



Complex Standard Rapid					COMMAND ASSESSOR	Frankfurt Germany 2009	SPILLS
							SLIP/TRIP
ASSESSOR :					TEAM :		SRS
CATEGORY					COMMENTS	TIME :	AIRBAG
INITIAL TEAM APPROACH					B E T S		DUEL
RISK ASSESS HAZARDS IDENTIFIED						POSITIVE POINTS	LPG
FULL INNER AND OUTER SURVEY & INFO GATHERED							HYBRID
INITIAL PRIORITIES GIVEN TO CREWS							UNDER
ESTABLISH DEGREE OF ENTRAPMENT							BATT
PLANNING & COMMUNICATION					B E T S		KEYS
EXTRICATION PLANNING					FULL:	EMERGENCY:	
COMMUNICATION & TEAM MANAGEMENT						LEARNING POINTS	
INSTRUCTIONS ACTED ON & UNDERSTOOD							
CASUALTY AWARENESS AT ALL TIMES							
INCIDENT COMMAND					B E T S		
COMMAND & LEADERSHIP							
GOOD OVERALL POSITIONING							
TECHNIQUE MANAGEMENT							
PLAN PROGRESSION							
SAFETY					B E T S	POSITIVE POINTS	
USE OF PPE							
MAINTAINS A SAFE WORKING AREA							
CONTROL OF EXTRICATION PHASE							
CONTROLS ALL ASPECTS OF SAFETY & WELFARE							
SUPPORT					B E T S	POSITIVE POINTS	
RESOURCE MANAGEMENT							
MOTIVATION & MOMENTUM							
MINIMUM HANDS ON							
MIN. ON SCENE COACHING/TEACHING							
DEBRIEF SUMMARY						SCORE CHECKER'S INITIALS	
ASSESSORS SIGNATURE :						TOTAL SCORE	MAX 200

