

EDUCATION OF POLICE OFFICERS IN QUALIFIED FIRST AID

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Abstract

The article is an attempt at comparing and evaluating the Tactical Combat Casualty Care (TCCC) course and the Qualified First Aid (QFA) course in terms of their usefulness in the daily service of Polish police officers. The research using the diagnostic survey technique was conducted in late 2022 and early 2023 based on a survey questionnaire introduced in Google Forms. The research was carried out among the personnel of emergency medical teams performing medical rescue activities throughout Poland. As part of the preparation of the research design, it was assumed that a group of these respondents have the necessary medical qualifications to assess the rescue activities of others. In addition, as part of their profession, the respondents often witness the actions of police officers providing first aid at the scene. The study compiled research material that allowed verifying the research hypothesis adopted in the deliberations. Nonetheless, the authors are aware of the limitations of the adopted research methodology. The final part of the article presents conclusions and recommendations on the direction of proposed changes in police education in the field of qualified first aid.

Keywords: rescue, Tactical Combat Casualty Care, Police, qualified first aid

1. Introduction

The Polish Dictionary defines a rescue as “to come to someone’s aid and to save human life in hazardous conditions” (<https://sjp.pl/ratownictwo>). By coming to someone’s aid one should understand helping a person being in danger – a hazardous situation.

Medical rescue services have evolved due to military conflicts. Ancient Greece and Rome were the places that gave the beginning to the pre-hospital system.

Further development of military medical teams started during both WWI and WWII. The beginning of transporting the wounded by helicopters to MASH began during the Korean wars. MASH units were set up close to the front (Biniak-Pieróg, Zamiar, 2013).

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The dramatic events that took place in Mogadishu in Somalia on October 3rd–4th, 1993 during the civil war were the factor that gave the beginning to TCCC (Tactical Combat Casualty Care). American forces, composed primarily of Special Forces, encountered strong and well organized resistance from Mohamed Farraha Aidida military groups. During the warfare US forces have sustained significant losses of soldiers and equipment. As a result, the originally planned 45-minute war operation turned into a regular battle. From the very beginning the US forces made a lot of mistakes, e.g., one Ranger, private Todd Blackburn, fell on the street during the landing from helicopter for unknown reasons. Very soon subsequent soldiers died, mostly those who were sent to help wounded friends. Moreover, two Black Hawks were shot down. The loss rate of US forces totalled to 19 dead and 84 wounded. Many of the aforementioned 84 wounded troop members could not be quickly evacuated due to the tactical situation. Their lives were in medics' hands that were in the same place of the battlefield (<https://www.special-ops.pl/artykul/id623,tactical-combat-casualty-care-powstrzymaj-kazda-smierc-ktorej-mozna-uniknac>).

2. The TCCC Rescuer

TCCC is a course developed by the Joint Trauma System of DHA on the basis of the set of techniques and strategies that save life and provide the best care for patients who got injured on a battlefield. The National Association of Emergency Medical Technicians, an American organization that deals with education of medics, currently offers three types of TCCC courses:

- TCCC-MP (TCCC for medical personnel) is a 16-hour course for military medical personnel including also doctors, orderlies and paramedics who take part in military operations.
- TCCC-CLS (TCCC Combat Life Saver) is a 40-hour course for nonmedical military personnel.
- TCCC-ASM (TCCC All Service Members) is a 7-hour course for all members of the association (<https://www.naemt.org/education/naemt-tccc>).

The programme of the TCCC-CLS course includes several issues and procedures, for instance the proper usage of a tourniquet, opening up the airway by means of a nasopharyngeal tube, the MARCHE test, decompression of the pneumothorax by inserting a needle into the chest or the rule of so called “packing a wound” – applying a dressing in inaccessible places.

3. Medical Rescue

The events in which a lot of people have lost their lives in a fire which took place in Kretschmer Company located at the Main Market Square in Cracow in 1890 were the reason for setting up the first emergency service in Poland. Volunteers who worked in the former emergency service were the senior year students of the

Medicine Department of Jagiellonian University. The transport consisted of one ambulance (a horse cart with two horses) and five stretchers. The 6th of June 1891 is the date of the inception of the emergency service.

Since 2006, when the act of National Emergency Service came into life for purposes of implementing the tasks of the state that deal with delivering help to any person being in a state of immediate health risk, the National Emergency Service was established. According to the aforementioned act, help may be provided to people in three stages.

