

Assessor guide



Observation:	Theory Exam					
Instructions to learner:						
1. Please hand your online	ne theory exam to your assessor.					
Instructions to assessor:						
 Collect online theory ex 	am.					
Participants must have	completed and achieved a grade of 100% for assessment 1 to be deemed competent					
A hard copy of the certif	icate must be attached to the award or a photo viewed of completion.					
	Observation Criteria					
Task/observation	Task/observation (Key components/factors to look out for)					
Not Applicable	Not Applicable Not Applicable					

Name of document:	Assessor Guide (1 Day online – 1 Day Practical)			
Version Number: 1.0	Location: Standard 1			
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Observation:	CPR – Single operator on an adult			
survey/initial assessment on an uncor Your assessor will provide you with pr	n you see a male lying on the ground. You approach and complete a primary nscious casualty who is not breathing and treat accordingly as per DRSABCD. rompts of the scenario as you complete each task. lass for the scenario up to the point of commencing CPR which will be complete			
 Outcomes Assessment is lool 	ent. minutes (starting when the participant starts on the manikin). king for effective DRSABCD on an unconscious casualty who is not breathing. sponder at the time they are completing each task how the scenario will change.			
Task/observation	Observation Criteria (Key components/factors to look out for)			
1. Use standard precautions	Applies gloves, uses pocket mask where required			
2. Perform a hazard and danger assessment of the scene. Look for the cause of the injury.	 Assess area for any dangers to self, casualty and bystanders in that order. Brief survey of scene for cause of injury and to check for danger. No danger. 			
3. Check for response	 Approaches from feet were able to. Attempt to gain consent while introducing self. (Verbal) Squeeze shoulders and talk to casualty asking what's your name (Pain). No response. 			
	• No response.			
4. Send for help	 Ask bystander to call 000, come back and tell me when it's done and find a defibrillator 			

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6. Check for casualty breathing	 Vomit in airway. Rolls casualty onto side, uses two finger scoop to remove. Vomit is now clear of airway. Checks for breathing while casualty on side, look, listen and feel for normal breathing for 10 seconds. Casualty not breathing.
7. Commence CPR	 Two hands-using heel of hand on the centre of the chest between nipples. Straight arms, locking the elbows so the Participant positions their shoulders directly over their hands. Keeping both of their knees on the ground so as to push straight down. Delivering 30 compressions at a rate of 100-120 compressions per minute. 1/3 in depth and completely releases compression between each compression (Release). Tilts head and provide 1 breath, ensure you see chest rise and repeat to ensure that a total of 2 breaths are delivered. Completes approximately 6 cycles of 30:2 in 2 mins. Continue CPR of a minimum of 2 mins, uninterrupted on the floor.
8. Manage unconscious breathing casualty	 Inform first aid responder that the casualty is breathing. Roll into correct recovery position. Check airway, Head tilt applied, recheck breathing.
9. Shelter from environment, reassure, monitor	Shelter from element/manage body temperature.Monitor condition every 1-2 minutes full breathing assessment.

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Observation:	CPR – Two operator and apply an AED on an adult
Instructions to learner:	
You are walking along the street w	when you see two people performing CPR on a male casualty. They ask you to go
and find a defibrillator and come b	ack and help them.
Instructions to assessor:	
	ave been in the position of candidate 3
Person 1 - Compressions	
Person 2 - Breathing	
Person 3 - Applies defibrillator	
Task/observation	Observation Criteria (Key components/factors to look out for)
1. Use standard precautions	Applies gloves, uses pocket mask where required
2. Commence two (2) person CF	 Person 1 Two hands-using heel of hand on the centre of the chest, between nipples. Straight arms, locking the elbows so the participants positions their shoulders directly over their hands. Keeping both of their knees on the ground so as to push straight down. Delivering 30 compressions at a rate of 100-120 compressions per minute. Person 1 should count out loud from 25-30 so person 2 can prepare to give breaths 1/3 in depth and completely releases compression (Release). Tilts head and provide 1 breath, ensure you see chest rise and repeat to ensure that a total of 2 breaths are delivered. Person 1 and 2 continue CPR until the defib states otherwise.
3. Attach the defibrillator	 Person 3 - positions themselves appropriately near casualty (not on legs). Turns on defibrillator, listens to prompts. Places pads in correct position. Plugs in pads cord to defibrillator. Instructs team to stop CPR when defib is analysing. Instructs team to stand clear and looks around casualty to ensure no one is touching. Presses shock button when advised by defib. Instructs team to commence CPR if required.

