 - CPR Instructor Manual
 - First Aid Instructor Manual
 - First Aid Training Video or DVD
 - CPR/First Aid Student Workbook which is Designed for Training and Quick Reference
 - Copy of Emergency Patient Assessment Sheet
 - Copy Examination outline and Marking
 - Template of the certificates

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5. Documents Evaluation Phase

The document evaluation phase involves detailed study of the manuals and other documents,

which accompanied the formal application. The satisfactory evaluation of the documents which

was originally submitted is a prerequisite for the inspection phase to begin. The Aeromedical

Inspector will review the list of documents and manuals ensuring adequacy and compliance for

the type of training proposed by the individual.

6. Inspection Phase

After reviewing the documents, the Aeromedical Inspector will inform the candidate and will

setup a date and time for the facility survey. Once the facility survey is satisfactorily completed

the GCAA will inform the applicant in writing of the disposal of his or her application, and that

the approval is granted for a period of 1 year.

7. Duration of approval

The training facility approval is effective for 1 year from the date of training approval letter. In

the event of facility relocation or change in practice, the approval will terminate and may be re-

issued, on request to the office of Licensing Department.

8. Fees of GCAA approval

For First Aid training facility approval certificate, fee is AED 5000/- per year.

9. Renewal Procedure

1. GCAA (MED-30) Form

2. Renewal fee- AED 5000/-

3. Numbers of training done during the designation period.

4. Instructor CPD record.

5. Satisfactory training Audit, to be conducted by GCAA to check the practical training

program, and student knowledge assessment and practical examination; this can be

done at any time after initial approval.

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CHAPTER 4- FIRST AID INSTRUCTORS DESIGNATION

1. Definition

The GCAA approved Instructor should have sufficient confidence and competence to teach, evaluate and certify participants in Aviation First Aid Training program.

2. Qualification and training

Applicants for Aviation First Aid Instructor Designation License must provide:

- i. Evidence of successful completion of a recognized Instructor Development Course.
- ii. Evidence of successful completion of a Train the Trainer course/or Instruction Technique Course.
- iii. Current certification card as a provider for the programs the Instructor intends to teach
- iv. The applicant must possess a valid license as first responder or / EMT or /Nurse or/Paramedic in the geographical area in which the designation is sought, issued either by HAAD or Dubai Corporation for ambulance Service as might be applicable.
 - v. The applicant must affiliate with an approved training centre, at an established office address.
 - vi. **Evidence of experience.** The Instructor must be engaged in the practice of training of at least 2 years .
 - vii. The GCAA will recognise and accepts current and valid Instructor and Instructor-

Trainer credentials from the following organisations:

- a. American Safety & Health Institute (ASHI).
- b. American Heart Association (AHA)
- c. European Resuscitation Centre (ERC)
- d. American Red Cross (AMC).
- e. National Safety Council.
- f. St. John Ambulance
- g. Other credentials may be accepted on a case-by-case basis.

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Note:

- 1. Instructor authorization is subject to a AED 300 fee every 24 months.
- 2. Change of Training Center affiliation, or any other change will results in a new expiration date.
- 3. Only First Aid Instructors currently approved by GCAA and actively affiliated with an approved Training Center may issue properly earned First Aid certificates.

3. Instructor designation renewal requirement:

- 1. GCAA MED- 25 Form
- 2. Current affiliation with an approved Training Center;
- 3. Teaching at least two First Aid courses per year ,during the designation period (two years)
- 4. Compliance to Continuing Professional Development (CPD) requirement; by attending Instructor meetings and/or updates as required by the AHA, or other affiliated organization.
- 5. Submission of the appropriate Instructor fee

Note:

- 1. Individual Instructors are responsible for maintaining evidence of active teaching and providing this evidence to their Training Centers. "Evidence" means a copy of two student course rosters.
- 2. The programs that a given Instructor is authorised to teach are based on the Instructor's credentials and past experience

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CHAPTER 5-EMERGENCY MEDICAL SERVICE CENTER AUDIT

1. General Regulatory Compliance

It is important to realize that in the United Arab Emirates, there is no single agency that provides endorsement, acceptance, licensure, recognition, or certification of emergency medical services. For the purpose of Flight attendants first aid training, the GCAA will recognise and/or approve the training program which is approved by international recognized agency and guidelines.