The first stage – the basic one, but the most important way of delivering help is providing first aid. First aid is a set of activities used in saving the life of a person who is in a state of immediate health risk. It is performed by a person who is nearby such a person who is in need of help. First aid also may be performed with the use of medical products, systems, procedure sets and OTC drugs which are legal in Poland (Polish Journal of Laws/Dz.U. 2006 No. 191 item 1410 as amended). Everyone may provide first aid regardless of his or her medical qualifications and even if they have none.

The second stage – according to the act on the National Emergency Service, qualified first aid is a set of medical activities, which is used by a paramedic to help people who are in immediate health risk. Immediate health risk is a condition understood as the occurrence of symptoms of deterioration in health that are sudden or foreseeable within a short period of time and which may lead to serious damage, impairment of bodily functions, bodily harm or even loss of life. It is of utmost importance to carry out immediate medical actions and proper treatment in such a condition, i.e. an immediate health risk.

Medical emergency treatment is a set of medical activities carried out by an entity of the medical system, e.g., emergency medical team, in non-hospital conditions in order to save a person who is in an immediate health risk. According to the article 13.1 of the Act of National Emergency Service to become a paramedic one should:

- have a full legal capacity
- hold a valid qualified first aid certificate and a paramedic title
- be in a good physical condition which allows providing qualified first aid (Polish Journal of Laws/Dz.U. 2006 No.191 item 1410 as amended).

Activities carried out by a paramedic under qualified first aid regulations consist of:

- CPR without using equipment, CPR with the use of equipment and oxygen, CPR with the use of automated defibrillator;
- Blocking external haemorrhage and dressing wounds;
- External fixation of fractures and probable fractures and sprains;
- Protection from hypothermia and overheating;
- Carrying out preliminary shock-proof procedure by means of a proper body positioning and thermal protection of people who are in an immediate health risk;
- Proper passive oxygen therapy;

- Evacuation of people from a scene where they are in an immediate health risk;
- Psychological support of people who are in an immediate health risk (Polish Journal of Laws/Dz.U. 2006 No. 191 item 1410 as amended).

In this stage the help is carried out by national functionaries holding the paramedic title.

The third stage – carrying out medical rescue activities. Medical rescue activities comprise health care understood as the right to health care financed from the state budget. Medical rescue activities are carried out by entities of the medical system, i.e. emergency medical teams, in non-hospital conditions in order to help people who are in an immediate health risk (Polish Journal of Laws/Dz.U. 2006 No. 191 item 1410 as amended). Assistance at this stage is provided by doctors, nurses and paramedics, i.e. personnel of emergency medical teams.

4. Police officer – qualified first aid rescuer

Article 16 of the act on National Emergency Service regulates issues of qualified first aid in the Polish Police force. Ministers of the Ministry of Internal Affairs and the Defence Department provide qualified first aid training for their personnel, police officers, functionaries, firefighters and soldiers, which enables them getting a qualified first aid certificate and allows improving and updating their qualified first aid skills. Ministers of the Ministry of Internal Affairs and the Defence Department, in agreement with the minister of National Healthcare, have defined the qualified first aid training for their subordinates by means of regulation (Polish Journal of Laws/Dz.U. 2006 No. 191 item 1410 as amended).

Currently 6500 Polish police officers hold a certificate of qualified first aid. The Polish police officers participate in a qualified first aid course according to the 25th Decision of the Chief Constable on a specialized course in matters of qualified first aid. Not only is the course programme based on current guidelines adopted by emergency medical services but also based on the character of the Police. It is worth noticing that specialized courses for police officers are delivered only by police training units within central improvement training (those units have teaching staff which is necessary to complete the course).

What is more, police officers take part in three kinds of professional development, which is regulated by the Regulation of the Minister of Internal Affairs and Administration published on the 21st December 2022, i.e.:

- Central professional development (implemented as specialized courses or in other forms approved by the Chief Constable)
- Local professional development (implemented according to regulations approved by the chief or a given police unit of a police department)
- Internal professional development (implemented according to needs of officers, which is impossible to implement during the two aforementioned professional developments) (Polish Journal of Laws/Dz.U. 2022 item 2826).