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Observation:	CPR – Infant			
Instructions to learner: You are to demonstrate two minutes of CPR on an infant manikin.				
Instructions to assessor: Time each candidate effectively o	lemonstrating at least two minutes of CPR on an infant manikin.			
Task/observation	Observation Criteria (Key components/factors to look out for)			
1. Use standard precautions	Applies gloves, uses pocket mask where required			
2. Commence two (2) person C	 PR Two fingers on the centre of the chest, between nipples. Participants have the option of placing infant on a table, on the floor or holding them, head must be supported and in a neutral position. Delivering 30 compressions at a rate of 100-120 compressions per minute. 1/3 in depth and completely releases compression (Release). Provide 1 puff, ensure you see chest rise and repeat to ensure that a total of 2 puffs are delivered. 			

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Observation:	Apply first aid procedures for bleeding control				
nstructions to learner:					
ou are to demonstrate effective bleed	ng control for a laceration located:				
On your casualties forearm. (Tage)	ask 2)				
 On your casualties forehead. (1) 	Fask 2)				
ou are to demonstrate effective bleed	ng control for an embedded object located:				
In your casualties forearm. (Tas	sk 3)				
nstructions to assessor: Each injury can be dealt with individuall Il bandaging must be effective.	y or all at once depending on resources.				
Task/observation Criteria (Key components/factors to look out for)					
. Use standard precautions.	Applies gloves and glasses as required.				
. Follow Australian Resuscitation	Stop bleeding by applying sustained direct pressure on the wound				
Council guidelines for bleeding	using a dressing followed by a roller bandage.				
control.	Check capillary refill after applying bandage to ensure circulation is stil				
	there.				
. Follow Australian Resuscitation	 there. Do not remove the embedded object. 				
. Follow Australian Resuscitation Council guidelines for bleeding					
	Do not remove the embedded object.				
Council guidelines for bleeding	 Do not remove the embedded object. Place padding around or above and below the object and apply 				

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Ob	oservation:	Apply first aid procedures for evenomation			
	Instructions to learner: You are to demonstrate effective treatment of a casualty with a snake bite to their leg, 10cm above their ankle.				
	Instructions to assessor: Participants must demonstrate an effective pressure immobilisation bandage.				
	Task/observation	Observation Criteria (Key components/factors to look out for)			
1.	Use standard precautions.	Applies gloves and glasses as required.			
2.	Follow Australian Resuscitat Council guidelines for envenomation – Pressure immobilisation technique.	 Apply a broad pressure bandage over the bite site. Commencing at the extremity (the toes) of the bitten limb, bandage towards the torso covering as much of the limb as possible and as high up the limb as possible. Check capillary refill after applying bandage to ensure circulation is still there. Check that the bandage is tight enough that you cannot fit a finger between the bandages and the casualties skin. Splint the limb with the other leg to restrict movement. Keep the casualty at rest, talk and reassure. 			

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Observation:	Apply first aid procedures for distributive shock (fainting)				
Instructions to learner:					
You are to demonstrate effective treatment of a casualty suffering distributive shock (fainting).					
Instructions to assessor:					
Participants must demonstrate a	n effective treatment of a casualty who has fainted (and is conscious).				
Task/observation	Observation Criteria (Key components/factors to look out for)				
1. Use standard precautions.	Applies gloves and glasses as required.				
2. Follow Australian Resuscitat	ion • Place casualty in supine position.				
Council guidelines for shock.	• Call 000				
	• Treat the cause of the shock.				
	Maintain body temperature.				
	Reassure and constantly re-check casualties condition for change.				

