



**Qualification Specification** 

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### Key qualification information

Qualification number:610/3257/8Operational start date:17/01/2024Guided Learning Hours (GLH):7Total Qualification Time (TQT):10

Number of components: Assessment methods:

1 mandatory components

- Theory assessment/multiple choice question paper: 1 x 20 question paper (minimum score 14)
- Practical assessments and skills tests:
   2 x practical assessments and 1 x skills test completed throughout the course

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## **Qualsafe Awards**

Not only is Qualsafe Awards (QA) one of the largest Awarding Organisations (AO) in the UK, we are also the biggest AO for First Aid and Prehospital Care qualifications, making us an extremely trusted and recognisable name that employers look for when selecting a training provider.

We are recognised and regulated by the Office of Qualifications and Examinations Regulation (Ofqual), Qualifications Wales and the Northern Ireland Council for the Curriculum, Examinations and Assessment (CCEA). This means we can offer Centres an extensive range of qualification suites including First Aid; Prehospital Care; Health and Safety; Mental Health First Aid; Licensing; Food Safety; Fire Safety; Education and Training; Manual Handling; and Health and Social Care.

With a specialist team of subject matter experts on hand to support our Centres, including A&E Consultants, doctors, paramedics, nurses, physiotherapists and specialists in other sectors such as mental health, you can be confident that you are truly working with the industry experts.

## **Qualification overview**

This qualification forms part of the QA Prehospital Care suite of qualifications. The qualification and learning outcomes are based on the recommendations of:

- Resuscitation Council UK
- Joint Royal Colleges Ambulance Liaison Committee (JRCALC) Clinical Practice Guidelines
- Skills for Health and Health Education England Core Skills Training Framework (CSTF)
- Faculty of Pre-Hospital Care (FPHC) Pre-Hospital Emergency Medicine (PHEM) Framework

This qualification is for healthcare professionals, emergency care providers, ambulance care support workers or associate practitioners who respond to out of hospital emergencies or life-threatening incidents. It contains learning content which explicitly addresses the CSTF Level 1, 2, 3 Adult Immediate Life Support outcomes.

This qualification specification provides information for Centres about the delivery of the Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF) and includes the component information, assessment methods and quality assurance arrangements.

### **Objective**

The objective of the qualification is to optimise Learners' performance when dealing with a deteriorating patient, resuscitation attempts and related events. The qualification will develop their existing knowledge and skills in patient assessment, devising a working diagnosis and recognising deterioration and management. In addition, develop their existing skills and teamworking to resuscitate patients in medical or traumatic cardiac arrest in the out of hospital/prehospital environment.

### Intended audience

This qualification is for people who have a specific responsibility at work, or in voluntary and community activities, to provide out of hospital emergency care to patients requiring emergency and urgent care. This qualification is relevant to those working as emergency care providers, ambulance support workers or associate ambulance practitioners, registered healthcare professionals and those in specialist roles within the emergency services and military.

### Structure

This qualification comprises 1 mandatory component with a Total Qualification Time (TQT) of 10 hours. Full details of these are in Appendix 1.



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Learners must complete all assessments successfully within the registration period to achieve the qualification. The maximum period to achieve this qualification, including any resits is 4 weeks.

TQT is the total number of hours required for a Learner to achieve this qualification. It has 2 elements:

- Guided Learning Hours (GLH) is the time a Learner is being taught and assessed under the immediate guidance of a Trainer/Assessor, which for this qualification is 7 GLH (minimum), and
- The number of hours a Learner will reasonably be likely to spend in preparation and study, including
  assessment, as directed by, but not under the immediate guidance or supervision of a Trainer, which for this
  qualification is 3 hours

### Other components

No other components can be combined to count towards the Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF).

### Relationship with other related qualifications

The Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF) may be transferred to other similar qualifications under Recognition of Prior Learning (RPL) and count towards achievement of such qualifications providing it is achieved within its registration period.

### Recognition of Prior Learning

Due to the nature of this qualification, Recognition of Prior Learning (RPL) cannot be claimed against any part of this qualification.

### **Entry requirements**

Learners must be at least 18 years of age at the start of the training.

This qualification is designed for people who have been trained in clinical skills (at/or above level E on the PHEM framework) and factual and theoretical knowledge in broad contexts within a field of work. They have a scope of practice and are guided by standard operating procedures, protocols, or systems of work but can make decisions relating to patient care.

Learners **must** have successfully completed a Qualsafe Level 4 Certificate in First Response Emergency Care (RQF) or higher qualification or clinical grade, e.g. registered Nurse, Paramedic or Allied Healthcare Professional working in the out of hospital care/prehospital environment.