The aim of the qualified first aid specialized course is to prepare police officers for the implementation of tasks that require qualified first aid in order to be completed. Participation in the course is possible only if a supervisor of a given police officer chooses such an officer to participate in that course. Participation in the course is open only to officers who have been working as policemen for at least for three years. The course lasts 10 days (80 hours of classes) and is conducted as full-time course. The theoretical and practical classes of the course are carried out by doctors, nurses and paramedics of the National Health System and also by people who have current knowledge and skills of qualified first aid and have to have at least three years of professional experience in medical emergency treatment or at least five years of work in a profession supervised by the minister of the Ministry of Internal Affairs and the Defence Department.

In this article qualified first aid and TCCC courses are compared taking into account topics included in their programmes (chart no 1).

Table 1. Comparison of qualified first aid course with TCCC course (TCCC topics marked grey are also implemented during qualified first aid course)

Qualified first aid course for Police officers		TCCC Course	
Topic	Hours of classes	Topic	Hours of classes
The organization of paramedics – legal acts	1	Rules and use of TCCC	8
Paramedics' safety, injured person's safety, safety of a scene	3	Medical equipment.	
Medical sets, disinfection of equipment	5	Care Under Fire	
Anatomy and physiology basics, evaluation of an injured person, preliminary and detailed examination	4	Principles and Application of Tactical Field Care	
Unconscious injured person.	2	Tactical evaluation of injuries	
CPR (adults, children, infants, newborns, specific situations)	10	Control over a massive bleeding	8
Defibrillation rules of an injured person with an automatic and semiautomatic method	3	Airway Management	
Concussion	2	Respiration Assessment and Management	
Other emergencies – convulsions, diabetes, heart attacks, strokes, intoxications.	2	Circulation/Haemorrhage Control	

table 1 cont.

Qualified first aid course for Police officers		TCCC Course	
Topic	Hours of classes	Topic	Hours of classes
Mechanical traumas and injuries – fractures, sprains, twists, haemorrhages, injuries of the chest, stomach, spine, head and limbs	11	Shock Recognition	8
Chemical, thermal, electric traumas, environmental dangers, acts of terror	3	Hypothermia	
Tactics of emergency medical – mass casualty incidents (singular and plural), triage, documentation, logistics.	6	Eye and head injuries	
Evacuation from scenes	4	Painkillers and antibiotics	
Providing qualified first aid in simulated situations	7	Wound Management	8
Psychological aspects of supporting injured people	3	Burns	
Teachers' ideas for classes	5	Fractures	
Familiarizing with the rules and organization of the course, final exam, the end of the course.	9	Casualty Monitoring	
		Procedures before evacuation	
		Evacuation	
		Final exam	8
Total	80	Total	40

Source: made on (Official Gazette of the National Police Headquarters of 2021 item 10)

5. Methodology of the research

The idea of carrying out research among paramedics was formed as a result of doubts expressed by police officers concerning what kind of first aid course they should complete. The authors have decided to carry out the evaluation of available first aid courses, which comprise the same or similar difficulty level, and also to recommend changes in police officers' education in this field. Polish police officers very often claim that the course that they ought to complete is the TCCC course. The question is what sphere of TCCC course should be taught – the whole TCCC course or just its selected parts, or elements of the aforementioned course? The research question is formulated as the question: what elements of the qualified

first aid course for police officers should be changed? The subject of study is the police officers education in the field of qualified first aid. The aim of the research is an attempt at diagnosing potential changes in police officers education concerning qualified first aid. The hypothesis of this research assumes the need of changes in police officers' education in respect of first aid by means of implementing elements of TCCC course to qualified first aid course dedicated for policemen. Elements of the TCCC course which should be introduced to police officers' qualified first aid training may be established by carrying out the specific analysis of the teaching documentation and survey.

In late 2022 and early 2023, a survey was conducted among the personnel of emergency medical teams that provide emergency medical services in the National Emergency Medical System. According to the authors, the personnel of emergency medical teams (respondents) comprises a group of experts in the field of rescue having the necessary competence to evaluate the actions of police officers. The study used the method of diagnostic survey, which allowed finding out opinions of the personnel of emergency medical teams.

The research material, once compiled and analysed, made it possible to provide recommendations on the direction of proposed changes in police emergency education. The research was conducted using a survey questionnaire entered in Google Forms. The study involved 101 members of emergency medical teams employed throughout the country. The respondents included a system doctor, paramedics and system nurses. The selection of the sample was purposeful, as this group of respondents witnesses the actions of police officers providing first and qualified first aid at the scene of an incident. This allows respondents to objectively assess the skills of officers, the effectiveness of actions taken by police officers at the scene of an incident, and to indicate recommendations for training police officers in qualified first aid. The survey questionnaire consisted of with information concerning age, occupation, professional seniority in the primary workplace and the main part – 15 closed questions with a list of answers.