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Observation:	Apply first aid procedures for respiratory distress (asthma)				
Instructions to learner:					
You are to demonstrate effective treatment of a casualty suffering an asthma attack.					
Instructions to assessor:					
In pairs, have a participant act as the c	asualty who is too distraught to administer their own medication and have				
asked for assistance, the casualty is ha	aving a severe asthma attack.				
Task/observation	Observation Criteria (Key components/factors to look out for)				
1. Use standard precautions.	Applies gloves.				
 Reassures casualty throughout treatment. 	Provides reassurance and informs casualty of treatment throughout				
3. Follow Australian Resuscitation	Talk and reassure casualty.				
Council guidelines for first aid for	Contact 000				
asthma.	Ask if the casualty has any allergies.				
	• Provide 1 puff of a reliever followed by the casualty taking 4 breaths.				
	Repeat the above step a total of 4 times.				
	• Wait 4 minutes, if there is little to no improvement in the casualties				
	condition, repeat the whole procedure.				
	Document medication using T.R.E.N.D				

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Ob	servation:	Apply first aid procedures for choking & airway obstruction				
-	Instructions to learner: You are to demonstrate effective treatment of a casualty suffering the following:					
	 An adult who has a partial airway obstruction. A child who has a complete airway obstruction. 					
Ins	structions to assessor:					
ln j	pairs, have a participant act as	the adult casualty who has a partial obstruction who can still cough.				
Us	ing a manikin (either an infant o	or child) demonstrate the effective treatment of a total/complete airway obstruction.				
	Task/observation	Observation Criteria (Key components/factors to look out for)				
1.	Use standard precautions.	Applies gloves.				
2.	Reassures casualty throughout treatment.	Provides reassurance and informs casualty of treatment throughout				
3.	Follow Australian Resuscitation	Talk and reassure casualty.				
	Council guidelines for upper a	irway • Encourage coughing to expel foreign object.				
	obstructions. (Partial airway obstruction).	If not dislodged, contact 000.				
4.	Follow Australian Resuscitation	Contact 000				
	Council guidelines for upper a	irway • Talk and reassure casualty.				
	obstructions. (Complete airwa	• Perform up to 5 sharp back blows using heel of a hand in the middle of				
	obstruction).	the back between shoulder blades.				
		Check after each blow to see if foreign material has been dislodged.				
		Instruct participants that foreign material is still lodged in airway				
		and that casualty is still conscious.				
		• Perform up to 5 sharp chest thrusts using heel of a hand in the middle				
		of the chest at the compression point for cpr.				
		Check after each blow to see if foreign material has been dislodged.				
		Continue alternating between 5 back blows and 5 chest thrusts until				
		foreign material is dislodged or casualty goes unresponsive.				

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Observation:	Apply first aid procedures for an allergic reaction and anaphylaxis
Instructions to learner:	
You are to demonstrate effective tr	reatment of a casualty suffering from an:
 Allergic reaction. 	
Anaphylaxis reaction.	
Instructions to assessor:	
In pairs, have a participant act as t	he casualty who is presenting with a red rash on their arm after brushing up agains
an item that they are allergic to.	
	he casualty who is presenting with a red rash, hives on their chest and back,
swelling of the lips and tongue and	l is complaining of breathing difficulties.
Task/observation	Observation Criteria (Key components/factors to look out for)
1. Use standard precautions.	Applies gloves.
2. Reassures casualty throughou treatment.	• Provides reassurance and informs casualty of treatment throughout
3. Treat for allergic reaction.	Talk and reassure casualty.
•	
-	Wash the affected area with water.
	Wash the affected area with water.Monitor and if casualty's condition deteriorates follow anaphylaxis
	Monitor and if casualty's condition deteriorates follow anaphylaxis
	 Monitor and if casualty's condition deteriorates follow anaphylaxis treatment. Call 000.
	 Monitor and if casualty's condition deteriorates follow anaphylaxis treatment. Call 000.
4. Follow Australian Resuscitation	 Monitor and if casualty's condition deteriorates follow anaphylaxis treatment. Call 000. Lay flat, if breathing is difficult have them sit up (if able).
 Follow Australian Resuscitation Council guidelines for first aid 	 Monitor and if casualty's condition deteriorates follow anaphylaxis treatment. Call 000. Lay flat, if breathing is difficult have them sit up (if able). Prevent further exposure to trigger agent (wash area).
 Follow Australian Resuscitation Council guidelines for first aid 	 Monitor and if casualty's condition deteriorates follow anaphylaxis treatment. Call 000. Lay flat, if breathing is difficult have them sit up (if able). Prevent further exposure to trigger agent (wash area). Administer epipen – follow manufactures instructions.

