2-1-2007

Handling Immediate Medical Care at Aquatic Facilities: Do We Need Different Levels of Lifeguard Certification?

Leland Yarger

Ball State University, ljyarger@bsu.edu

Follow this and additional works at: <https://scholarworks.bgsu.edu/ijare>

Part of the [Curriculum and Instruction Commons](#), [Educational Assessment, Evaluation, and Research Commons](#), [Exercise Physiology Commons](#), [Exercise Science Commons](#), [Health and Physical Education Commons](#), [Leisure Studies Commons](#), [Other Rehabilitation and Therapy Commons](#), [Outdoor Education Commons](#), [Public Health Commons](#), [Sports Management Commons](#), [Sports Sciences Commons](#), [Sports Studies Commons](#), and the [Tourism and Travel Commons](#)

How does access to this work benefit you? Let us know!

Recommended Citation

Yarger, Leland (2007) "Handling Immediate Medical Care at Aquatic Facilities: Do We Need Different Levels of Lifeguard Certification?," *International Journal of Aquatic Research and Education*: Vol. 1: No. 1, Article 9.

DOI: <https://doi.org/10.25035/ijare.01.01.09>

Available at: <https://scholarworks.bgsu.edu/ijare/vol1/iss1/9>

This Education Article is brought to you for free and open access by the Journals at ScholarWorks@BGSU. It has been accepted for inclusion in International Journal of Aquatic Research and Education by an authorized editor of ScholarWorks@BGSU.

Handling Immediate Medical Care at Aquatic Facilities: Do We Need Different Levels of Lifeguard Certification?

Leland Yarger

The first-responder and professional-rescuer training materials and training programs consider lifeguards to be first responders to emergencies (Aehlert, 2005; American Red Cross, 2001). This article asks readers to consider whether our agency lifeguard-training programs reflect a philosophy that truly views and prepares lifeguards as first responders. If not, I challenge readers to consider whether we should alter our hiring, staffing, and in-service-training procedures at aquatic facilities based on the scope and need for providing adequate emergency care at those facilities.

Key Words: aquatic risk management, aquatic legal issues, first aid and CPR, lifeguarding

Lifeguard-training programs in the United States generally include the teaching of lifeguard rescue skills, supervision, and guarding behaviors; CPR for the professional rescuer; and first-aid skills (Aquatics International, 2001). An informal review of lifeguard-training programs such as those offered by the primary training agencies in the United States reveals that they typically require from 26 to 42 hr of training. In contrast, typical first-responder curricula require at least 50 hr of training time when automated external defibrillation (AED) and emergency oxygen administration are included. This article examines the question of whether aquatic facilities and programs should employ at least one lifeguard with first-responder training for each shift in order to meet the basic safety needs of clients and patrons.

Accidents, injuries, and negative health events are an unfortunate fact of life in any exercise and physical activity facility. The obvious result of these facts for management is that all employees must have training to deal with such regularly occurring situations. Because of the nature of aquatic environments and the kinds of patron activities associated with aquatic recreation venues, providing a wide variety of first-aid care is a routine activity at all aquatic facilities. The types of first-aid care vary, from treating minor lacerations, bumps, and bruises to treating more serious accidental injuries such as broken bones, submersion incidents, or other serious health episodes such as heart attacks or strokes.

The author is with the School of Physical Education, Sport, and Exercise Science, Ball State University, Muncie, IN 47306.

Unless one has an individual with emergency-medical-technician (EMT) training employed on staff, lifeguards, in fact, are the first responders at most aquatic facilities. This is obvious and logical because in most organizations, the lifeguard staff members have the most comprehensive levels of first-aid and CPR training among staff members. Examples of advanced training that lifeguards often receive that other staff members do not get in initial training include the use and administration of AED devices, emergency oxygen administration (O₂), and implementation of appropriate blood-borne-pathogen prevention procedures.

If the reader asks experienced aquatic supervisors what the top lifeguard responsibilities are for providing care, it is likely they will respond that the first activity is proactive preventive action, followed by responding to first-aid needs of both non-life-threatening and life-threatening emergencies. It might be a surprise to the naïve reader that water rescues are less frequent, even rare, at traditional aquatic facilities. Typically most lifeguards perform only simple assists, often not even requiring them to enter the water. Even less frequent occurrences are cases requiring emergency oxygen administration, rescue breathing, CPR, and AED use. Of course we still must train lifeguards as if any of these emergencies could happen on the very next shift. The standard of care and our duty to patrons demands this level of training and preparedness by lifeguards.

Based on this simple lifeguard job analysis, providing a variety of first-aid procedures appears to be the second-most frequent activity performed by lifeguards. If this conclusion is accurate, it is fair to ask why lifeguard-training agencies other than the United States Lifesaving Association do not reflect the frequency and importance of performing first aid in their program training times. It is interesting to note that the USLA training does reflect the high incidence of providing first aid to patrons. It is perhaps time to ask our training providers why first-responder knowledge and skills such as comprehensive professional first-aid training are not being provided in their lifeguard-training programs and materials.

