

ALSG position statement on Coronavirus (COVID-19) updated 19.03.2020

Background

We are following [advice from PHE \(Public Health England\)](#) and we continue to monitor current situations. We advise our course centres overseas to follow advice from their in-country equivalent or from the [WHO guidance](#).

We take our responsibilities to our staff and course attendees very seriously and will undertake a decision on a day-by-day basis to protect everyone's health and prevent the spread of the virus.

Contacting us

We are implementing our business continuity plans and all of our staff are now working from home. We continue to be available via our normal contact routes for any questions from course centres, instructors and course candidates.

Courses

Courses at ALSG in the remainder of March and April are postponed. We are making decisions about May and June dates by the end of March; other course centres in the UK and overseas will liaise directly with their candidates and faculty about their position and approach.

Following guidance from PHE we have postponed courses at ALSG (as above) and advise other centres based in England to do the same. Centres in other countries are advised to take this action if prompted by their in-country or WHO guidance.

For courses at ALSG, candidates and faculty will be notified by text alert/email and they will be informed how they can transfer to a course at ALSG at a later date.

Courses - General advice

1. Before the course:

- 1.1. Candidates and faculty should be advised to postpone to a future course if they:
 - Have been in close contact with someone who has the COVID-19 infection
 - Have travelled from any countries/regions identified as being at higher risk. This may vary from country-to-country and local advice should be sought. For UK courses, [the list is available here](#).
- 1.2. Course centres should also ensure that they have robust contact details so that they can notify candidates and faculty at short notice if a course has to be cancelled.
- 1.3. If course centres find that faculty numbers are reduced and require advice about the viability of a course, then contact ALSG via the normal contact routes.

2. **During the course:**

2.1. Remind candidates, faculty and co-ordinators to be meticulous and:

- ✓ cough or sneeze into tissues before binning them or into a bent elbow, and
- ✓ wash hands more often (for 20 seconds each time), using soap and water or hand sanitiser, especially:
 - after handling or working with manikins or other course equipment
 - after blowing their nose, coughing or sneezing
 - before eating or handling food.

3. **After the course:**

3.1. Remind candidates, faculty and co-ordinators to advise the course centre if they subsequently find they have symptoms. The course centre should then notify all other participants on the course and any relevant authorities.

Courses – specific guidance on teaching with manikins and equipment

1. Remind instructors to use manikins designed for basic life support practice when teaching rescue breaths and ventilations.
2. Between use by each individual (candidates and instructors):
 - a. Wipe manikins (chest, forehead and face) and any other equipment with alcohol wipes/viricidal and allow the surface to dry naturally for at least one minute.
3. After each course:
 - a. Replace and dispose of manikin lungs and airways.
 - b. Clean manikin heads with an appropriate surfactant/disinfectant solution after completion of each training session.
4. When teaching rescue breaths and ventilations:
 - a. Wipe the face of the manikin with 70% alcohol wipes/viricidal after each individual and allow the surface to dry naturally for at least one minute before the next use.
 - b. If requested, allow the use of:
 - i. individual face shields – dispose of safely at the end of the session.
 - ii. pocket masks (individual use) – fully clean or dispose of safely at the end of the session.
 - c. Consider only requiring each participant to successfully demonstrate these skills once during the course.
 - d. Reinforce the importance of rescue breaths and ventilations in the resuscitation of a child and highlight that the increase in the risk of transmitting the COVID-19 virus is small compared to the risk to the survival of the child if these are not provided.