### Requalification requirements

This qualification is valid for a period of 1 year. The Learner needs to retake the qualification before the certificate expiry date to remain qualified. Requalification requires successful completion of the original qualification. This qualification contains learning content which explicitly addresses the CSTF Level 1, 2, 3 Adult Immediate Life Support outcomes.

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## Qualification approval requirements

Qualsafe Awards requires the Centre:

- To have appropriate policies, systems and procedures in place
- To appoint suitable individuals from their personnel team to train, assess and quality assure their QA qualifications
- To have suitable and adequate venues, equipment and learning resources
- To have approved course materials including scheme of work, lesson plans and suitable assessment tools to make sure Learners are assessed against the required knowledge, skills and understanding, as detailed in the learning outcomes and assessment criteria shown in *Appendix 1* (this approval will be given in writing by QA)

To secure and maintain approval from QA, Centres need a minimum staffing requirement for each qualification suite they deliver, which for this qualification is:

One Trainer/Assessor	Responsible for the delivery and assessment of qualifications
One Internal Quality Assurer	Responsible for quality assuring the delivery, assessment and awarding of this qualification

QA requires the Centre staff to read and understand QA's key policies and procedures, and to abide by their contents.

#### Trainer/Assessor

Those delivering or assessing this qualification must have:

- Occupational knowledge and competency in out of hospital adult immediate life support as shown in Appendix 2 and
- · An acceptable education and training or instructor qualification as shown in Appendix 3 and
- Hold or be working towards an acceptable assessing qualification as shown in Appendix 3

Trainer/Assessors are expected to keep an up-to-date CPD portfolio showing they are current in teaching and assessment practice and their subject specialism, e.g. prehospital care and resuscitation.

### **Internal Quality Assurers**

Internal Quality Assurers (IQAs) of this qualification must have knowledge and competency in out of hospital adult immediate life support as well as knowledge and competency in internal quality assurance practice. An acceptable portfolio must show:

- 1. Occupational knowledge and competence in the subject matter as shown in Appendix 2 and
- 2. The IQA either holds or is working towards a formal (regulated) internal quality assurance qualification as shown in *Appendix 4*

IQAs are expected to keep an up-to-date CPD portfolio showing they are current in quality assurance practice and their subject specialism, e.g. prehospital care and resuscitation.

They must also:

- Have knowledge of the requirements of the qualification they are quality assuring at the time the assessment is taking place
- · Have knowledge and understanding of the IQA role
- · Attend training delivery and observe assessments being carried out
- · Carry out other related internal quality assurance

Full details of the Centre's requirements for internal quality assurance are in the QA Centre Assessment Standards Scrutiny (CASS) Guidance.

Note: IQAs cannot quality assure a course for which they were the Trainer and/or Assessor.

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### Venue and equipment

Quality training involves using premises conducive to learning and it is a Centre's responsibility to make sure all venues used for training and assessment purposes are suitable and adequate – whether these are hired or inhouse training rooms. They must also comply with all current legislation.

In addition, it is important there is a wide range of learning resources to support delivery.

As a minimum, Centres should make sure their venues, equipment and other resources include:

Resource/area:	Requirements:		
	The training venue must meet acceptable health and safety standards and be conducive to learning, with sufficient:		
Training venue	size, floor surfaces, seating, writing surfaces, toilet facilities, ventilation, lighting, heating, access, exits, cleanliness, absence of distracting noise.		
Audio visual (AV) equipment and training aids	Sufficient AV equipment and training aids to facilitate learning using varying teaching methods.		
earning materials	Provide Learners with clear and accurate reference books/handouts covering the topics included in the qualification.		
	ILS Manikin		
	Full bodied manikin capable of accepting oropharyngeal (OPA), nasopharyngeal (NPA) and supraglott airways and demonstrating manual manoeuvres. Ideally 1 manikin to every 3 Learners (minimum 1 manikin to every 6 Learners).		
	Or		
	CPR adult manikins, minimum of 1 adult manikin to every 3 Learners <b>and</b> airway management trainer head (must be suitable to demonstrate airway manoeuvres and accept oropharyngeal, nasopharyngeand supraglottic airways). 1 manikin to every 3 Learners.		
	Patient monitoring and AED/Defibrillator (or manual defibrillator) trainer		
	Patient monitor and defibrillator/AED (Simulator or AED trainer) capable of monitoring SpO <sub>2</sub> , 3-lead (and ideally 12-lead) ECG, NIBP and ETCO <sub>2</sub> and AED or manual defibrillator training function. Includir sufficient consumables and accessories, minimum 1 to every 3 Learners.		
	Or		
	AED/defibrillator trainer with sufficient consumables and accessories		
	And		
	SpO <sub>2</sub> monitor, 3-lead (and ideally 12-lead) ECG monitor, automatic or manual sphygmomanometer (and stethoscopes), ETCO <sub>2</sub> (ideally waveform) monitor		
Patient monitoring and life	Life support equipment		
support equipment	Adult sizes of OPA (sizes 2 to 4)		
	Adult sizes of NPA (sizes 6 to 7)		
	Adult sizes of i-Gel® (sizes 3 to 5)		
	Catheter mount and HME filter		
	Adult size bag-valve-mask (various size masks)		
	Mac blade size 4 and laryngoscope		
	<ul> <li>Mac blade size 3 and laryngoscope</li> <li>Adult non-rebreather mask</li> </ul>		
	Adult non-representer mask     Automatic and manual suction devices		
	Oxygen (O <sub>2</sub> ) cylinder with the relevant equipment for use		
	Multi flow rate masks (Ventura type or similar) and nasal cannulae		
	Thermometer and consumables		
	Blood glucose monitor and consumables		
	Peak Flow meter and consumables		
	Other equipment		
	• 50:50 N <sub>2</sub> O/O <sub>2</sub> cylinder, demand valve, hose and probe, mouthpieces, face mask and bacterial/viral filte		
	Note: Sufficient patient monitoring, life support and other equipment should be available, a minimum to every 3 Learners.		



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Full body, limb immobilisation and extrication devices	Various types of prehospital immobilisation devices:  Pelvic splint Set of vacuum splints Set of box splints Traction splint (optional) Multi-adjust adult cervical collar (optional) Various types of current prehospital spinal immobilisation devices: Extrication long board and accessories Orthopaedic stretcher and accessories Vacuum mattress stretcher (optional) Kendrick extrication device (optional) Note: Sufficient full body, limb immobilisation and extrication devices should be available, a minimum 1 to every 3 Learners.
Trauma management consumables	Various trauma management consumables:  • Manufactured non-occlusive and occlusive chest dressings  • Manufactured tourniquets and haemostatic agents  • Emergency trauma dressings: various sizes and types  • Ambulance/first aid dressings and triangular bandages  • Thermal protection various sizes and types, including cellular and foil blankets  • Burns management, e.g., facial burns dressing, water and cling film  Note: Sufficient trauma management consumables should be available, a minimum 1 to every 3 Learners.

Note: Learners should sit at least one metre apart, to prevent collusion during multiple choice question assessments.

### **Course/Centre administration**

### **Pre-registering courses**

Centres approved to deliver this qualification must pre-register courses on the QA Customer Portal at least 5 working days in advance of the course start date. This will allow QA to make the necessary external quality assurance arrangements, which includes unannounced visits. Centres must adhere to this pre-course registration requirement and should be aware that any identified non-compliance in this respect will lead to the imposition of sanctions in line with the content of the QA Sanctions Policy.

Centres not providing 5 working days' notice when pre-registering courses may not be able to deliver these as planned.

It should be noted that Centres cannot register courses after the event and must purchase sufficient qualifications from QA in advance to facilitate pre-course registration. Further guidance can be found on the QA Customer Portal.

### Registering Learners

Register Learners with Qualsafe Awards in accordance with the guidance in the QA Centre Handbook.

### Certification

After a Learner has completed an assessment, component or qualification, whether they have passed or not, Centres must enter the details of the results on the QA Customer Portal at: www.qualsafeawards.org

Centres will be given login details and guidance on using the QA Customer Portal when they are approved to deliver a QA qualification.

The Learner receives a certificate on achieving this qualification.

The certificate date is the date the Learner successfully completes all assessments. This qualification is valid for 1 year. The Learner needs to retake the qualification and the assessments before the end of the 1 year to remain qualified.

QA has developed a verification tool that means the validity of every certificate can be verified online. This verification tool can be found on the QA website: www.qualsafe.org/certificate-verification.



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## Delivery and support

#### Learner to Trainer ratio

To maintain the quality of training and assessment, make sure the class ratio is no more than 6 Learners to 1 Trainer. The assessment space should allow Learners to sit at least 1 metre apart to prevent collusion during the theory/multiple choice question paper assessment. Never allow more Learners on the course than you can cater for during the assessment.