GCAA Regulatory oversight occurs against ICAO requirements, CAR-OPS requirements and against best organization practice concerning health and safety.

GCAA will approve widely accepted educational programs and materials and authorizes Instructors to teach them according to specific standards and guidelines for quality assurance. Airline /or private First Aid Training Centers and their authorized Instructors must be completely familiar with the GCAA regulations and current international guidelines and requirements of applicants to whom they offer training and certification.

GCAA will not accept financial or legal responsibility for false, deceptive, misleading or incomplete advertisements produced by Training Centers and authorized Instructors. False advertisement is grounds for revocation of authorization and may also result in criminal/or civil legal action.

2. Objective of the training centre audit

- i. Assure the continued integrity, credibility, and quality of training course and materials.
- ii. Ensure fair and consistent quality assurance practices.
- iii. Provide recommendations to the training centre to improve their services.

3. Training Center Monitoring and Mentoring Process

The Training Center Monitoring is a quality-valued review of the capacity of a Training Center to conduct Emergency Medical Service courses according to GCAA regulation and international guidelines.

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4. Training Centre Audit

- i. Once the training site visit is complete and the training approval certificate is issued, an audit will be, conducted once a year for the first two (2) years of the approval. At the end of two (2) successful annual audits, if no concerns have been documented, audit can be conducted every two (2) years. However, the GCAA reserves the right to conduct an audit at any time.
- ii. Reviewing the Training Site on an annual basis to coincide with the training centre approval renewal, using the Training Centre Checklist (MED –Form 18).
- iii. The purpose of the training centre Audit to ensure compliance with the Program Guidelines between the GCAA Regulation Training centre programs.
- iv. The Training centre review may include but it not limited to on-site review of the Training Site.
- v. Course monitoring is part of a Training Site review, although it does not have to occur simultaneously with the Training centre audit. GCAA may also anonymously attend classes conducted by Training Centers

vi. The site review will, as a minimum, include the following:

- A review of Instructor records and credentials.
- A review of record keeping and documentation related to implementation of approved training courses.
- A review of course outlines, educational materials, and equipment used for Airline first aid training courses.
- Manikin cleaning instructions and records
- A review of adherence to GCAA requirements and guidelines.
- A consultation with Training centre staff, as requested or appropriate, to ensure understanding of requirements.
- Provide proof of Business License (if applicable).

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- Required Training Center policies and procedures.
- Rosters, skill performance evaluations, and Written Knowledge Review (examination) scores (if given) for All First Aid classes conducted.
- If problems or potential problems have been identified and documented, the GCAA Inspector can recommend to continue annual or more frequent Audit until the problems have been resolved or to terminate the Training centre approval.
- The GCAA reserves the right to conduct an audit at any time without prior notice to the Training centre.
- GCAA reserves the right to require other documents at its discretion.
- vii. Training Center documents will be examined by GCAA Inspector for adherence to GCAA First Aid guidelines. Training Center Directors will be informed of the results of their Audit and if their documents fail to meet GCAA's requirements, will be given assistance and direction to correct errors or misunderstandings. Training Centers that fail to promptly submit requested documents risk suspension.

viii. **Revocation of Approval or Authorization**

Approval as a Training Center and authorization as GCAA First Aid Instructor is a privilege, not a right, and may be denied, suspended, or revoked at any time at the sole discretion of GCAA. GCAA accepts reciprocity from other internationally recognized organizations for authorisation as a First Aid Instructor. Consequently, evidence that another internationally recognised organisation has revoked an instructor's authorisation may in turn, result in revocation of GCAA First Aid Instructor authorisation.