Safety	Hands	Coach	Trip	Positioning

COMMAND - SUMMARY	TECHNICAL - SUMMARY	MEDICAL - SUMMARY

		BASIC (0 - 4)	EFFICIENT (5 - 7)	THOROUGH (8 - 10)
INITIAL TEAM APPROACH	RISK ASSESS HAZARDS IDENTIFIED	Safety critical Hazards missed, not eliminated, isolated or removed	All hazards identified but not effectively managed	All hazards identified and managed thoroughly (eliminate, isolate, control, safe system of work, remove)
	FULL INNER AND OUTER SURVEY & INFO GATHERED	No effort to manage scene survey and act on information gathered.	Management of inner and outer scene survey is somewhat "mechanical" with poor information exchange.	Well organised and thorough inner and outer survey with complete and thorough information exchange.
	INITIAL PRIORITIES GIVEN TO TEAMS	Initial priorities not given clearly or not recognised and acted upon	Slow to identify initial priorities or not all acted upon or not in a timely manner	Initial priorities identified and acted upon thoroughly
	ESTABLISH DEGREE OF ENTRAPMENT	Degree of entrapment not identified at all	Degree of entrapment is partially identified and included late in the evolution after appropriate plan has been developed	Degree of entrapment is thoroughly assessed and factored into overall extrication plan.
PLANNING & COMMUNICATION	EXTRICATION PLANNING	No clear plan developed, IC becomes too focused on a single plan with no attempt to alter plan in time of difficulties. No emergency plan detailed	Full plan and an emergency route is outlined. IC modifies plan after encountering some difficulty but is slow to recognise problems. Plan is re-assessed only in anticipation of problems	Plan developed with awareness of access, extrication and pathway options. Demonstration that an emergency route is available and viable. Regular reassessment throughout the evolution. Potential problems anticipated and plan modified maintaining momentum.
	COMMUNICATION & TEAM MANAGEMENT	IC overbearing towards team. No consultation, fails to listen and liaise with team	IC has limited discussion with team or consults excessively	IC consults and liaises with team and considers suggestions,
	INSTRUCTIONS ACTED ON & UNDERSTOOD	Instructions are ignored or not understood by team	IC gives clear instructions to team but does not confirm if team has clear understanding	IC effectively communicates and ensures all instructions are clearly understood.
	CASUALTY AWARENESS AT ALL TIMES	IC fails to consider impact on casualty and does not ensure team is actively advising casualty and medic before actions are taken.	Communications not consistent throughout scenario resulting in some activities being carried out without awareness of casualty.	IC's concern for the safety and welfare of the casualty is clearly evident by the instructions given.
INCIDENT COMMAND	COMMAND & LEADERSHIP	IC allows team members to take control and is not strong in the controlling of the scenario	IC's skills are clearly recognisable, some instances occur where focus is lost or issues missed.	Thorough command skills demonstrated throughout the scenario.
	GOOD OVERALL POSITIONING	IC not well positioned to manage team activities	Good position taken initially but not maintained throughout the scenario	Maintains good overall positioning to effectively monitor and manage team throughout scenario.
	TECHNIQUE MANAGEMENT	IC does not ensure actions are completed systematically and efficiently to achieving the plan. No simultaneous activity with some resources delayed.	Choice of techniques, tools and equipment deployed is consistent with achieving plan. Direction of team activities is systematic and consistent with techniques chosen, limited simultaneous activity.	All actions contribute to achieving the objective as systematically and efficiently as possible. Significant simultaneous activity demonstrated with no delays in obtaining resources.
	PLAN PROGRESSION	No attempt to follow initial plan with little achieved. No fore thought as scenario progresses.	Plan followed, with partial plan achieved. Little fore thought as scenario progresses.	Initial plan followed and progressive plans adopted and achieved as scenario progresses.
SAFETY	USE OF PPE	IC has little or no concern for the use of PPE by team and does not encourage team to use equipment	IC is aware of team safety and intermittently ensures use of appropriate PPE.	IC effectively controls safety and ensures all team make full use of PPE at all times
	MAINTAINS A SAFE WORKING AREA	Critical safety hazards/aspects are missed during the scenario which impacts on both the casualty and team	All safety hazards/aspects are taken into account but not all dealt with efficiently	All hazards clearly identified and managed efficiently. Clear focus on creating a safe work environment.
	CONTROL OF EXTRICATION PHASE	IC does not clearly identify the medical extrication phase of incident. Confusion with team members assuming control of casualty movement.	IC does not clearly identify the medical extrication phase of incident, confusion re who is in control movement.	IC clearly identifies medic in control of casualty packaging and movements. IC has control of overall extrication.
	CONTROLS ALL ASPECTS OF SAFETY & WELFARE	Team are not rotated at all or only when they request it. No compliance for safe work practices. Manual handling managed poorly.	Team is rotated occasionally. Some attention is paid to manual handling and safe work practices but not consistently throughout scenario.	IC ensures team are rotated regularly and continually monitor each other for compliance with safe work practices. Manual handling is well managed.
SUPPORT	RESOURCE MANAGEMENT	lack of pre planning, resulting in delays or minimal efficiency of resources, equipment and procedures.	Operations co-ordinated at times with little delay of resources, equipment and procedures.	All decisions made in a timely and efficient manner to ensuring the efficient use of resources, equipment and procedures.
	MOTIVATION & MOMENTUM	IC does not encourage team. Tempo and momentum is slow throughout the scenario.	IC provides some encouragement and motivation to team, but a good tempo & momentum is not maintained throughout scenario.	IC effectively motivates and encourages team. Good tempo and momentum is maintained throughout the scenario.
	MINIMUM HANDS ON	IC becomes task focused and loses command overview for the majority of the scenario	IC becomes task focused from time to time. Continually assisting with major technical tasks.	IC does not become task focused and assists where and when appropriate.
	MIN. ON SCENE COACHING/TEACHING	IC lacks confidence in team and gets too involved in specific techniques or actions	IC demonstrates confidence in the team but on occasion becomes focused in coaching on specific techniques	IC demonstrates full confidence in team who carry out all tasks with little or no additional direction.