6. The analysis and interpretation of the research findings

Age of respondents

The analysis of the gathered material shows that 56% of the respondents are middle-aged – 31–40 years old. The following group consists of persons 41–51 years old, whereas less numerous groups, i.e. 11% and 4%, consist of people 20–30 years old and over 50 years old. The detailed division is showed in figure no. 1.

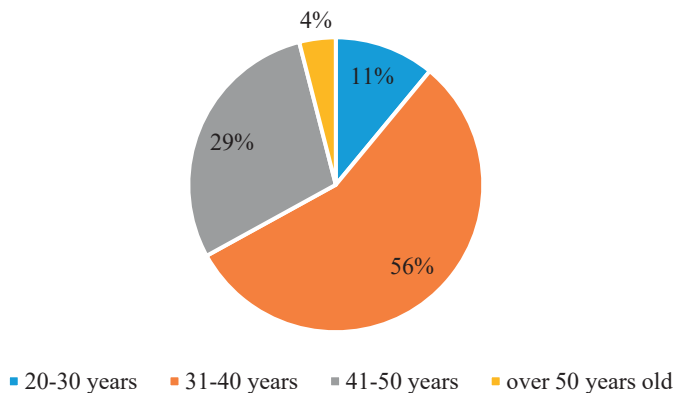


Figure 1. Age of respondents (n=101)

Profession

The gathered material also allows showing what medical profession is represented by the respondents in relation to emergency medical teams. An analysis of the research results shows that the most numerous group, i.e. 66% of respondents, consisted of paramedics. The next group consists of nurses of the emergency medical services (28%). Respondents who point out other professions are only 5%, whereas doctors are only 1%. The detailed profession division has been shown in figure no. 2.

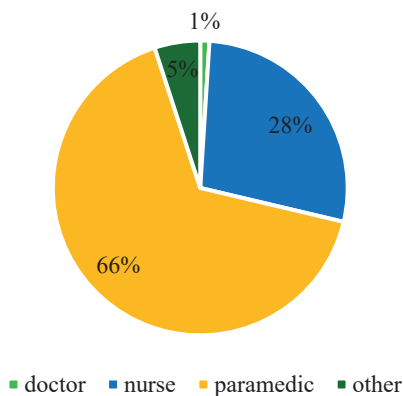


Figure 2. Professions (n=101)

Job seniority

A study of research results shows that the most numerous group as regards job seniority includes people who declare 10-11 years of work (59%). 27% of respondents declare less than 10 years of job experience. Respondents who declare

21-30 years are only 11%. Barely 3% of respondents declare over 30 years of job experience. The detailed job seniority division has been shown in the figure no. 3.

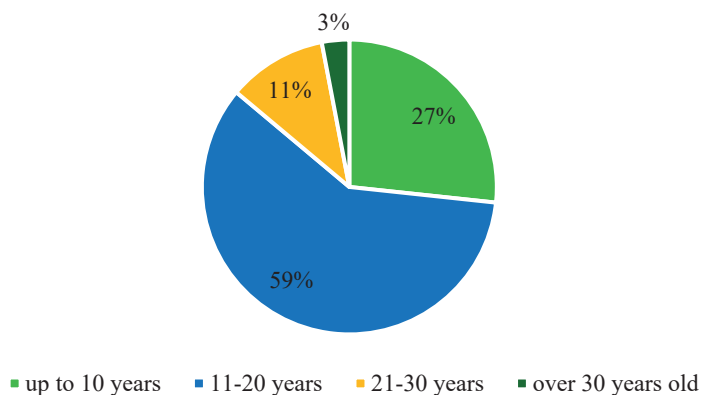


Figure 3. Job seniority (n=101)

The basic workplace

Respondents were also asked to point out their workplace. They could choose 3 answers. The National Medical Rescue Services is declared as their workplace by 47% of respondents. 29% of the respondents declare units that cooperate with the National Medical Rescue Services. 24% of the respondents declare other units as their workplace. The detailed workplace division has been shown in figure no. 4.