### Delivery plan

Centres must create their own delivery plan. The delivery plan should:

- Include a course timetable, clearly showing the required subjects and criteria/learning outcomes are covered and how the minimum 7 GLH are being met
- Be carefully designed to meet the objective of the qualification and the needs of Learners, making sure Learners are adequately prepared for the assessments
- · Be emailed to: info@qualsafeawards.org

### Learning materials

Centres must provide each Learner with suitable learning materials to support their progress through the qualification. Learning materials must cover the learning outcomes and assessment criteria. Centre resources must be supported by a suitable body of medical opinion, which must be evidenced to QA.

Centres must ensure each Learner has access to current Resuscitation Council UK guidelines and JRCALC Clinical Practice Guidelines (Pocketbook or App).

### **Ongoing support**

QA Centres should provide appropriate levels of support to Learners throughout the training. The purpose of the support is to:

- Assess knowledge, skills and practical competence in relation to learning outcomes and the detailed assessment criteria of the unit within the qualification, see Appendix 1
- · Give Learners feedback on their progress and how they might be able to improve

### **Assessment**

### **Overview**

The Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF) skills and knowledge should be taught and assessed in accordance with Resuscitation Council UK guidelines and JRCALC Clinical Practice Guidelines or their own organisation's standard operating procedures (SOPs).

#### **Methods**

Qualsafe Awards has devised externally set, internally marked assessment tools to make sure that Learners are assessed against the required knowledge, skills and understanding, as detailed in the learning outcomes and assessment criteria shown in *Appendix 1*. Centres should download all assessment papers from the QA Customer Portal in advance of the course.

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#### There are:

- Practical assessments/skills test observed by the Trainer throughout the course, with the results of each
  assessment criteria recorded on the practical assessment paperwork, see QA Guide to Assessing Qualsafe
  Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF). There are 2 practical assessments and 1
  skills test for this qualification:
  - Out of Hospital Adult Immediate Life Support practical assessment
  - Out of Hospital Patient Assessment and Management practical assessment
  - Out of Hospital Airway and Ventilatory Support skills test
- Theory assessment/multiple choice question paper there is 1 paper for each Learner and Learners should answer all the questions under 'examination' conditions, see QA Multiple Choice Question Paper Guidelines.
   The maximum time allowed is 30 minutes. The minimum mark is 14 out of 20 in order to be considered for an overall 'Pass'.

Note: Centres should download all assessment papers from the QA Customer Portal in advance of the course.

There are 2 possible grades available of Pass or Fail. All mandatory areas of assessment must individually meet or exceed the required pass criteria/mark for the Learner to achieve this qualification.

#### Access to assessment

Qualsafe Awards is committed to equality when designing the assessments for this qualification. Centres can make sure they do not unfairly exclude the assessment needs of a particular Learner by following the QA *Access* to Assessment Policy to determine whether it is appropriate to:

- · Make a reasonable adjustment or
- Request special consideration for the Learner

When a reasonable adjustment needs to be made, Centres should check the QA Access to Assessment Policy to see if the adjustment required needs prior approval or if the Reasonable Adjustment Form can be submitted retrospectively. If the adjustment requires prior approval, then Centres must complete a Reasonable Adjustment Form and send it to QA with any relevant supporting evidence at least five working days in advance of course delivery for review and approval. Centres should retain a copy of this form for their own records.

Learners may be eligible for special consideration if their performance through the assessment process has been affected by some temporary illness, injury or adverse set of circumstances. A Special Consideration Request Form should be completed and sent to QA along with any supporting evidence (where available) for consideration and approval. Centres should retain a copy of this form for their own records.

Note: If you have any suggestions for improvements, please let us know.

Learners should be informed about the Centre's and QA's appeals and complaints procedures and how they can access these. Information about these procedures can be found in the QA *Training Commitment* which should be presented to Learners during their course.

### Specific equality issues relevant to this qualification

It is important no Learner is turned away from a training course due to disabilities or impairments. However, to assess competence and gain certification, the Learner will need to demonstrate certain practical skills. For instance, for this qualification the Learner must be assessed performing practical tasks such as Immediate Life Support as per QA *Guide to Assessing Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF)*. To pass the assessment, the Learner must demonstrate the required practical skills without assistance from a third party (unless authorised by QA following a reasonable adjustment request).

### Informal record of achievement

Due to the nature of this qualification, informal record of achievement letters cannot be issued against any part of this qualification.