Complex Standard Rapid				TECHNICAL ASSESSOR	Frankfurt Germany 2009	SPILLS	
ASSESSOR :					TEAM :		SLIP/TRIP
CATEGORY				COMMENTS	TIME :	AIRBAG	
VEHICLE PREPARATION				B E T S		DUEL	
STABILITY RAPID & LOGICAL					POSITIVE POINTS	LPG	
ASSESSED REGULARLY						HYBRID	
GLASS MANAGED EARLY & LOGICAL						UNDER	
FULL PROTECTION GIVEN						BATT	
SPACE CREATION				B E T S		KEYS	
EARLY INITIAL ACCESS					LEARNING POINTS		
EFFECTIVE EXTRICATION TECHNIQUES							
EFFECTIVE EXTRICATION PLAN							
FINAL EXTRICATION SPACE							
TOOL OPERATION				B E T S			
RESCUE TOOLS & TECHNIQUES CORRECT WORKSPACE MANAGED CORRECTLY					POSITIVE POINTS		
TOOL OPERATION, ANGLE PURCHASE ETC							
WARNINGS GIVEN AND ACKNOWLEDGED							
HAZARDS CONSIDERED, REVEALED, IDENTIFIED,							
CASUALTY PACKAGING & PATHWAY				B E T S			
STABILITY NO ADVERSE MOVEMENT					POSITIVE POINTS		
PROTECTION AS REQUIRED							
FINAL EXTRICATION PATH AND EGRESS							
CASUALTY AWARENESS & PACKAGING							
TEAMWORK/EFFICIENCY/SAFETY				B E T S			
PREPLANNING, TASK PREPARATIONS & GOOD COMMUNICATIONS					POSITIVE POINTS		
EFFICIENT TEAMWORK - SIMULTANEOUS ACTIVITY							
GOOD MOMENTUM ACHIEVED							
SAFE TOOL OPERATION WITH PPE							
DEBRIEF SUMMARY					SCORE CHECKER'S INITIALS		
ASSESSORS SIGNATURE :					TOTAL SCORE		
					MAX 200		

Tool handling	Safety	Vehicle Movement	Trip	Stability Check

		BASIC (0 - 4)	EFFICIENT (5 - 7)	THOROUGH (8 - 10)
VEHICLE PREPARATION	STABILITY RAPID & LOGICAL	Primary and Secondary stabilisation (if required) not achieved or revisited.	Primary and Secondary stabilisation (if required) is achieved and revisited.	Thorough Primary and Secondary stabilisation (if required) achieved and revisited.
	ASSESSED REGULARLY	Basic stabilisation with little or no rechecking at relevant stages of operations.	Efficient checking of stabilisation but not always at relevant stages of operations.	Thorough checking of stabilisation at all relevant stages of operations.
	GLASS MANAGED EARLY & LOGICAL	Glass not managed at appropriate time and hinders operations later in the scenario	Glass managed at appropriate time and some hindrance to operations later in the scenario	Thorough glass management at appropriate time with no hindrance to operations later in the scenario
	FULL PROTECTION GIVEN	Glass incorrectly managed or little regard given to safety / No warnings given. Basic casualty protection demonstrated	Glass correctly managed with some regard given to safety . Some warnings given. Efficient casualty protection demonstrated	Glass thoroughly managed with full regard given to safety . Thorough warnings given. Thorough casualty protection demonstrated
SPACE CREATION	EARLY INITIAL ACCESS	Technical personnel provide delayed initial access to casualty for medic	Technical personnel provide prompt initial access to casualty for medic	Technical personnel provide rapid initial access to casualty for medic
	EFFECTIVE EXTRICATION TECHNIQUES	No attempt/ Minimal internal space creation.	Some internal space generated but still not sufficient for medic or extrication.	Excellent , timely and sufficient internal space created for medical duties and extrication route.
	EFFECTIVE EXTRICATION PLAN	Techniques adopted do not contribute to Extrication plan or gaining full access	Techniques to gain full access are relevant but progress is insufficient	Techniques are appropriate and executed to a high standard to achieve the extrication plan
	FINAL EXTRICATION SPACE	Final space insufficient for the safe removal of casualty	Final space is sufficient but casualty requires manoeuvring out.	Maximum space created. Full access achieved with no manual handling issues
TOOL OPERATION	RESCUE TOOLS & TECHNIQUES CORRECT WORKSPACE MANAGED CORRECTLY	Technical personnel demonstrated incorrect use of equipment, techniques or vehicle knowledge. Basic workspace management carried out	Technical personnel demonstrated correct use of equipment, techniques or vehicle knowledge. Efficient workspace management carried out	Technical personnel demonstrated thorough use of equipment, techniques or vehicle knowledge. Thorough workspace management carried out
	TOOL OPERATION, ANGLE PURCHASE ETC	Tool operators have basic knowledge of correct tool selection,angles,purchase points and general tool control.	Tool operators have efficient knowledge of correct tool selection, angles, purchase points and general tool control.	Tool operators have thorough knowledge of correct tool selection, angles, purchase points and general tool control.
	WARNINGS GIVEN AND ACKNOWLEDGED	No warnings given or acknowledgement received throughout the scenario.Basic managed workspace in relation to equipment, personnel and debris.	Some warnings given, and acknowledgement received throughout the scenario. Efficient management of workspace in relation to equipment,personel and debris.	At all times warnings were given and acknowledged throughout the scenario. Thorough managed workspace in relation to equipment personnel and debris
	HAZARDS CONSIDERED, REVEALED, IDENTIFIED, ACTED UPON	Tools used in unsafe manner -Hazards not considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc	Tools used in an inconsistent safe manner -Hazards not considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc	Tools used in a safe manner- All Hazards considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc
CASUALTY PACKAGING & PATHWAY	STABILITY NO ADVERSE MOVEMENT	Large amount of adverse Movement/ Vibration transferred to casualty during operations.	Minimal adverse Movement / Vibration transferred to casualty during operations	No adverse Movement / Vibration transferred to casualty during operations
	PROTECTION AS REQUIRED	Little/ No protection for casualty during operations.	Some protection provided for casualty during operations	Excellent casualty protection given at all times and stages during operations.
	FINAL EXTRICATION PATH AND EGRESS	Final extrication path not successful or sufficient for casualty, considering their condition. (Key-hole)	Final extrication path successful for casualty given their condition, with some manipulation during extrication. Space not sufficient	Final extrication path successful and executed to a high standard during extrication
	CASUALTY AWARENESS & PACKAGING	Little or No concern given casualty's well being or emotional state during operations packaging insufficient or inappropriate	Good level of consideration given to both Physical and Mental welfare of casualty. Packaging appropriate for plan	Excellent consideration given to all aspects of casualty care at all times. Thorough packaging for extrication plan
TEAMWORK EFFICIENCY & SAFETY	PREPLANNING, TASK PREPARATIONS & GOOD COMMUNICATIONS	Technical personnel unsure of role or assigned tasks / demonstrating limited task preparation	Technical personnel demonstrate common understanding of the objective, which leads to some pre planning and task preparation	Technical personnel fully proficient in their role/function which leads to pre planning and task preparation.
	EFFICIENT TEAMWORK - SIMULTANEOUS ACTIVITY	Technical personnel work as individuals or demonstrate poor communications or demonstrate limited simultaneous activity.	Technical personnel demonstrate good communications, teamwork and some simultaneous activity.	Excellent communications, teamwork and simultaneous activity demonstrated at all times
	GOOD MOMENTUM ACHIEVED	Little progression towards the objective achieved	Time reasonably well spent to accomplish tasks by technical personnel.	Efficient, controlled and safe progression of plan achieved making the best use of time.
	SAFE TOOL OPERATION WITH PPE	Personnel fail to demonstrate correct procedures in relation to tool safety and PPE.	Good Tool safety and PPE demonstrated with some minor issues	Technical personnel provide an excellent demonstration of tool safety and PPE at all times.

