



# FIRST RESPONSE

**Tremaine Kent** considers what can be done to help deal with battlefield injuries on our streets in the event of a terror attack

**I**t is human nature to want to help other people in trouble in emergency situations, but as testimonies in the recent inquest into the London Bridge attacks of 2017 in the UK have shown, 'good Samaritans' can themselves become victims. With the right training and equipment it is possible for citizen-first responders to mitigate the risk of potentially putting themselves in

harm's way, in order to treat casualties whose lives are in imminent danger.

As the London Bridge and Westminster attacks in London two years ago and the constant reports of knife crime this year demonstrate, it is a sad fact that people living and working in increasingly over-crowded metropolitan areas face the potential of encountering a trauma incident. The types of incident vary from



**Readily accessible first aid and trauma kits would have made a big difference to terrorist attacks like the 2015 one in Paris**

headline-grabbing knife, gunshot wounds or acid attacks, to glass and other shrapnel injuries from explosions. But catastrophic injury can also result from road traffic accidents, cyclists and pedestrians being struck by a vehicle, workplace incidents involving heavy machinery, public protests that turn violent and the rising number of suicide attempts.

All these injuries can be harrowing for any first responder on the scene, whether a medical professional or not. Often, they are more akin to what some might expect to see on the battlefield as opposed to the high street. In an ideal world, everyone would be a trained first aider, capable of providing life-saving treatment for minor and major injuries, but the reality is that most people are not even aware of the basics and the fate of the wounded is 100 percent in the hands of the ambulance response time. What's more, when it comes to a major trauma situation, unless it happens on the doorstep of a hospital, the odds are not in the victim's favour.

What is needed is better training and more people having access to it. Sadly, a lot of the first aid training that is received by people in the workplace today is inadequate and ineffective for the treatment of catastrophic injury. All too often it is a box-ticking exercise, so that the organisation has the correct number of designated first aiders. Yes, organisations may have met their required obligations (The Health and Safety First-Aid Regulations

## FIRST AID KITS NEED TO BE COMPARABLE WITH SOMETHING A SOLIDER MIGHT CARRY WITH THEM

1981 require all employers to make arrangements to ensure their employees receive immediate attention if they are injured or taken ill at work), but what about the wider responsibility to society that we all share?

It is easy to think through apathy and denial that "it won't happen to us" or "it isn't our responsibility", but it can and does happen. Just ask those working in and frequenting the bars and restaurants around Borough Market in 2017. The RESUS Council guidelines of 2015, are brought into the Health and Safety Regulations and now stipulate that it is the employers' responsibility to identify any high-risk threats, so that adequate training can be delivered to minimise those work-related threats.

For training to be effective it needs to address the psychological as well as physiological aspects of dealing with a trauma incident. We are all aware of the fight or flight instinct and until people are placed in situations of immense stress it is impossible to know which way they will go (knowledge creates confidence to empower people). Some will dash towards someone in need, irrespective of the danger it presents them personally, while others will freeze or run in the opposite direction. It is an intrinsic reaction when there is an attack on our motivational value system.

With the right preparation, people can be conditioned to deal with stress better and respond in the right way for the situation. The aim is to stop, think and take a course of action that mitigates risk to themselves, the wounded and other people. Training exercises that use scenario replication are something anyone with military experience will be familiar with and can be used to great

effect. Any soldier that has served in a warzone will have experienced what it is like to be shot at many times while trying to do their job (such as treating the wounded), before they even stepped foot in Afghanistan or Iraq. It is essential preparation and may seem extreme, but having worked with organisations that have experienced terrorist attacks first hand, the ensuing chaos and confusion when dealing with the unknown does have many similarities.

Addressing the psychological aspects of taking action in the face of danger only has merit if the first responder has the skills and necessary kit to deliver life-preserving aid. The gold-standard for first aid training should follow the guidelines published by the European Resuscitation Council and meet the Faculty of Pre-hospital Care (FPHC) and the Pre-hospital Emergency Medicine (PHEM) guidelines level B of The Royal College of Surgeons Edinburgh. The motto "Be prepared not scared" is commonly used by the Government to empower people, but with the economic uncertainty affecting many businesses in the UK, first-aid training is not seen as a priority (due to unrealistic extra expenses). Trisat Ltd, overcomes the pressures of financial commitment by working with the business to identify the threats and design and tailor the training in a cost-effective manner that meets the needs of the Health and Safety Executive as well as the RESUS Guidelines 2015.