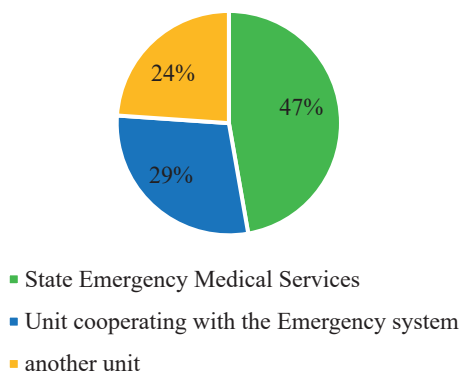


Figure 4. Primary workplace (n=101)

Question no. 1

The respondents have answered a list of questions pertaining to the evaluation of police officers activity in the field of first aid in the basic part of the research. The first question is: Have you ever taken over an injured person from a police

officer who provided him/her with first aid? If yes, then please pass to the next question. If not, please check “No, I haven’t”. The respondents could choose from 2 aforementioned answers. Most of the respondents (67%) answered “yes”; the rest (33%) answered “no”. The detailed answers division is showed in the chart no 5.

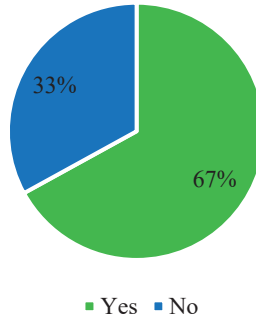


Figure 5. Taking over an injured person from a police officer (n=101)

Question no. 2

Question no. 2 deals with accuracy of first aid provided by policemen. The respondents have answered the question: Was first aid provided properly by the policemen? The respondents could choose from three answers. 56% of the respondents declared that first aid provided by the policemen was accurate, 18% of the respondents declared that it was inaccurate, while 26% of the respondents did not evaluate first aid provided by officers. The detailed answers division has been shown in figure no 6.

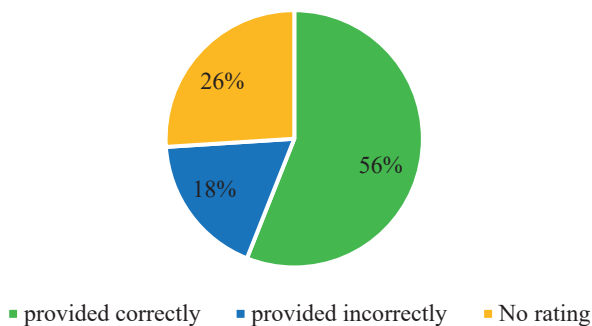


Figure 6. Evaluation of first aid provided by police officers

Question no. 3

The third question of the research is: In your opinion, is the subject area of qualified first aid course sufficient for people who are not a part of emergency

medical services? The respondents could choose from only two answers. 74% of the respondents claimed that the subject of qualified first aid course is sufficient. Just of $\frac{1}{4}$ of the respondents claimed that it was insufficient. The detailed answers division has been shown in figure no 7.

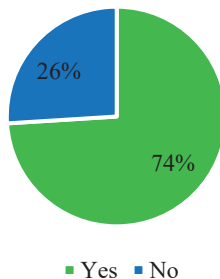


Figure 7. Subject area of qualified first aid course is sufficient for people who are not a part of emergency medical services (n=101)

Question no. 4

Question no. 4 deals with evaluation of professional qualifications and licenses of first aid held by police officers. The question is as follows: are police officers holders of a license of a qualified first aid rescuer to your knowledge? 67% of the respondents claimed “yes”, whereas 33% claimed that they did not have such qualifications. The detailed answers division has been shown in figure no 8.

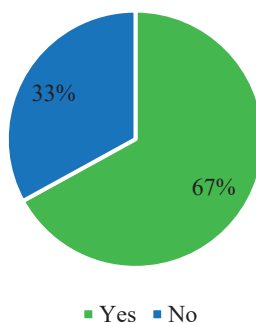


Figure 8. Evaluation of the qualified first aid qualifications held by police officers (n=101)

Question no. 5

Another question relates to the requirement for mandatory qualified first aid training for police officers. The most numerous group, i.e. 95% of the respondents, claim that such training ought to be obligatory. Only 5% of the respondents claim differently. The detailed answers division has been shown in fig. no. 9.