1. Technical Assessors to record orientation of primary vehicle (contains primary casualty) as 'W' for wheels, 'S' for side and 'R' for roof

2. Technical Assessors to record all techniques employed during the course of the scenario by the team using numbered scenarios


TECHNIQUE OPTIONS – vehicle on side	TECHNIQUE OPTIONS – Vehicle on Roof	TECHNIQUE OPTIONS – Vehicle on Wheels
<ol style="list-style-type: none"> 1. Full or partial roof removal 2. Roof flap: forward, rear, down, up, partial 3. Rear access (<i>thru boot, removing rear parcel shelf</i>) 4. Tunnelling (<i>cutting along roof rails and removing roof section</i>) 5. Steering wheel relocation 6. Dash relocation 7. Lifting 8. Vehicle 	<ol style="list-style-type: none"> 1. Inverted side removal 2. Side fold up 3. Inverted B pillar rip 4. Inverted third door removal 5. Full or partial roof removal 6. Roof oyster: side or rear 7. Dash relocation 8. Rear access (<i>thru boot, rear parcel shelf</i>) 9. Lifting 10. Vehicle relocation 11. Floor/seat fold up 	<ol style="list-style-type: none"> 1. Full side removal 2. Side fold down 3. B pillar rip 4. Third door removal 5. Full or partial roof removal 6. Roof flap: forward, rear, side, partial