All too often the first aid kit in an office is hidden away in the kitchen, next to the accident logbook. It will probably adhere to the suggested minimum requirements from the Health and Safety Executive, for a suitably stocked first-aid box: a leaflet giving general guidance on first aid; individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary); sterile eye pads; individually wrapped triangular bandages, preferably sterile; safety pins; large sterile individually wrapped unmedicated wound dressings; medium-sized sterile individually wrapped unmedicated wound dressings; and disposable gloves.

While this might suffice for treating many of the estimated 555,000 workers in Britain who sustain an injury each year, it falls far short if faced with a casualty haemorrhaging blood as the result a knife wound, for example. In the same way that defibrillators have become more commonplace in commercial and public spaces in recent years, the first aid kit needs to be upgraded for the world in which we live.

### CATERING FOR TRAUMA

Firstly, it needs to be thought of more in the context of a first aid and trauma kit, akin to something a soldier might carry with them on operations. There are kits coming on to the market that have been designed by British soldiers who have brought their wealth of experience dealing with major trauma in war zones such as Afghanistan and Iraq, and are applying it to help those sustaining similar types of wounds on civvy street. The equipment may initially appear excessive, but in many recent high-profile incidents it all would have been a life saver for victims and first responders alike, including:

► **Medium BS8599-1 first aid kit:** including many of the items suggested by the HSE to treat up to 25 people. Personal respirator: for self-rescue during emergencies involving hazardous smoke and fumes. It provides

short-term protection against toxic gases and particles including HCl, SO<sub>2</sub>, NO<sub>2</sub>, C<sub>6</sub>H<sub>12</sub> and tear gas (CS).

► **VizShock personal attack alarm system:** the best self-defence device currently available. A multi-frequency red and blue pulse that allows the user to pause and deter an assailant, buying time to think and react appropriately while attracting much-needed attention. Includes an optional emergency siren.

► **Catastrophic trauma kit:** a holistic and effective system to stop lethal bleeds in an emergency. The equipment, honed from military experience on the battlefield, includes items to optimise treatment of more casualties.

## UNLESS AN ACCIDENT IS NEAR A HOSPITAL, THE ODDS ARE NOT IN THE VICTIM'S FAVOUR

Such kits coming on to the market are not supplied in flimsy plastic boxes, but wearable vests that provide a degree of ballistic capability to give protection against shootings, stabbings and shrapnel from blasts. Together, this combination of training, equipment and protection means first responders can make and take decisive action that reduces risk to them if present, while empowering them to provide treatment that buys time and saves lives. It is also a way of championing

the individual, that creates the interest and responsibility within the workplace to stay current. Some organisations provide a financial incentive for those that take up a role of first aider.

### CATERING FOR TRAUMA

British company TRISAT has launched a wearable first aid and trauma pack, accompanied by a practical-led course and blended e-learning to provide advice on how to stay safe and administer treatment. The B L AID+ Ballistic Advanced Incident Defence System is constructed from DuPont Kevlar ballistic and stab protection (complying with NIJ0101.04/IIIA, STANAG 2920 V50.580m/s and KR2/SP2 knife and spike protection standards) and MicrAgard PLUS material for infection control. It features a catastrophic trauma kit, a holistic and effective system to stop lethal bleeds in an emergency and a medium BS8599-1 first aid kit to treat up to 25 people in high-risk workplaces. The B L AID+ system also features a personal respirator for self-rescue during emergencies involving hazardous smoke and fumes, along with a VizShock personal attack alarm system that uses a multi-frequency red and blue pulse to pause and deter an assailant.

In an ideal world this equipment will never be needed, but trauma is currently one of the major killers in modern society. Improving the quality and quantity of care that citizen-first responders are able to give will help reduce deaths and aid the great work of the Ambulance Service. Regulation and guidelines can be slow to change, so it is up to organisations of all sizes located in towns and cities to grasp the initiative and help get life-saving skills on to the streets where it is most needed ●

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**Properly equipped kits can help buy vital time in the event of an attack until the emergency services arrive on the scene**



Picture credit: Trisat