New In-Person Basic Life Support (BLS)
Training Guidelines

TEACH COVID SAFE
As state, county and municipal governments continue to gradually re-open and ease restrictions, BLS classroom training and certification is likely to also gradually increase. As hands-on skill practice and evaluation are required for certification, everyone’s primary concern must be for the health and safety of students and instructors. To that end, we must not undermine the progress that has been made in stemming the spread of coronavirus. We have an obligation to TEACH COVID SAFE.

Teach smaller classes. Do not exceed local, state, or federal guidelines for group gathering sizes.

Every student and instructor should have their own manikins (Adult/child and infant), CPR masks with one-way valves, AED trainers (with pediatric capability) and bag mask.

Avoid non-essential travel. Use interactive videoconferencing technology to teach and remotely verify skill competence when possible.

Communicate the steps you are taking to slow the spread of infection, protect students and help ensure a safe and healthy learning environment.

Hand Hygiene. Students and instructor should wash hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer.

Clean and disinfect surfaces and all equipment frequently and thoroughly. Follow manufacturer and CDC guidelines.

Online blended learning. Use blended learning or Remote Skills Verification (RSV) to reduce classroom contact time.

Visually inspect students for signs of illness, which could include flushed cheeks or fatigue. Confirm student is not experiencing coughing or shortness of breath.

Increase physical space. Maintain social distancing; minimum of 6 feet between instructors and students. No physical contact between instructors and students.

Develop and distribute flexible rescheduling policies so students can stay home when they are sick.

Supplies. Have proper supplies in class including hand sanitizer, tissues, trash baskets, and cleaning supplies in sufficient quantity.

All instructors and students should wear a cloth face covering. Avoid touching the eyes, nose, and mouth.

Facts. Help stop the spread of rumors. Share information only from trusted sources.

Encourage the practice of everyday infectious disease prevention actions.
Modified COVID-19 BLS Classroom Layout

Always follow state and local guidelines for group gatherings. Ensure your training space can accommodate a social distance of at least 6 feet between students and between students and the Instructor. We recommend a 1:1 student to equipment ratio. If you cannot maintain proper social distancing or a 1:1 student to equipment ratio, consider using another method of training such as RSV as an alternative to traditional classroom training.
<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
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<tbody>
<tr>
<td>Chair</td>
<td>Loop Learning System (optional)</td>
</tr>
<tr>
<td>Student Book, Skill Guide, or Performance Evaluation</td>
<td>CPR Feedback Device (Strongly Recommended)</td>
</tr>
<tr>
<td>AED Training Device with Pediatric Capability</td>
<td>Adult and Infant Manikin</td>
</tr>
<tr>
<td>Student</td>
<td>Instructor &amp; BLS Instructor Guide</td>
</tr>
<tr>
<td>Face Covering/Mask &amp; Eye Protection¹</td>
<td>Computer/ Monitor</td>
</tr>
<tr>
<td>Six Ft. Minimum Separation</td>
<td>Disposable Gloves</td>
</tr>
<tr>
<td>Adult and pediatric bag-mask devices, 1 for each 2 students²</td>
<td>Adult and pediatric CPR masks with one-way valve - 1 for each student</td>
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</tbody>
</table>

¹ Face coverings or surgical masks with safety glasses or face shields are recommended during training for practical and simulation purposes.
² 1:1 student-to-bag mask ratio is recommended. If this is not possible, a single adult and pediatric bag mask may be shared between two students, but its surfaces must be cleaned and disinfected after each use. A HEPA filter attachment for the bag-masks is recommended where available.
More Best Practices for Safe BLS Classroom Training

- If a scheduled instructor or student has symptoms (fever, cough, shortness of breath), he or she should not attend class.
- The room should be well lit and well ventilated.
- To simulate proper PPE, instructors and students should wear face masks, gloves and eye protection during all skill practices. Use plastic gloves or simulate gloves if non-latex exam gloves are unavailable.
- Do not neglect to implement the 1:1 student-to-equipment ratio.
- Do not break students into small groups.
- Rescue breaths with a CPR mask and one-way valve may be simulated. Students must correctly demonstrate how to place the mask on the manikin, open the airway with a head-tilt, chin-lift, and then verbalize that they would give two breaths, one-second each, and watch for visible chest rise. Students should not share a CPR mask or valves.
- Students must correctly demonstrate high-quality rescue breaths using jaw thrust and a bag mask on an adult and infant manikin.
- Students must correctly demonstrate how to perform Two-Provider CPR.
  - Assign two students to perform Two-Provider CPR. Providers must be separated by a minimum of 6 feet and each must use their own manikins and bag masks.
  - Students practice Two-Provider CPR as if they were performing it together on a single manikin.
  - Students must correctly demonstrate the minimum required skill competency, including a simulated switch of the roles providing chest compressions and rescue breaths with a bag mask for adults and infants.

NOTE: This guidance is current as of May 27, 2020. It may be retracted, extended or updated by HSI as conditions warrant.