CATEGORY	APPROACH	INITIAL CASUALTY CONTACT	PRIMARY SURVEY (AIRWAY ASSESSMENT & MANAGEMENT)	PRIMARY SURVEY (BREATHING ASSESSMENT & MANAGEMENT)	PRIMARY SURVEY (CIRCULATION ASSESSMENT & MANAGEMENT)
STANDARD	ASSESSES MECHANISMS & HAZARDS	COMMUNICATES APPROPRIATELY WITH CASUALTY ON APPROACH	CHECK FOR CATASTROHIC HAEMORRHAGING AND RECOGNISES AIRWAY STATUS (WITH 'C' SPINE CONTROL)	PERFORMS VENTILATORY ASSESSMENT (RATE, DEPTH, REGULARITY, INCREASED EFFORT)	IDENTIFIES & MANAGES HAEMORRHAGE
	IDENTIFIES & TRIAGES CASUALTIES	GIVES CLEAR SAFETY INSTRUCTIONS	PERFORMS VISUAL INSPECTION OF THE MOUTH	INSPECTS CHEST (VISUAL & PALPATION)	PERFORMS SKIN PERFUSION CHECK (COLOUR & TEMP)
	RECEIVES OUTCOME OF 360 degree SURVEY	MAKES IC AWARE OF NEED FOR RAPID ENTRY	CARRY'S OUT APPROPRIATE AIRWAY MANOEUVRE	LISTENS FOR BREATHING SOUNDS (AUSCULTATION OPTIONAL)	CHECKS AND COMPARES CENTRAL & PERIPHERAL PULSES
	LIAISES WITH IC ON APPROACH	GIVES CONSTANT REASSURANCE TO CASUALTY	MAINTAINS AIRWAY PATENCY THROUGHOUT	RECOGNISES THE NEED FOR & APPLIES SUPPLEMENTAL OXYGEN	ASSESSES CAPILLARY REFILL
	IDENTIFIES SAFE ACCESS	GAINS EFFECTIVE ACCESS	MAINTAINS AIRWAY PATENCY THROUGHOUT	CONTINUOUSLY MONITORS	CONTINUOUSLY MONITORS

CATEGORY	PRIMARY SURVEY (DISABILITY ASSESSMENT & MANAGEMENT)	SECONDARY SURVEY (EXPOSE & EXAMINE)	SPINAL MANAGEMENT (INITIAL)	SPINAL MANAGEMENT (ONGOING)	MEDICAL EQUIPMENT
STANDARD	PERFORMS CONSCIOUS LEVEL ASSESSMENT (AVPU)	CARRY OUT FULL BODY EXAMINATION	PROVIDES MANUAL IN-LINE STABILISATION OF HEAD & NECK	MAKES TEAM AWARE OF OTHER INJURIES BEFORE MOVEMENT	USE OF APPROPRIATE P.P.E./ BSI (Body Substance Isolation)
	ASSESSES PUPILS	IDENTIFIES LEVEL OF ENTRAPMENT	USES EFFECTIVE TECHNIQUE	ENSURES CORRECT & SAFE MOVEMENT WHEN NECESSARY	CORRECT & APPROPRIATE USE OF EQUIPMENT
	ESTABLISHES CASUALTY'S CHIEF COMPLAINTS	IDENTIFIES INJURIES/ABNORMALITIES	HANDS OVER CONTROL OF HEAD & NECK TO TEAM MEMBERS SAFELY	ENSURES NO UNNECESSARY MOVEMENT OF SPINE THROUGHOUT	EQUIPMENT POSITIONED SAFELY
	CHECKS SENSORY& MOTOR FUNCTION	ASSESSES RELEVANT MEDICAL HISTORY (AMPLE)	CORRECTLY SIZES & FITS RIGID COLLAR WHEN POSSIBLE	DIRECTS TEAM DURING NECESSARY MOVEMENT	OXYGEN DELIVERY SYSTEM MONITORED
	CONTINUOUSLY MONITORS	REASSESS PRIMARY & SECONDARY SURVEY	ENSURES MAINTENANCE OF SPINAL IMMOBILISATION THROUGHOUT	CORRECTLY MOVES PATIENT WHEN REQUIRED	CONTINUOUSLY MONITORS EQUIPMENT LOCATION & SAFETY

