

Appendix 'I'

Provision of First Aid during Planned Events, Anticipated Public Disorder Incidents and Spontaneous Incidents

Introduction

- 11 The purpose of this procedure and guidance is to inform District Commanders and Heads of Branch of the organisational structures for the provision of first aid during incidents of public disorder.
- 12 A number of police officers within each District have been trained to provide first aid when required, to police officers and members of the public within any planned event, operation, or public disorder incident. In addition, a number of officers within each Tactical Support Group (TSG) have been trained to the same standard.

Legal Basis

- 13 Senior officers are reminded of the legislative requirement under the Health and Safety (First Aid) Regulations (NI) 1982, to provide adequate and appropriate equipment and facilities to enable first aid treatment to be rendered to employees when required.

Procedure and guidance

Roles and Functions of Public Order First Aiders within Districts

- 14 During planned events or anticipated public order incidents, first aid support will be provided by the District responsible for planning and policing the event or incident. It is imperative that the first aid support is not left to TSGs and Police Support Units (PSUs), as the abstractions required to provide first aid would seriously reduce the tactical capability of any TSG or PSU.
- 15 The primary role of police first aiders within a District will be to provide first aid support to officers and other casualties. The level of first aid treatment provided by first aiders is designed to stabilise and maintain serious casualties until removal by National Health Service resources, or to treat officers with minor injuries.
- 16 A District public order first aider must be trained to the PSU public order standard.
- 17 If an officer's primary role at an event is to provide first aid support, they should not be allocated to a PSU, nor should they be nominated for other specialist public order duties, such as evidence gatherers. This would conflict with the role of a District first aider.

Role and Function of Public Order First Aiders within the TSG and PSU

- I8 The role of trained first aiders within a TSG or PSU is primarily to provide an immediate first aid capability to that particular TSG or PSU in circumstances where the public disorder is purely spontaneous and could not have been anticipated. The rationale being, that each TSG or PSU will have a degree of immediate 'first aid self sufficiency' when reacting to spontaneous incidents.
- I9 Within a spontaneous incident, TSG and PSU first aiders will provide first aid treatment to members of that unit or where no other first aid facilities are immediately available, to other casualties injured within that particular incident.
- I10 TSG and PSU personnel must not be used as a routine first aid response at any planned event, regardless of whether the operation involves major public disorder or is a recurring local problem at which disorder is anticipated.

Selection and Training of Public Order First Aiders

- I11 **District Public Order First Aiders:** Each District Commander will maintain an adequate number of trained public order first aiders as appropriate for their District.
- I12 When District Commanders raise a PSU, they must ensure that the PSU is staffed with two trained public order first aiders from the local District resources.
- I13 **TSG and PSU Public Order First Aiders:** TSG Commanders will maintain at least two trained first aiders within each TSG. When there is a requirement to form PSU(s), Commanders responsible for allocating members should ensure that at least two trained first aiders are assigned to each PSU. Officers identified to be trained as first aiders should not already be trained for other key roles within the TSG or PSU, such as 'evidence gathering', which could negatively impact upon their role as a TSG/PSU first aider.
- I14 **Role and Function of Public Order First Aiders with PSNI Search and Rescue Team:** In the context of a hostile public order situation, the PSNI Search and Rescue Team can provide immediate and technical casualty extraction capability by officers trained to FPOS (First Person On Scene) standard. This includes the capacity to work at height or in other hazardous environments, to extract casualties with severe injuries.
- I15 Officers selected to be public order first aiders within a District, a TSG or PSU must have the Module 2 FASP (First Aid Skills Police) 3 day course and a further 2 days training in additional skills and scenarios organised by the Medical Support Training Unit (MSTU) at Steeple. Thereafter, regular refresher training will take place every three years, again organised by the MSTU.

Equipment

- I16 Public order first aiders will be issued with personal issue protective equipment, flame-retardant coveralls, underwear, boots, balaclava, gloves and leg guards. Each trained member will also be issued with a small round shield. First aid teams

deploy in teams of two and must ensure at least one shield is carried within a team for personal protection when deployed. Each member will also be issued with a first aid rucksack specially designed for use in public disorder incidents. Purchase of the rucksack is through relevant business managers.