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## **Quality assurance**

### Centre internal quality assurance

The Centre is required to sample a reasonable amount of assessments as part of the quality assurance of the qualification. This standardisation of assessment across Learners and Trainers is to make sure there is fairness and consistency in assessment practices. Centres are required to adhere to QA's internal quality assurance requirements. Further details can be found in the QA Centre Assessment Standards Scrutiny (CASS) Guidance.

Centres must retain all Learner documents and records for a period of 3 years and make sure these are available for review by Qualsafe Awards or our representatives, e.g. External Quality Assurers (EQAs), on request.

### Qualsafe Awards external quality assurance

QA operates a system of ongoing monitoring, support and feedback for approved Centres.

QA employs a risk-based model to decide the frequency of external quality assurance activity.

Further details of the QA external quality assurance programme are available in the QA Centre Assessment Standards Scrutiny (CASS) Guidance.

### **Further information**

#### Contact us

If you have any queries or comments, we would be happy to help you, contact us:

Email: info@qualsafeawards.org

Tel: 0330 660 0899

### Useful addresses and websites

- · Qualsafe Awards, City View, 3 Wapping Road, Bradford, BD3 0ED: www.qualsafe.org
- Office of Qualifications and Examinations Regulation (Ofqual): <a href="www.gov.uk/government/organisations/ofqual">www.gov.uk/government/organisations/ofqual</a>
- Council for the Curriculum Examinations and Assessment (CCEA): https://ccea.org.uk/regulation
- · Scottish Qualifications Authority (SQA) Accreditation: http://accreditation.sga.org.uk
- · Qualifications Wales: www.qualificationswales.org
- Skills for Health: www.skillsforhealth.org.uk
- Health & Safety Executive (HSE): www.hse.gov.uk
- Resuscitation Council (UK): www.resus.org.uk

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## Appendix 1 – Qualification component

The Qualsafe Level 4 Award in Out of Hospital Adult Immediate Life Support (RQF) has 1 mandatory component that Learners are required to complete in order to achieve the qualification.

Title:	Out of Hospital Adult Immediate Life Support		
GLH:	7		
Level:	4		
Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content	
Be able to safely use and maintain patient monitoring and life support equipment	1.1 Identify patient monitoring and life support equipment	Patient monitoring equipment should include:  Patient monitor and defibrillator  Blood glucose meter and accessories  Peak flow meter and consumables  Thermometer and accessories  Life support equipment should include:  Airway adjuncts (oropharyngeal / nasopharyngeal / i-gels® adjuncts)  Suction equipment and accessories (manual and portable unit)  Adult bag-valve-mask (B-V-M) with various size masks, catheter mount and filter  Adult non-breather mask, nasal cannula, and pulse oximetry monitor  Oxygen and Nitrous Oxide (Entonox® or Nitronox®) and accessories  Environmental protection equipment (fleece or cellular blankets)  Life support equipment may include:  Mechanical CPR device  Mechanical ventilator	
	<ul> <li>1.2 Demonstrate safe and effective use of patient monitoring and life support equipment</li> <li>1.3 Demonstrate operational checks on patient monitoring and life support equipment</li> </ul>	Should include patient monitoring and life support equipment.  Should include:  Equipment is clean, within service date and undamaged  Check batteries and use self-test function (if applicable)  All accessories are present and in date for operational use  All single-use items are in undamaged packaging and in date	
	1.4 Identify maintenance and fault reporting procedures for patient monitoring and life support equipment	Should include operational readiness checks, calibration testing and reporting faulty equipment to operational team leaders and/or equipment department.	







	<ul> <li>1.5 Demonstrate decontamination of working areas, response kit, and equipment</li> <li>1.6 Demonstrate disposal procedures for waste and sharps</li> </ul>	Should be in line with own Organisation's policies and procedures for decontamination of:  Surfaces Response bags Reusable equipment Stretchers and accessories  Should be in line with own Organisation's policies and procedures: Safe disposal of sharps Disposal of clinical and non-clinical waste Disposal of damaged consumables and packaging May include:
		<ul> <li>Process for handling soiled linen and consumables</li> <li>Correct disposal of soiled linen and consumables</li> </ul>
2. Be able to implement methods and procedures to assess and manage an incident	Assess factors that impact on scene and patient safety	Should include:  Location Situational factors Environmental factors Resources availability
	2.2 Perform a dynamic scene risk assessment	<ul> <li>Should include:</li> <li>Identify hazards</li> <li>Decide who is and who might be harmed and how</li> <li>Evaluate the risks and decide on precautions</li> <li>Verbalise findings and implement precautions</li> <li>Recognise new or evolving hazards and/or risks and review assessment</li> <li>Assessing mechanism of incident; reading the scene, establishing presenting complaint or calculating energy transfer, assessing point of impact or origin of cause, and evaluating nature of insult</li> </ul>
	2.3 Demonstrate initial management of a scene	<ul> <li>Should include:</li> <li>Selecting and using appropriate personal protective equipment</li> <li>Appropriate management and mitigation of risks and hazards present to ensure those at scene are as safe as possible whilst assessment, treatment and casualty extrication can take place</li> <li>Calling for additional and/or specialist resources, giving necessary detail to justify an appropriate response</li> </ul>
	Identify the emergency services and specialist resources available and how to call for them to attend an incident	<ul> <li>Should include:</li> <li>Requesting procedures for critical care and urgent and emergency care resources, e.g., APs/HEMS/CCPs, specialist ambulance resources, e.g., HART/SORT, bariatric support vehicles or operational/tactical commanders</li> <li>Requesting procedures for local emergency services, e.g., police, fire and rescue and search and rescue units</li> </ul>