Upon revocation, the instructor and/or Training Center must cease conducting all GCAA First Aid training programs, may no longer represent that it is authorised to provide First Aid training programs.

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APPENDIX I

TRAINING SYLLABUS

- (a) Physiology of flight including oxygen requirements and hypoxia.
- (b) Medical emergencies in aviation including:
 - 1. Emergency childbirth,
 - 2. Asthma,
 - 3. Airsickness,
 - 4. Gastrointestinal disturbances
 - 5. Stress reaction and allergic reaction,
 - 6. Epilepsy,
 - 7. Heart attack,
 - 8. Stroke,
 - 9. Shock,
 - 10. Diabetes
- (c) Basic first aid and survival including care of:
- 1. Unconsciousness
- 2. Burns
- 3. Wounds
- 4. Fractures and soft tissue injuries
- (d) Artificial respiration and cardiopulmonary resuscitation
- (e) The use of appropriate airplane equipment including first aid kits and first aid oxygen

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APPENDIX II

CONTENTS OF FIRST-AID KITS

Bandages (unspecified)

Burns dressings (unspecified)

Wound dressings, large and small

Adhesive tape, safety pins and scissors

Small adhesive dressings

Antiseptic wound cleaner

Adhesive wound closures

Adhesive tape

Disposable resuscitation aid

Simple analgesic e.g. paracetamol

Antiemetic e.g. cinnarizine

Nasal decongestant

First-Aid handbook

Gastrointestinal Antacid +

Anti-diarrhoeal medication e.g. Loperamide +

Ground/Air visual signal code for use by survivors.

Disposable Gloves

A list of contents at least in 2 languages (English and one other), this should include

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information on the effects and side effects of drugs carried.

CONTENTS OF EMERGENCY MEDICAL KIT

The following should be included in the emergency medical kit carried in the aeroplane:

Sphygmomanometer – non mercury

Stethoscope

Syringes and needles

Oropharyngeal airways (2 sizes)

Tourniquet

Coronary vasodilator e.g. nitro-glycerine

Anti-spasmodic e.g. hyoscine

Epinephrine 1:1 000

Adrenocortical steroid e.g. hydrocortisone

Major analgesic

Diuretic

Antihistamine e.g. diphenhydramine hydrochloride

Sedative/anticonvulsant e.g. diazepam

Medication for Hypoglycaemia, hypertonic glucose and/or glucagon

Antiemetic e.g. metoclopramide

Atropine

Digoxin

Disposable Gloves

Bronchial Dilator -injectable and inhaled form Needle Disposal Box

Catheter

A list of contents in at least 2 languages (English and one other). This should include information on the effects and side effects of drugs carried.

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APPENDIX III

REQUIRED TRAINING MATERIALS

REQUIRED TRAINING EQUIPMENT FOR STUDENT (CABIN CREW) LEVEL RESUSCITATION AND FIRST AID COURSES

Each training centre manger must ensure that all appropriate resuscitation equipment is available for use by Instructors and students. All equipment must be clean, operable and ready for use in adequate quantities at each course conducted. Equipments needed for the cabin crew training may include the following:

- Infant, child and Adult CPR manikins with protective and sanitizing accessories.
- CPR Barrier Devices (face shields, masks) in adult, child and infant sizes
- Automated external Defibrillator trainer
- Supplemental oxygen delivery devices in adult, child and infant size.
- Nasopharyngeal /oropharyngeal Airway set in adult, child and infant sizes.
- First Aid Kits and Supplies

Note: equipment needs may vary according to the airline protocol. The use of any equipment not listed above must be added to the organisation/airline policy, and the Cabin crew must be trained to use them (e.g. Tempus and Ani-t choking device).