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Observation:	Apply first aid procedures for fractures, sprains and strains and slings			
Instructions to learner: You are to demonstrate effective u	use of the following slings:			
 Arm sling. Collar & Cuff sling. Elevation sling. You are to demonstrate effective treatment of a casualty that is presenting with the following sprain: Sprained ankle after playing netball. You are to demonstrate effective treatment of a casualty that is presenting with the following fractures: A closed fracture in the middle of a forearm (Radius). A closed fracture in the middle of a thigh (Femur). A complicated fracture of an ankle (Tarsal). 				
	the casualty who is presenting with the above injuries. Each injury is to be dealt with Each participant MUST demonstrate all 7 items above as an individual.			
Task/observation	Observation Criteria			
	(Key components/factors to look out for)			
1. Use standard precautions.	Applies gloves.			
 Use standard precautions. Reassures casualty througho treatment. 	Applies gloves.			
2. Reassures casualty througho	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. 			
2. Reassures casualty througho treatment.	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. Place sling over shoulder on the opposite side to the elbow. Pick up the bottom of the sling and place it over the shoulder on the same side as the injured arm. Tie the sling to the side of the neck firmly so arm stays at a 90 degree angle. Twist end of sling on injured elbow and tuck into sling. Sling should provide easy access to see fingers and check circulation. 			
2. Reassures casualty througho treatment.	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. Place sling over shoulder on the opposite side to the elbow. Pick up the bottom of the sling and place it over the shoulder on the same side as the injured arm. Tie the sling to the side of the neck firmly so arm stays at a 90 degree angle. Twist end of sling on injured elbow and tuck into sling. Sling should provide easy access to see fingers and check circulation. Sling should be under arm and wrist to provide support. 			
 Reassures casualty throughor treatment. Demonstrate an arm sling Demonstrate a collar and cuff 	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. Place sling over shoulder on the opposite side to the elbow. Pick up the bottom of the sling and place it over the shoulder on the same side as the injured arm. Tie the sling to the side of the neck firmly so arm stays at a 90 degree angle. Twist end of sling on injured elbow and tuck into sling. Sling should provide easy access to see fingers and check circulation. Sling should be under arm and wrist to provide support. Sling. Create a collar and cuff sling. Prevent as much movement as possible. 			
 Reassures casualty throughor treatment. Demonstrate an arm sling Demonstrate a collar and cuff Name of document: Assessor Guide (1 Data) 	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. Place sling over shoulder on the opposite side to the elbow. Pick up the bottom of the sling and place it over the shoulder on the same side as the injured arm. Tie the sling to the side of the neck firmly so arm stays at a 90 degree angle. Twist end of sling on injured elbow and tuck into sling. Sling should provide easy access to see fingers and check circulation. Sling should be under arm and wrist to provide support. sling. Create a collar and cuff sling. Prevent as much movement as possible. 			
 Reassures casualty througho treatment. Demonstrate an arm sling Demonstrate a collar and cuff Name of document: Assessor Guide (1 Da Version Number: 1.0 Reviewed: 8th August 2017 	 Applies gloves. Provides reassurance and informs casualty of treatment throughout. Place sling under arm, point of sling to injured elbow. Place sling over shoulder on the opposite side to the elbow. Pick up the bottom of the sling and place it over the shoulder on the same side as the injured arm. Tie the sling to the side of the neck firmly so arm stays at a 90 degree angle. Twist end of sling on injured elbow and tuck into sling. Sling should provide easy access to see fingers and check circulation. Sling should be under arm and wrist to provide support. Sling. Create a collar and cuff sling. Prevent as much movement as possible. 			