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	Carry out post-incident procedures following a resuscitation attempt	<ul> <li>Should include:</li> <li>Safety and welfare check for all involved</li> <li>Everyone shares their perspectives on a clinical situation</li> <li>Agree on what is important to discuss, target key topics</li> <li>Analyse team communication, decision making, situational awareness and efficiency</li> <li>Identify learning points to repeat good performance and avoid poor performance</li> <li>Highlight key actions to see continual improvement in team performance and patient safety</li> </ul>
Be able to assess, devise     a working diagnosis,     determine severity of a     patient's condition, and	3.1 Perform a structured assessment on a patient	Should include identification and focused assessment of life threatening and less severe/obvious signs and symptoms relating to injuries or illness. (Patient Assessment Triangle) Learners should use a structured systematic format of patient assessment that identifies problems in priority order, ascertains history relevant to the event and detects any underlying injuries/signs and symptoms or medical conditions.
manage presenting illness or injuries	3.2 Assess the severity of a patient's condition based on assessment findings	Should include interpreting signs and symptoms relating to injuries or illness and prioritising <c>ABCDE problems. Severity should be based on vital signs, physical assessment, and relevant patient/event history.</c>
	3.3 Assess vital signs using an assessment tool to identify acute illness to escalate care	Should include using National Early Warning Score (NEWS2) as an assessment tool to identify acute illness and help influence urgency of treatment and further clinical decisions. Recognise a deteriorating patient and escalate care to access additional clinical support.
	3.4 Manage a patient's signs and symptoms in order of priority	Should include management in line with current practice and Learners own scope of practice and organisations policies and procedures. Management should address life-threatening and less severe/obvious underlying injuries/illness/signs and symptoms or medical conditions. Carries out safety checks prior to administering any medications.
4. Be able to assess, manage and maintain a patient's	4.1 Apply a stepwise approach to airway management	Should include airway management techniques within Learner's scope of practice including applying simple methods to maintain and/or clear airway, monitoring and/or applying airway manoeuvres and inserting an airway adjunct.
airway and monitor patency	4.2 Demonstrate dynamic airway assessment	Should include visual inspection, listen for breath sounds including obstructions or inadequate volume/effort and feel for rise and fall of chest/movement.
	4.3 Demonstrate how to clear an airway	Should include postural drainage and use of a suction unit or manual suction.
	4.4 Select and insert an airway adjunct	Should include selecting, sizing, and inserting adjunct in line with current practice and Learner's own scope of practice and Organisation's policies and procedures. Airway adjuncts:  Oropharyngeal airway  Nasopharyngeal airway  i-gel® supraglottic airway
	4.5 Demonstrate face mask and supraglottic airway manual ventilation	Should include 'E-C' and 'E-V' grip; two-person bag-valve-mask ventilation techniques and inserting an oropharyngeal or nasopharyngeal airways.  Should include inserting an i-gel® supraglottic airway and ventilating with a catheter mount and filter in situ. We strongly suggest capnography forms part of the airway circuit for monitoring purposes.