REQUIRED INSTRUCTION MATERIAL FOR STUDENT (CABIN CREW) LEVEL RESUSCITATION AND FIRST AID COURSE

The training centre must acquire:

- 1. An authorised version of the appropriate video/DVD for each program taught
- 2. An authorised version of the appropriate power point CD for each program taught
- 3. Instructor Manual for each program to be taught(as per his organisation)
- 4. Each Instructor must have access to:
 - 4.1 The latest version of the organisation Instructor Guide and
 - 4.2 A sufficient quantity of printed organisation Handbook for distribution to

CPR/First Aid Student Workbook which is **Designed for Training and Quick Reference** and must be:

- i. Easy-to-use
- ii. Signs, symptoms & treatment are easily identified
- iii. Topic heading on outer margin for easy look up

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iv. Just the right amount of information – not too much, not too little.

APPENDIX IV

CLASSROOM STANDARDS

1. Ensuring adequate facilities for learning

Training centre must ensure that an adequate and appropriate space is provided for optimal learning. In general the following parameters should be adhered to:

- 1.1 Classroom size of no less than 400 square feet
- 1.2 Chairs and tables to accommodate each participant and Instructor.
- 1.4 For courses involving CPR, carpeting or mats on which students may kneel
- 1.4 Appropriate audio-visual equipment.
- 1.5 lighting, heating cooling and ventilation must meet minimum standards

2. Minimizing the Risk of Disease Transmission

To protect the health and safety of the participants and Instructors and prevent the spread of infectious disease, the Instructor must:

- 2.1 follow all recommendation regarding decontamination and sanitary practice supplied by the manufacture of the manikins used during the training.
- 2.2 provide the participants with sanitary personal protective equipment, including but not limited to face shields or masks and gloves.
- 2.3 clean their hands often with soap and water and encourage their student to do the same.

3. Preventing Injury

To prevent health and safety of students and Instructors to prevent injury, the Instructors must: Warn students to avoid awkward or extreme postures of the body. Improper lifting and moving is a leading cause of back injury. All students must pay attention to proper lifting and moving techniques during practice. Warn students that practice of these moves may aggravate previous back injuries and they should not practice moving simulated victims/patients if they have history of back problems.

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- Warn students about inappropriate student-on- student practice. Certain psychomotor skills are not appropriate for student-on –student practice and must be performed on training manikins designed for that purpose. Examples of these skills include abdominal thrusts, rescue breathing, and chest compression.
- Ensure a physically safe learning environment. Make sure there are no obvious hazards in the classroom such as extension cords that present a tripping hazard, know and share:
 - The location of nearest telephone.
 - Location of fire/emergency exits, fire alarm pull stations, and best emergency evacuation route.
 - The location of the first aid kit, AED and fire extinguisher.
- Verify that each AED Trainer is not a live AED and the device is incapable of delivering a shock.

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APPENDIX V

DECONTAMINATION PROCEDURE

CPR Equipments cleaning and decontamination

Objective: Minimize the risk of cross contamination between students/instructors by providing step by step instructions on cleaning CPR manikins and equipment.

Manikin Cleaning between student use:

1. Clean the face, the inside of the mouth, and other parts used by previous student with a saturated, clean hypochlorite

solution or 70% alcohol 2x2 or 4x4. The surfaces should remain wet for at least 30 seconds before they are wiped

dry with a second piece of clean, absorbent material.

2. If a protective face shield/plastic airway is used, you will need to change it prior to the next student.

Manikin Cleaning after the class:

- 1. Disassemble manikin as directed by manufacturer.
- 2. Thoroughly wash all external and internal surfaces (also reusable face pieces) with warm soapy water and brushes.
- 3. Rinse all surfaces with fresh water.
- 4. Wet all surfaces for 10 minutes in a mixture of ¼ cup sodium hypochlorite solution to 4 liters of tap water. This solution must be made fresh for each class and discarded after each use.
- 5. Rinse with fresh water and dry all external and internal surfaces. Then rinse with alcohol.
- 6. Let air dry.
- 7. Keep CPR equipment clean by storing in a clean area.
- 8. See the BLS instructor manual for more information.

Ref: CDC recommendations

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