	Place the hand on the injured side in the cuff of the sling.				
	• Tie the sling at the side of the neck firmly so the arm doesn't fall.				
5. Demonstrate an elevation slin	e. First aid responder should be holding the sling with the long side head				
	to toe in one hand and the other hand holding the corner of the sling				
	• Place sling over the arm, point of sling to injured elbow.				
	• Tuck the sling under the arm from the finger to the elbow to create a				
	pocket.				
	Gather the sling at the base of the elbow and twist it to create support				
	under the elbow, tight enough so the arm is not able to fall into sling				
	• Tie the sling at the back.				
6. Demonstrate correct treatmen	t for a • Follow R.I.C.E.R. action plan				
sprained ankle, according to	◦ REST				
Department of Health WA.	∘ ICE				
	COMPRESSION BANDAGE				
	• ELEVATION				
	• REFERRAL				
7. Demonstrate correct treatmen	t for a • Follow DRSABCD.				
closed fracture in the middle o	f a • Control any bleeding.				
forearm (Radius), according to	Talk and reassure.				
Department of Health WA.	Immobilise fracture by:				
	 Supporting the limb using a splint. 				
	 Place padding on splint 				
	 Fill natural contours with padding 				
	\circ Using roller bandages, secure splint to limb (do not cover				
	fracture), above and below as a minimum.				
	 Place arm in appropriate sling. 				
	 Check circulation of extremities. 				
8. Demonstrate correct treatmen	t for a • Follow DRSABCD.				
closed fracture in the middle o	f a • Control any bleeding.				
thigh (Femur), according to	Talk and reassure.				
Department of Health WA.	Immobilise fracture by:				
	 Supporting the limb using a splint. 				
	 Use other leg or a commercial splint 				
	 Fill natural contours with padding 				
	\circ Using triangular bandages, secure splint to limb (do not cover				
	fracture), above and below as a minimum.				
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Γ		Check circulation of extremities.		
9.	Demonstrate correct treatment for a	Follow DRSABCD.		
	complicated fracture of an ankle	Control any bleeding.		
	(Tarsal).	Talk and reassure.		
		Immobilise fracture by:		
		 Supporting the limb using a splint / pillow. 		
		 Fill natural contours with padding 		
		\circ Using triangular bandages, secure splint to limb (do not cover		
		fracture), above and below as a minimum.		
		Check circulation of extremities.		