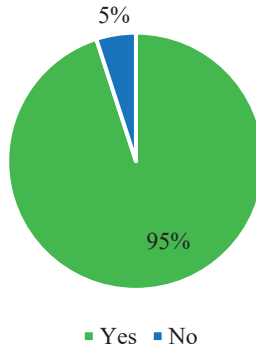


Figure 9. The need for qualified first aid training for police officers (n=101)

Question no. 6

The next question deals with the participation of respondents in the TCCC course. The question is: Have you ever taken part in TCCC course? Most of the respondents (63%) declare that they have never taken part in such a course. However, 37% of the respondents claim they have taken part in the aforementioned course. The detailed answers division has been shown in fig. no. 10.

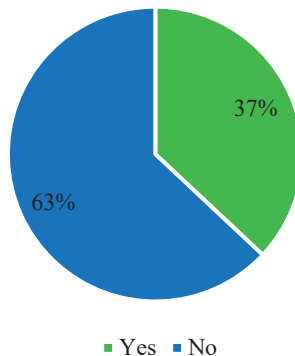


Figure 10. Participation in TCCC course (n=101)

Question no. 7

This question is an attempt to find whether the respondents are familiar with procedures used in TCCC. 55% of the respondents declare that they are familiar with know those procedures. The rest of the respondents declare not having such knowledge. The detailed answers division has been shown in fig. no. 11.

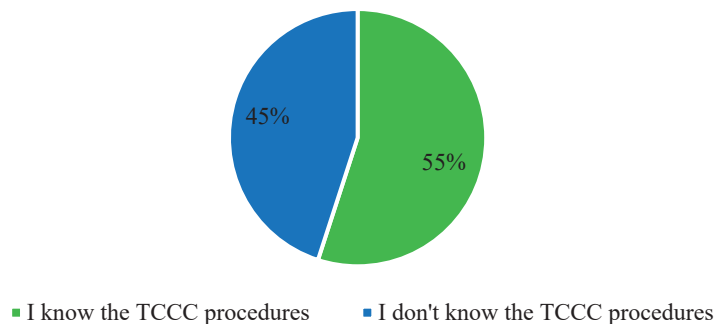


Figure 11. Declared familiarity with the TCCC procedures (n=101)

Question no. 8

The last question being analysed verifies recommendations of experts in the field of emergency medical services. The question is: in your opinion, should the TCCC procedures be used by the police? 53% of the respondents answered yes, 8% reply “no” and 39% of the respondents do not know if the TCCC procedures should be used by the police. The detailed answers division has been shown in fig. no 12.

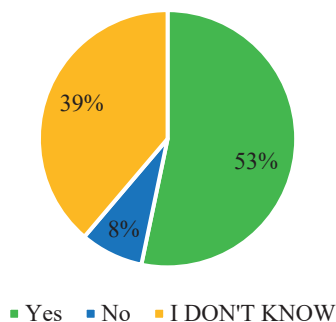


Figure 12. Recommendations to use the TCCC procedures by the police (n=101)

101 respondents in different age groups from all around Poland have taken part in the research. 50% of them were 31–40 years old. Most of the respondents (66%) were paramedics. Almost 60% declare 11–20 years of job seniority in medical professions. 27% of the respondents declare less than 10 years of job seniority, while 11% declare over 20 years of job experience. This data allows drawing the conclusion that the respondents are experienced emergency medical teams members. Almost 50% of the respondents declare holding a full time job in the National Medical Rescue Services, 30% of them represent units that cooperate with the aforementioned entities (National Fire Service, the Polish Volunteer Mountain Rescued Service, the Tatra Mountain Volunteer Service, the Water Rescue Service and others) – they also work in the National Medical Rescue Services, which is treated as a side job. Almost 70%

of the respondents claim that they have taken over an injured person from a scene. Slightly more than 55% of the respondents evaluated first aid given by policemen as accurate whereas only 18% claim that the first aid given by officers was inaccurate. The reliability of the results obtained can be confirmed by a study conducted in 2016 among officers of the Polish Police. The author of the research carried out during the indicated period indicates that a large percentage of police officers are able to properly provide assistance to an injured person (Płaczek, 2017).

Most of the respondents (70%) claim that the qualified first aid course is sufficient for people who are not associated with medical rescuing in order to provide proper help to injured people. Worth of mentioning is that 70% of the respondents claim that police officers have a license of a qualified first aid rescuer. Undoubtedly 95% of the respondents claim the qualified first aid course should be obligatory for police officers. Almost 40% of the respondents have taken part in TCCC course, and only 55% declare that they are familiar with procedures used in TCCC. 50% of the respondents state that TCCC procedures should to be used by the police.