	4.6 Identify difficult airway factors to influence calling for additional clinical support	Should include:  Factors of excessive airway obstruction: patients with increased weight or neck circumference, snoring, obstructive sleep apnoea, increased age, lack of teeth, difficult or obstructed vision of airway anatomy and tumours.  Factors of technical difficulty: limited mandibular protrusion, cervical spine pathology, presence of a beard, short thyromental distance, lack of teeth, thick neck, or previous radiation therapy.  May include:  Other factors (operator specific): such as small hands, poor technique, inadequate devices, or difficult access to patients.  Categories: obstetrics, morbidly obese, full stomach, fixed cervical spine and prehospital patients.  Source: Core Topics in Airway Management by Ian Calder and Adrian Pearce.
	4.7 Distinguish when choking is mild or severe	Signs of mild airway obstruction should include:  Response to 'Are you choking?' casualty answers yes  Casualty is able to speak, cough and breathe  Signs of severe airway obstruction should include:  Response to 'Are you choking?' casualty is unable to answer, may respond by nodding  Casualty is unable to breathe, wheezy breathing, attempts to cough silently and casualty may become unresponsive
	4.8 Administer treatment to a patient who is choking	Should include adherence to the current Resuscitation Council UK guidelines for the management of a foreign body airway obstruction.
5. Be able to carry out immediate life support and post return of spontaneous circulation care	5.1 Identify potential causes of cardiac arrest	Should include:  Coronary heart disease  Cardiomyopathy  Myocardial infarction  Congenital heart disease  Heart valve disease  Acute myocarditis  Electrocution  Drug overdose  Severe haemorrhage  Hypoxia
	5.2 Recognise signs of a cardiac arrest	Should include any unresponsive person with (one or more):  • Absent or abnormal breathing  • Slow, laboured breathing (agonal breathing)  • A short period of seizure-like movements







	5.3 Demonstrate immediate life support on an adult manikin	<ul> <li>Should include:</li> <li>High quality chest compressions</li> <li>Safe use of a defibrillator (Manual or AED)</li> <li>Use of adjuncts (suction and/or airways)</li> <li>Safe administration of emergency oxygen</li> <li>Effective concurrent activity and teamwork</li> <li>Shows awareness of individual roles and responsibilities</li> <li>Identification of causation and reversible causes (Considers 4 H's and 4 T's)</li> <li>Calls for additional clinical support</li> <li>Applies local resuscitation policies and procedures</li> <li>Follows Resuscitation Council UK guidelines</li> </ul>
	5.4 Assess patient post resuscitation and provide appropriate care	Should include:  Reassesses vital signs  SpO <sub>2</sub> and ETCO <sub>2</sub> monitoring  Acquires 12 lead ECG  Addresses ABC problems  Continually monitors vital signs  Reduces heat loss with thermal protection  Provides information and reassurance (if applicable)  Evaluates assessment finding and interventions  Applies local resuscitation policies and procedures
	5.5 Perform a patient handover	Should include a handover in an Age Time of occurrence Mechanism of incident Illness or injuries presenting Signs and symptoms Treatment (ATMIST) or Situation Background Assessment Recommendations (SBAR) format delivering succinct information detailing interventions during the resuscitation attempt.
6 Understand resuscitation attempt modifications, decision making processes and procedures	6.1 Identify special considerations in cardiac arrest	Should include:  Drowning Pregnancy Tracheostomy and laryngectomy May include:  Asthma Opiate overdose Rhythm-affecting drugs Bariatric patients





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	6.2 State circumstances when resuscitation should not be attempted	Should be in line with Learner's scope of practice and own Organisation's policies and procedures.  • DNACPR  • RESPECT
	6.3 State circumstances when resuscitation attempt should be ceased	Should be in line with Learner's scope of practice and own Organisation's policies and procedures.
	6.4 Identify end of life care decisions in relation to resuscitation attempts	Should be in line with Learner's scope of practice and own Organisation's policies and procedures.
7 Know how to recognise and manage patients presenting with signs and symptoms indicating major illness	7.1 Identify recognition features of serious medical conditions	Should include:  Asthma  Anaphylaxis  Chronic obstructive pulmonary disease  Pulmonary embolism  Sepsis  Pneumothorax/haemothorax/tension pneumothorax  Unstable angina  Myocardial infarction (NSTEMI and STEMI)  May include:  Acidosis  Lung contusion  Drug overdose  Hypothermia  Electrocution
	7.2 Identify the management of major illnesses	Should include major illnesses from the indicative content listed in 7.1.