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Observation:	ervation: Simex #1				
Instructions to learner:	nstructions to learner:				
You are to demonstrate safe, effec	You are to demonstrate safe, effective and efficient treatment of a casualty/casualties.				
Instructions to assessor:					
The participant must respond to at	least 2 simulated scenarios (1/2) contextualised to the participants				
workplace/community setting that i	ncludes:				
10. Conducting a visual and verba	assessment of the casualty.				
11. Treatment of at least 1 type of	injury or illness per casualty.				
12. Demonstrate safe manual hand	dling techniques.				
13. Post-incident debrief and evalu	lation.				
14. Provide a verbal handover to y	ou the assessor as if you were an emergency service.				
Task/observation	Observation Criteria (Key components/factors to look out for)				
1. Use standard precautions.	Applies gloves, glasses and face mask as appropriate.				
2. Triage casualties (if appropriate	e) • Prioritise casualties in order of those that need immediate first aid.				
3. Conducting a visual and verbal Visual assessment:					
assessment of the casualty	Careful observation of casualty and note what you see Is the person				
	conscious or have they just lost consciousness, note the time				
	Check the casualty for a medical alert bracelet or necklace				
	Check if the casualty has any medication in the their hands or in the				
	vicinity.				
	Verbal assessment:				
	• Ask questions and note the answers, Ask the casualty their name,				
	year and if they know where they are and introduce yourself				
	• Ask if they are experiencing any pain on a scale from 1 to 10, with 10				
	being the worst the patient ever felt.				
	Ask the casualty do they know what happened.				
	Ask casualty if they are experiencing any numbness or tingling in the				
	hands, arms or legs or anywhere in the body.				
	Ask casualty if they are experiencing nausea.				
	Ask the patient if he or she is taking any medication or has allergies to				
food or medication.					
4. Treatment of at least 1 type of	injury • Type of injuries are subject to the assessors discretion depending on				
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	or illness per casualty.	the participants needs.Treat casualties according to prescribed treatment methods.		
5.	Demonstrate safe manual handling techniques.	• Ensure safe manual handling in the event of an unconscious casualty or if assisting in moving a conscious casualty.		
6.	Post-incident debrief and evaluation.	Participate in debriefing to address individual needs and identify potential psychological impacts of critical incidents on first aiders.		
7.	Provide a verbal handover to you the assessor as if you were an emergency service.	 Provide the assessor with the following information: Provides casualties name and age. The casualty's main complaint. The casualty's signs and symptoms. What injuries/illnesses have been found? What treatment was provided? 		

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Observation:	Simex #2				
Instructions to learner:	Instructions to learner:				
You are to demonstrate safe, effect	You are to demonstrate safe, effective and efficient treatment of a casualty.				
Instructions to assessor:					
The participant must respond to at	east 2 simulated scenarios (2/2) contextualised to the participants				
workplace/community setting that ir	ncludes:				
15. Conducting a visual and verbal	assessment of the casualty.				
16. Treatment of at least 1 type of i	njury or illness per casualty.				
17. Demonstrate safe manual hanc	lling techniques.				
18. Post-incident debrief and evalu	ation.				
19. Provide a verbal handover to ye	ou the assessor as if you were an emergency service.				
Task/observation	Observation Criteria (Key components/factors to look out for)				
1. Use standard precautions.	Applies gloves, glasses and face mask as appropriate.				
2. Triage casualties (if appropriate	 Prioritise casualties in order of those that need immediate first aid. 				
3. Conducting a visual and verbal Visual assessment:					
assessment of the casualty	Careful observation of casualty and note what you see Is the person				
	conscious or have they just lost consciousness, note the time				
	Check the casualty for a medical alert bracelet or necklace				
	• Check if the casualty has any medication in the their hands or in the				
	vicinity.				
	Verbal assessment:				
	• Ask questions and note the answers, Ask the casualty their name,				
	year and if they know where they are and introduce yourself				
	• Ask if they are experiencing any pain on a scale from 1 to 10, with 10				
	being the worst the patient ever felt.				
	• Ask the casualty do they know what happened.				
	Ask casualty if they are experiencing any numbness or tingling in the				
	hands, arms or legs or anywhere in the body.				
	 Ask casualty if they are experiencing nausea. 				
	 Ask the patient if he or she is taking any medication or has allergies to 				
	food or medication.				
4. Treatment of at least 1 type of i	njury • Type of injuries are subject to the assessors discretion depending on				
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	or illness per casualty.	the participants needs.Treat casualties according to prescribed treatment methods.		
5.	Demonstrate safe manual handling techniques.	• Ensure safe manual handling in the event of an unconscious casualty or if assisting in moving a conscious casualty.		
6.	Post-incident debrief and evaluation.	Participate in debriefing to address individual needs and identify potential psychological impacts of critical incidents on first aiders.		
7.	Provide a verbal handover to you the assessor as if you were an emergency service.	 Provide the assessor with the following information: Provides casualties name and age. The casualty's main complaint. The casualty's signs and symptoms. What injuries/illnesses have been found? What treatment was provided? 		

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