CATEGORY	CASUALTY HANDLING (EXTRICATION PLANNING & MANAGEMENT)	CASUALTY SAFETY (PROTECTION FROM ENVIRONMENT)	COMMUNICATION (WITH IC.)	COMMUNICATION (WITH TEAM)	COMMUNICATION (WITH CASUALTY)
STANDARD	MAKES TEAM AWARE OF ALL PLANS	AWARE OF HAZARDS	AT INITIAL APPROACH	KEEPS TEAM INFORMED OF CASUALTY CONDITION	LISTENS & REACTS TO CASUALTY
	SUPERVISES CORRECT BOARD INSERTION	ENSURED CORRECT USE OF HARD/SOFT PROTECTION	NOTIFIES OF HAZARDS (AIRBAGS ETC)	ENSURES TEAM UNDERSTAND THEIR ROLES	ASKS APPROPRIATE QUESTIONS
	PELVIS CONTROLLED, STRAPPED, CONSIDERED	ENSURED USE OF MEDICAL GLOVES ONLY DURING CASUALTY CONTACT	INFORMS IC OF CASUALTY'S CONDITION AFTER PRIMARY SURVEY	GIVES CLEAR INSTRUCTIONS TO TEAM	KEEPS CASUALTY INFORMED & REASSURED AT ALL TIMES
	ENSURES SAFE & CORRECT TRANSFER ONTO LONG BOARD	DISPLAYED SITUATION & SELF AWARENESS/SAFETY	INFORMS IC OF CASUALTY'S CONDITION FOLLOWING SECONDARY SURVEY	DIRECTS TEAM WHERE NECESSARY	AVOID USING MEDICAL OR PATRONISING JARGON
	ENSURED CARE & PROTECTION OF INJURIES THROUGHOUT	MAINTAINS CORRECT PROTECTION THROUGHOUT	MAINTAINS COMMUNICATION WITH IC THROUGHOUT	MAINTAINS COMMUNICATION WITH TEAM THROUGHOUT	MAINTAINS COMMUNICATION WITH CASUALTY THROUGHOUT

BASIC	BONUS MARKS	1	MEDIC CARRIED OUT SOME OF THE ABOVE EITHER TOO RAPIDLY/SLOWLY SHOWED UNSAFE PRACTICE DID NOT USE SYSTEMATIC APPROACH
		2	MEDIC CARRIED OUT SOME OF THE ABOVE EITHER TOO RAPIDLY/SLOWLY SHOWED SAFE PRACTICE DID NOT USE A SYSTEMATIC APPROACH
EFFICIENT	BONUS MARKS	3	MEDIC CARRIED OUT SOME OF THE ABOVE DESPITE BEING TOO RAPID/SLOW SHOWED SAFE PRACTICE USED SYSTEMATIC APPROACH
		4	MEDIC CARRIED OUT ALL OF THE ABOVE AT THE CORRECT SPEED SHOWED SAFE PRACTICE USED SYSTEMATIC APPROACH
THOROUGH		5	MEDIC CARRIED OUT ALL OF THE ABOVE AT THE CORRECT SPEED SHOWED CONSISTENT SAFE PRACTICE USED A SYSTEMATIC APPROACH DEMONSTRATING ATTENTION TO DETAIL

WRO TRAUMA CHALLENGE				TRAUMA ASSESSOR		Frankfurt Germany 2009	
ASSESSOR :				TEAM :			
CATEGORY						COMMENTS	TIME :
APPROACH		1	2	3	4	5	B S
SCENE HAZARDS & CASUALTY CONTACT							
PRIMARY SURVEY		1	2	3	4	5	B S
CATASTROPHIC HAEMORRHAGE & AIRWAY							
BREATHING							
CIRCULATION							
EXTENDED SURVEY		1	2	3	4	5	B S
DISABILITY							
EXPOSURE / EXAMINATION							
REASSESS ABC							
SPINAL MANAGEMENT		1	2	3	4	5	B S
INITIAL SPINAL CARE							
ON-GOING SPINAL CARE							
MEDICAL EQUIPMENT		1	2	3	4	5	B S
EQUIPMENT USE & SAFETY							
CASUALTY HANDLING		1	2	3	4	5	B S
TREATMENT OF INJURIES / BLS							
MANAGEMENT AND PROGRESSION							
COMMUNICATION		1	2	3	4	5	B S
WITH TEAM MEMBER							
WITH CASUALTY							
HANDOVER TO MEDICS							
DEBRIEF SUMMARY						SCORE CHECKER'S INITIALS	
						TOTAL SCORE	
ASSESSORS SIGNATURE :						MAX 150	