In Table 1, I provide a specific comparison of several national-agency lifeguarding programs and the times they devote to types of training activity. Look at the common lifeguard-training times and also note the lifeguard and CPR time ranges. The lifeguard-training times for five major training agencies range from as few as 26 hr to as many as 43 hr. If we remove the time spent on lifeguard rescue training that does not include CPR and first aid, the training time ranges from 20 to 28 hr. Because CPR training at the professional level takes 6–9 hr, typically we are left with only 4–5 hr to deal with first-aid topics in most lifeguard-training programs. Providing such a minimal training time for first aid ought to be counterintuitive to most aquatic professionals because first-aid skills are the practical skills most frequently used by lifeguards. First-aid knowledge is a comprehensive skill set that includes victim evaluation and care provided on the scene. The lifeguard's actions and demeanor while providing first aid can make all of the difference to patrons needing care and their resulting attitude and actions toward the facility.

In contrast to this typical lifeguard-training program, the Department of Transportation (DOT, 1995) first-responder national standard curriculum has a recommended minimum of 40 hr of training time. In addition, the sanctioning of state-recognized first responders is regulated by each state individually. Thus, a given state might have additional training-time requirements for state-sanctioned classes. At a minimum, when one removes the CPR/PR training time from the

Table 1 Comparison of Lifeguard Training Times for National U.S. Agencies

Type of training	American Red Cross	ASHI StarGuard	Ellis & Associates	NASCO	YMCA	USLA
Lifeguard training	33 hr; includes CPR and FA	20–28 hr	20 hr	18–24 hr	28 hr	40 hr minimum for seasonal guards, 48 hr for full-time guards
Lifeguard and CPR for the professional (estimated)	29 hr	28–37 hr	26–29 hr	24–30 hr	Depends on CPR agency used; ≈37 hr	Depends on CPR agency used: ≈49–57 hr
First-aid training only (estimated)	4 hr	4–5 hr	Part of the 20-hr lifeguard training	≈2 hr	Depends on the first-aid agency used; ≈4–6 hr	Training equal—first responder: 40 hr includes CPR

Note. Adapted from Aquatics International (2001).

first-responder courses, 31–34 hr of first-aid training still remain. This raises an important question: Where is the first-aid training time in our typical lifeguard courses? For example, patient assessment alone is recommended at 6 hr of training time in the DOT first-responder national standard.

I would like to suggest that perhaps we need a new, more comprehensive lifeguard course that we might call lifeguard professional. As part of this more advanced level of certification, I suggest the need for specific prerequisites and additional requirements as described in Table 2. On successfully meeting these criteria, a lifeguard would be issued lifeguard professional certification.

Because we know that first aid is the most frequently rendered care by lifeguards at most typical aquatic facilities, I would like to propose that all aquatic facilities employ a lifeguard professional, as well as a basic lifeguard, on each shift. Always staffing each shift with a lifeguard (basic certification) along with a lifeguard professional would also support the spinal-injury requirement that at least two guards are needed to backboard a victim properly (Fawcett, 2001). Until such time as our aquatic training agencies are able to provide an advanced lifeguarding course such as the lifeguard professional I have proposed here, I believe that aquatic directors and managers might be well advised to require one or more of their staff to complete additional first-responder training as part of their in-service training. It is certainly within the rights of any aquatic facility to require additional training by all of their lifeguard staff, and additional first-aid training to equal the first-responder standards would make great sense.

Table 2 Suggested Requirements and Training Times for Proposed Lifeguard Professional Certification

Training topic	Lifeguard professional training time
DOT first-responder guidelines	40 hr minimum
AED training for professional rescuers	5 hr minimum
Emergency oxygen administration	4 hr minimum
Lifeguard scenarios that include demonstration of victim assessments using the AVPU scale, SAMPLE survey, head-to-toe evaluations using DOTS, PEARL, CSM, CSF, taking blood pressure, and mass-casualty event	5 hr minimum

Note. Prerequisites are being 18 years of age and holding current lifeguard, first aid, and CPR/PR certifications.

Directors and managers might even consider becoming certified as first-responder instructors themselves and then provide the first-responder first-aid training updates as part of a comprehensive in-service professional-development program for lifeguard staff. Of course, there are financial considerations such as needing to compensate lifeguards for obtaining and maintaining the additional levels of certification. This can be used to promote more professional attitudes and actions in our aquatic staff.

It is my contention that those of us employed in the aquatic industry must pay closer attention to the many demands of the jobs we perform and respond with realistic training before putting staff and patrons in risky activities that occur at aquatic facilities. Is it time for our aquatic agencies to provide more advanced levels of lifeguard training to reflect the actual task analysis of the job? In the meantime, until such courses are provided, should not those of us with supervisory responsibilities in aquatics begin by providing this increased level of training to some or all of our staff? I argue that the answer to both of these questions is (or ought to be) a resounding “Yes!”

References

- Aehlert, B. (2005). *Emergency medical responder, first responder in action*. New York: McGraw-Hill.
- American Red Cross. (2001). *Emergency response*. Boston: Staywell.
- Aquatics International. (2001). Shopping around. *Aquatics International*, May, 40-42.
- Department of Transportation. (1995). *First responder: National standard curriculum*. U.S. Department of Health and Human Services Maternal and Child Health Bureau, DTNH22-94-C-05123.
- Fawcett, P. (2001). *NIRSA aquatic director's handbook*. Corvallis, OR: National Intramural-Recreational Sports Association.