7. Conclusions and recommendations

During an analysis of the two aforementioned courses it has been ascertained that the qualified first aid training does not include some of the topics of the TCCC course which, according to the authors, should be delivered during the qualified first aid course, i.e. the care over an injured person under fire, the principles and application of Tactical Field Care and the Tactical Trauma Assessment. The comparison of the two courses allows giving recommendations on how to complement the specialized course for police officers introduced by the 25th Decision of the Chief Constable (Official Gazette of the National Police Service, 2021, item 10) with the aforementioned TCCC topics. The highlighted issues will let Polish police officers become acquainted with rules of how to act in a tactical environment and the situations included in them will complement the knowledge regarding taking appropriate actions aimed primarily at eliminating the threat

The need of change in the qualified first aid course has also been noticed by officers who take part in such trainings (25th Decision of the Commander-in-Chief). The research executed at the turn of 2022 and 2023 by academics of the Police Academy in Szczytno shows that the participants of the qualified first aid course also point out the need for changes (<https://dms.wspol.edu.pl/out/out.ViewFolder.php?folderid=326>).

During an inspection of the scholar systems superior to the Ministry of Internal Affairs and Administration, the Supreme Audit Office has ascertained that the evaluation of training based only on ratings given by participants after graduation do not allow a full evaluation of the effectiveness of such training, therefore an intentional choice of the respondents, in the authors' opinion, is recommended (<https://www.nik.gov.pl/aktualnosci/szkolenie-funkcjonariuszy.html>).

The analysis of TCCC and qualified first aid courses shows that in both cases a lot of time is used for paying attention to blocking massive external haemorrhages, especially with the use of a tourniquet. The standard equipment of police officers and criminal police officers consists of a personal dressing (W type) and gloves (Official Gazette of the National Police Service, 2019.87), which means that not all of the policemen have tourniquets at their disposal. The European Resuscitation Council (<https://www.prc.krakow.pl/wytyczne2021/rozd8.pdf>) and the TCCC committee and the International Trauma Life Support (Campbell, 2017) recommend the immediate use of a tourniquet in case of haemorrhages that pose a threat to life, for instance limb haemorrhages or their traumatic amputation. The use of tourniquets was taken by pre-hospital treatment from the army where its use drastically reduced the death rate in battlefields. During the Vietnam War, 25000 troop members of the US Army died because of haemorrhagic shock. Around 1000 injured people survived thanks to the proper application of tourniquets during the conflict in Iraq in 2008 (the data was obtained from the research carried out on commission of the scholar TCCC committee) (https://www.mp.pl/pacjent/pierwsza_pomoc/293108,tamowanie-masywnych-krwotokow-opaski-uciskowe-opatrunki-hemostatyczne).

The statistical data compiled by the Police only in 2021 shows the occurrence of 682 crimes with the use of firearms (<https://statystyka.policja.pl/st/wybrane-statystyki/bron/186393,Przestepstwa-przy-uzyciu-broni.html>). This kind of crime is undoubtedly dangerous when it comes to possible body injuries, which may result in massive haemorrhages. Worthy of mentioning is the fact that not only firearms cause haemorrhages. Police officers also answer calls during which they help people with traumatic amputations and massive haemorrhages coming from incised wounds caused by sharp objects. Such wounds need immediate help by blocking the aforementioned haemorrhages. In all of these cases time is of the essence in order to help the injured to survive. One of the 7 mistakes made by a rescuer while blocking a haemorrhage is using an inappropriate tourniquet (<https://gazeta.policja.pl/997/archiwum-1/2020/numer-187-pazdziernik-2/195389,7-bledow-popelnianych-podczas-masywnych-krwotokow.html>). That is the reason why the authors recommend the introduction of changes to the Police policy, which will hopefully result in further equipping in professional tourniquets recommended by scientific associations.