CATEGORY	Approach (scene hazards & casualty approach)	Primary Survey (airway assessment and management)	Primary Survey (breathing assessment & management)	Primary Survey (circulation assessment & management)	Extended Survey (disability assessment & management)
STANDARD	Establishes scene safety	Checks for catastrophic haemorrhage	Performs breathing assessment (rate, depth, regularity, effort)	Identifies and manages haemorrhage	Assesses conscious level using appropriate gauge
	Assesses mechanisms of injury	Recognises airway status (with 'c' spine control)	Inspects chest (visual and palpation)	Performs skin perfusion check (colour and temperature)	Examines pupils
	Liaises with colleague	Performs visual inspection of the mouth	Listens for breathing sounds (auscultation optional)	Checks and compares central and peripheral pulses	Checks sensory function
	Identifies themselves to casualty	Carries out appropriate airway manoeuvre	Recognises the need for and applies supplemental oxygen	Assesses capillary refill	Checks motor function
	Continuously monitors for potential scene hazards.	Maintains airway patency throughout	Continuously monitors	Continuously monitors	Continuously monitors
CATEGORY	Extended Survey (expose & examine)	Extended Survey (reassessment of abc)	Spinal Management (initial)	Spinal Management (ongoing)	Use of Medical Equipment
STANDARD	Examines head and neck	Undertaken at appropriate time	Provides manual in-line stabilisation of head & neck	Make all aware of injuries before movement	Appropriate Personal Protective Equipment selected
	Examines and exposes chest and abdomen	Checks airway patency	Uses effective technique	Ensures correct movement when necessary	Correct oxygen mask / sized and fitted
	Examines upper body	Checks breathing rate and depth	Hands over control of head & neck to colleague safely	Direct all during necessary movement	Correct oxygen flow rate and delivery system monitored
	Examines lower body	Checks pulse rate / capillary refill	Correctly sizes and fits rigid collar at appropriate time	Correct movement to longboard	All equipment used and positioned safely
	Assesses relevant medical history	Assesses conscious level	Ensures maintenance of spinal immobilisation throughout	Continuously monitors	Appropriate use of available equipment

CATEGORY	Casualty Handling (Treatment of injuries /BLS)	Casualty Handling (Management and progression)	Communication (within team)	Communication (with casualty)	BLS	AED	Communication (Handover to medic)
STANDARD	Prioritises treatment	Identify time critical aspects	Agree and share plan of action	Listens & reacts to casualty	Checks airway/breathing	Effective BLS commenced pre-shock	Describes the incident
	Correct choice of splints/dressings etc	Formulation of a plan	Ensure each understand their roles	Asks appropriate questions	Correct hand position	Minimal delay in use	Describes the injuries and initial status/obs
	Correct techniques employed	Carry out plan without delays	Keep each other informed of casualty condition	Keeps casualty informed & reassured at all times	Starts compressions	Makes environment safe and checks chest	Describes treatment
	Ensures care and protection of injuries	Reacts to change	Gives clear instructions to colleague and/or bystanders if applicable	Avoid using medical or patronising jargon	Correct rate	Correct pad placement / contact	Describes current status
	Monitors condition etc	Applies appropriate environmental considerations	Maintain communication with each other throughout	Maintains communication with casualty throughout	Correct ratio and techniques	Gives correct commands / warnings pre shock	Gives other appropriate information - AMPLE
BASIC	1	MEDIC CARRIED OUT SOME OF THE ABOVE EITHER TOO RAPIDLY/SLOWLY SHOWED UNSAFE PRACTICE DID NOT USE SYSTEMATIC APPROACH					
	2	MEDIC CARRIED OUT SOME OF THE ABOVE EITHER TOO RAPIDLY/SLOWLY SHOWED SAFE PRACTICE DID NOT USE A SYSTEMATIC APPROACH					
EFFICIENT	3	MEDIC CARRIED OUT ALL OF THE ABOVE DESPITE BEING TOO RAPID/SLOW SHOWED SAFE PRACTICE USED SYSTEMATIC APPROACH					
	4	MEDIC CARRIED OUT ALL OF THE ABOVE AT THE CORRECT SPEED SHOWED SAFE PRACTICE USED SYSTEMATIC APPROACH					
THOROUGH	5	MEDIC CARRIED OUT ALL OF THE ABOVE AT THE CORRECT SPEED SHOWED CONSISTENT SAFE PRACTICE USED A SYSTEMATIC APPROACH DEMONSTRATED ATTENTION TO DETAIL					