Qualification Specification



## **Appendix 2**

# Occupational knowledge and competence in out of hospital adult immediate life support

All Trainers, Assessors and IQAs must have occupational knowledge and competence in out of hospital adult immediate life support. Acceptable evidence includes:

- Current registration as a Doctor with the General Medical Council (GMC) and have suitable out of hospital
  adult immediate life support experience or
- Current registration as a Nurse with the Nursing and Midwifery Council (NMC) and have suitable out of hospital adult immediate life support experience or
- · Current registration as a Paramedic with the Health and Care Professions Council (HCPC) or
- · Qualsafe Level 5 Diploma in First Response Emergency and Urgent Care (RQF) or
- · Level 4 Diploma for Associate Ambulance Practitioners (QCF or RQF) or
- · Pearson BTEC Level 3 in Ambulance Aid (previously IHCD/Edexcel) or
- Qualsafe Level 4 Certificate in First Response Emergency Care (QCF or RQF)

#### and

 Evidence of contemporary practice in the out of hospital (prehospital) emergency and urgent care environment\*

### \*Contemporary practice in the out of hospital (prehospital) emergency and urgent care environment

Must be at least 2 years post-qualification and working in an environment whereby a clinician may be required to attend incidents to provide emergency and urgent care and carry out activities such as scene safety and manage patients presenting with varying levels of illness and/or injury in an out of hospital environment.

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# Appendix 3 Acceptable training/assessing qualifications

This list is not exhaustive but provides a guide to acceptable training and/or assessing qualifications. Trainers who also assess Learner competence must also hold an acceptable assessor qualification, as identified in the table below:

Current Qualifications	Train	Assess
Level 3 Award in Education and Training	<b>√</b>	<b>√</b>
Level 4 Certificate in Education and Training	<b>√</b>	<b>√</b>
Level 5 Diploma in Education and Training	<b>√</b>	J
Cert Ed/PGCE/B Ed/M Ed	1	J
SVQ 3 Learning and Development SCQF Level 8	1	<b>√</b>
SVQ 4 Learning and Development SCQF Level 9	1	J
TQFE (Teaching Qualification for Further Education)	√	1
Planning and Delivering Learning Sessions to Groups SCQF Level 6 (SQA Unit)	J	1
L&D Unit 6 Manage Learning and Development in Groups SCQF Level 8 (SQA Accredited)	√	J
L&D Unit 7 Facilitate Individual Learning and Development in Groups SCQF Level 8 (SQA Accredited)	J	J
L&D Unit 8 Engage and Support Learners in the Learning and Development Process SCQF Level 8 (SQA Accredited)	1	J
Carry Out the Assessment Process SCQF Level 7 (SQA Unit)		1
Level 3 Award in Assessing Competence in Workplace Environment		1
Level 3 Award in Assessing Vocationally Related Achievement		J
Level 3 Award in Understanding the Principles and Practice of Assessment		J
Level 3 Certificate in Assessing Vocational Achievement		J
L&D Unit 9DI – Assess workplace competences using direct and indirect methods SCQF Level 8 (SQA Accredited) – replacing Units A1 and D32/33		√
Other Acceptable Qualifications		
CTLLS/DTLLS	1	1
PTLLS with unit 'Principles and Practice of Assessment' (12 credits)	1	J
Further and Adult Education Teacher's Certificate	1	√
IHCD Instructional Methods	1	1
IHCD Instructor Certificate	J	1
English National Board 998	J	1
Paramedic/Nursing Mentorship qualifications	<b>√</b>	1
S/NVQ Level 3 in Training and Development	<b>√</b>	1
S/NVQ Level 4 in Training and Development	<b>√</b>	1
PDA Developing Teaching Practice in Scotland's Colleges SCQF Level 9 (SQA Qualification)	<b>√</b>	
PDA Teaching Practice in Scotland's Colleges SCQF Level 9 (SQA Qualification)	<b>√</b>	
PTLLS (6 credits)	<b>√</b>	
Training Group A22, B22, C21, C23, C24	<b>√</b>	
Learning and Teaching - Assessment and Quality Standards SCQF Level 9 (SQA Unit)		J
A1 (D32/33) – Assess candidates using a range of methods		J
Conduct the Assessment Process SCQF Level 7 (SQA Unit)		J
A2 (D32) – Assess candidates' performance through observation		1



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# Appendix 4 Qualifications suitable for internal quality assurance

Internal Quality Assurers (IQA) must hold an acceptable quality assurance qualification:

PDA in Internal Verification of Workplace Assessment at SCQF level 8 (SQA Qualification)

Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice (QCF or RQF)

Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice (QCF or RQF)

V1 or D34

SQA Accredited Learning and Development Unit 11 Internally Monitor and Maintain the Quality of Workplace Assessment

Note: If relevant qualifications or experience do not appear on this list, please provide us with details as these alternatives could be acceptable. Other equivalent qualifications must be submitted to Qualsafe Awards with detailed evidence of course/qualification content, learning outcomes and assessment criteria.



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