The conclusions of the audit conducted by the Supreme Audit Office indicate that only 5% of police officers were certified to provide qualified first aid. It is a fact that police officers participate in first aid training during the basic course, but according to the Supreme Audit Office, it is the qualified first aid course that is important for saving the lives and health of citizens, given that police officers are the first on the scene (<https://www.nik.gov.pl/aktualnosci/szkolenie-funkcjonariuszy.html>). An analysis of the compiled data shows that 95% of the respondents are convinced that officers are qualified first aid rescuers, so the authors, although they are aware of the limited capacity of the police science units, also recommend that

changes be made in basic vocational training by replacing the first aid subject with a qualified first aid course (Official Gazette of the National Police Service, 2022 item 238 as amended), according to the current curriculum of the basic course, which includes a set of classes entitled “Ensuring the safety while being on duty and answering calls”. During this course future police officers are taught how to provide first aid. The replacement of this set of classes by the first aid course can bring measurable benefits not only for the Polish police but it also can enhance the feeling of safety among policemen and citizens. It is the intention of the authors to present the conclusions and recommendations resulting from the research to the Chief of Police who can directly decide on training and course programmes and equipment for police officers.

8. Conclusion

Police officers are employees of state services, and therefore have not only a moral, but above all a legal and service-related obligation to provide first aid. With this in mind, knowledge and skills in this area should be mastered by police officers at the highest level. Any such lack of competence can pose a threat, on the one hand, of serious official and legal consequences, and on the other, the loss of life of another person who is in a state of health emergency. The analysis of the compiled research material shows that changes in police education in the area of rescue are desirable. Not only the authors of this study, but also medical rescue experts and participants in the specialized qualified first aid course point to such a need. In addition, taking into account recommendations of international scientific societies, it would be advisable to retrofit police officers with professional tourniquets (Official Gazette of the National Police Service 2019.87; <https://www.prc.krakow.pl/wytyczne2021/rozd8.pdf>). The authors of the article recommend conducting another similar study comprising a larger number of participants. Nevertheless, one can, with some limitations, be inclined to assume that the accepted research hypothesis may be true. Therefore, the authors recommend amending the Qualified First Aid course curriculum by adding elements of the TCCC course such as care of a casualty under fire, rules and application of tactical battlefield casualty care, tactical trauma assessment, and retrofitting police officers with tourniquets such as CAT (Combat Application Tourniquet). The analysis of the collected research material indicates the need to amend Decision No. 25 of the Commander-in-Chief dated February 8, 2021 on the programme of the specialized course in qualified first aid. Amendments are also needed to Order No. 55 of the Commander-in-Chief dated June 3, 2019, amending the Order on the determination of standards of equipment for units, organizational units of the Police and police officers, as well as detailed rules for its allocation and use. These changes can be made from the level of the Police Commander-in-Chief, to whom the recommendations will be submitted.

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KSZTAŁCENIE FUNKCJONARIUSZY POLICJI W ZAKRESIE KWALIFIKOWANEJ PIERWSZEJ POMOCY

Abstrakt

Artykuł jest próbą porównania i oceny kursu Tactical Combat Casualty Care (TCCC) oraz kursu Kwalifikowanej Pierwszej Pomocy (KPP) pod kątem ich przydatności w codziennej służbie funkcjonariuszy polskiej Policji. Badania z wykorzystaniem techniki sondażu diagnostycznego zostały przeprowadzone na przełomie 2022 i 2023 roku w oparciu o kwestionariusz ankiety wprowadzony w Google Forms.. Badania przeprowadzono wśród personelu zespołów ratownictwa medycznego wykonujących medyczne czynności ratunkowe na terenie całej Polski. W ramach przygotowania projektu badań założono, że grupa tych respondentów posiada niezbędne kwalifikacje medyczne do oceny działań ratowniczych innych osób. Ponadto w ramach wykonywanego zawodu respondenci często są świadkami działań funkcjonariuszy Policji udzielających pierwszej pomocy na miejscu zdarzenia. W badaniu zebrane zostały materiały badawcze które umożliwiły zweryfikowanie hipotezy badawczej przyjętej w rozważaniach. W opracowaniu zgromadzono skompilowany materiał badawczy, który pozwolił na weryfikację przyjętych w rozważaniach hipotez badawczych. Niemniej jednak autorzy są świadomi ograniczeń przyjętej metodologii badawczej. W końcowej części artykułu przedstawiono wnioski i rekomendacje dotyczące kierunku proponowanych zmian w szkolnictwie policyjnym w zakresie kwalifikowanej pierwszej pomocy.

Słowa kluczowe: ratownictwo, taktyczna opieka nad poszkodowanymi w walce, policja, kwalifikowana pierwsza pomoc