- 117 The first aid kit and shield are issued to the members concerned for their use only when detailed as first aiders at a planned event or anticipated incident or as first aiders within a TSG or PSU. Replacement supplies for the first aid rucksacks should be obtained through business managers. No additional first aid equipment will be carried without the prior knowledge of MSTU.

Planning

- 118 The potential for disorder at any planned event in a District area will be assessed by relevant Area Commanders. When assessing the requirement for the provision of first aid at planned events and protracted spontaneous incidents, senior officers should be aware of the positive obligations placed upon the state under Articles 2 and 3 of the European Convention on Human Rights (ECHR) (i.e. to protect life and to prohibit inhuman and degrading treatment and punishment). The proper availability and provision of medical assistance can be key to ensuring that the PSNI complies with these obligations.
- 119 In addition, Principle 5(c) of the UN Basic Principles on the Use of Force and Firearms by Law Enforcement Officials indicates that, whenever the lawful use of force and firearms is unavoidable, law enforcement officials shall ensure that assistance and medical aid are rendered to any injury or affected person at the earliest possible moment.
- 120 The PSNI Code of Ethics 2011 states at Article 4.2 that Police officers responsible for the planning and control of operations where the use of force is a possibility shall so far as possible plan and control them to minimise recourse to the use of force, in particular, potentially lethal force. Consideration shall be given during the planning of an operation to the need for medical assistance to be available.
- 121 Consequently, it is fundamental that within the planning process, full consideration should be given to the provision of medical attention, including first aid facilities for any casualties, whether they are police officers or members of the public. This would include the need for availability of District first aiders and/or the placing of other emergency services on standby (see paragraph 127 below). It is therefore emphasised that the decision-making process assessing the requirement for first aiders at any planned event should be fully documented within event policy files and Health and Safety risk assessments.

Deployment of Public Order First Aid Teams

- 122 If a decision is taken to deploy first aiders, it will be the responsibility of local Area Commanders to arrange sufficient resources. First aiders must be deployed in teams of two. Transport to and from designated first aid locations will be integrated into

the operational plan for the event. Details of the first aid provision will be set out in operational orders.

- I23 When deployed, District public order first aid teams will remain close behind the main police lines but far enough back to be out of range of missiles. However, it is imperative that they are placed strategically in 'key areas' that have been assessed within the planning process to have the greatest potential need for first aid facilities.
- I24 Generally, first aid teams are not responsible for the removal of immobile and injured members from the front line. Injured members, if able, should walk back to the first aid teams for treatment. Where possible, incapacitated officers should be conveyed back to first aid teams by colleagues.
- I25 In certain crucial situations, Bronze Commanders may decide to order a tactical rapid advance or a shield line to move forward. This will allow first aid teams, whether they are TSG/PSU or District resources access to a particular stricken casualty. First aid teams should follow behind the rapid advance or shield line as instructed to deal with or remove the casualty, as is appropriate to the situation.

Transfer of Trained Public Order First Aiders

- I26 The following procedure should be followed when a trained public order first aider has been transferred to another District or specialist post that would preclude them from performing duties as a first aider within their previous District or TSG:
- The District Commander should inform MSTU and nominate a replacement member to be trained and equipped as soon as possible.
 - Rucksacks formerly issued by MSTU are the property of the individual until movement from the District. Public Order First Aid trained personnel will then return the rucksack to the District for reissue.

General

- I27 PSNI generic response arrangements (available on PoliceNet) set out procedures for liaison with NIF&RS, NIAS and others concerning major incidents and events. There is a requirement to advise the appropriate services of events where large numbers of people are gathered. The decision to deploy PSNI public order first aid teams would suggest that the respective NIAS should be notified that demands might be received from both the Police Service and members of the public. It may also be appropriate to liaise with the receiving hospital to request separate provision for the treatment of police officers, so that they are not exposed to civilians who may have been involved in the disorder.