

Qualification Specification

QNUK Level 3 Award for the First Person on Scene (International) (RQF)

603/6688/6

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1. Introduction

Qualifications Network Limited (QNUK) is an Awarding Organisation recognised and regulated by the Office of Qualifications and Examinations (Ofqual) in England, the Council for Curriculum, Examinations and Assessment (CCEA) in Northern Ireland and Qualifications Wales.

This specification outlines key information required by users of the qualification to ensure they can make an informed decision about the suitability of the qualification they are taking or proposing to take for the purposes that they intend to use it.

2. Contact Us

Please get in touch if you need any advice or guidance with this qualification.

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3. Version Number

Centres should make sure they are using the most up to date document by checking the footer which will confirm the current version number.

Document owner	Qualifications Manager
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4. Qualification Objective

This qualification develops the knowledge and skills required by those working in security services or high risk environments who are required to hold an advanced First Aid qualification.

The qualification ensures learners are able to provide suitable assistance for a range of medical conditions and trauma related injuries including developing an awareness of ballistic and blast injuries.

The qualification supports a role in the workplace and will enable learners to progress to further learning in this sector.

5. Sector Support and Industry Recognition

This qualification has been developed to meet the competency requirements of the Faculty of Pre-hospital Care – The Royal College of Surgeons Edinburgh at Level C. This meets the requirements for the Security Industry Authority (SIA) for Close Protection Officers.

6. Geographical Coverage of this Qualification

This qualification is available in England and Internationally.

7. Benefit for Learners

This qualification supports those who require more advanced First Aid skills. While the qualification has been developed for Close Protection Operatives working in the UK and abroad, the knowledge and skills it develops are also ideal for Cabin Crew, Industrial First Aiders and those working in remote areas.

8. Progression

Learners could progress to the:

- QNUK Level 3 Award for First Responders (RQF)

9. Recognition of Prior Learning

QNUK are unable to accept requests for recognition of prior learning (RPL) for this qualification.

10. Complementary Courses

Learners may also undertake one of the following:

- QNUK Level 3 Award in Administration of Emergency Medical Gases (RQF)
- QNUK Level 3 Award in Administration of Emergency Oxygen (RQF)

11. Qualification Information

Qualification Number (QN)	603/6688/6
Learning Aim	60366886
Total Qualification Time (TQT)	30
Guided Learning Hours (GLH)	28
Credit value	3
Level	3
Validity	3 years
Assessment	Invigilated MCQ paper and observed practical tasks
Achieving the qualification	Learners must achieve the single mandatory unit

12. Qualification Structure

Unit No.	Unit Title	Level	Credit	GLH
Mandatory units				
T/618/4964	Managing Injuries and Illness for the International First Person on Scene	3	3	28

The learning outcomes for the qualification may be found in Appendix 1. The Assessment Guidance details the assessment criteria which are used to determine if a learner has met the requirements of the learning outcomes. Further depth of coverage is also provided in the Assessment Guidance.

13. Learner Entry Requirements

Learners must have sufficient command of the English language to understand and undertake the recommended assessment methods for this qualification.

Learners should be aged 18 years or over to take this qualification.

Learners should be physically capable of undertaking practical assessments as they would in a real-life environment.

There are no other pre-requisites for this qualification; however, learners must be able to work at level 2 and above.

14. Delivery

This qualification is typically delivered in a face-to-face setting over a 4-day period. Learners should complete the qualification within 10 weeks.

14.1. Venue Requirements

The training venue should be suitable for learning and meet all relevant Health and Safety requirements. Suitable space should be available to undertake practical scenario work.

14.2. Equipment Requirements

Each centre offering this qualification should have access to the following equipment:

- Adult CPR Manikins (1 per 4 learners)
- CPR infant manikins (1 per 4 learners)

- AED trainers (1 per 4 learners)
- AED associated equipment- training pads, razors, towels etc
- Manikin wipes
- Airway management trainer (must be able to insert correctly OP and NP airways) one per 4 learners
- Airway management equipment - selection of OP airways and NP airways
- Selection of trauma dressings and bandages
- Examples of haemostatic agents
- Selection of manufactured tourniquets
- Adrenaline auto injector pens
- Range of burn dressings
- Scenario based training equipment including wounds, crash helmets etc

Equipment should be safe and in good working order. A record of appropriate testing and maintenance should be retained.

The complexity of some equipment should not disadvantage learners in the level of attainment that they are able to demonstrate in the assessment.

14.3. Blended Learning

Blended learning is acceptable for theory elements of this qualification provided suitable controls are in place to ensure learners complete all elements.

14.4. Trainer to Learner Ratio

The maximum Trainer to learner ratio for this qualification is 1:8

14.5. Recommended Resources

Learners may benefit from the following resources:

- First Person on Scene (Second Edition)
- First Responder Care Essentials
- Voluntary Aids Society First Aid Manual (Revised 10th Edition)
- The Royal College of Surgeons of Edinburgh Faculty of Pre-hospital Care Position Statement on the Application of Tourniquets (July 2017)
- The Royal College of Surgeons of Edinburgh Faculty of Pre-hospital Care Consensus Statement on Burns (February 2019)

15. Centre Personnel Requirements

This qualification is delivery by suitably qualified trainers.

To deliver this qualification staff should:

- Have current registration as a Doctor with the General Medical Council (GMC); or
- Have current registration as a Nurse with the Nursing and Midwifery Council (NMC); or
- Have current registration as a Paramedic with the Health and Care Professions Council (HCPC); or
- An additional medical related qualification which includes:
 - IHCD Ambulance Technician
 - Combat Medical Technician Class 1 (Army)

- Lead Medical Assistant (Navy)
- Medical Assistant (RAF)
- Emergency Care Assistant (NHS)
- Level 4 First Person on Scene (IHCD/Pearson)
- Prehospital Care courses at Level E of the PHEM Framework

Suitable Teaching/Assessing Qualifications

Those involved in the delivery of this qualification should have suitable teaching and assessing qualifications.

The recommended minimum teaching and assessing qualification is the Level 3 Award in Education and Training (QCF/RQF).

Where trainers hold a teaching only qualification, such as a 6 credit PTLLS, they should ensure they have undertaken suitable assessor CPD.

Internal Quality Assurance

Centres should ensure that delivery staff are verified in accordance with their documented risk rating.

Internal quality assurance should be undertaken in accordance with our centre guidance.

Internal quality assurers should have suitable subject knowledge as outlined in this document

Internal quality assurers should hold one of the following:

- SQA Accredited Learning and Development Unit 11 Internally Monitor and Maintain the Quality of Workplace Assessment; or
- Regulated qualifications based on the Learning and Development NOS 11 Internally Monitor and Maintain the Quality of Assessment; or
- Level 4 Award in Internal Quality Assurance of Assessment Process and Practice (QCF/RQF); or
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Process and Practice (QCF/RQF); or
- V1 or D34; or
- SQA Internally Verify the Assessment Process; or
- QNUK 7-hour assessor/IQA CPD workshop or similar

Please note whilst centre personnel may be approved for both roles, those assigned the role of Trainer/Internal Verifier are not permitted to operate in both these roles for any learner.

16. Assessment Requirements

Learners are assessed for this qualification through:

16.1. Multiple-Choice Question Paper

The MCQ paper will be taken under examination conditions, i.e. learners will sit a minimum of 1.25 metres apart, will not confer during the examination and no electronic devices (such as mobile phones) or books, including dictionaries, will be permitted.

Language of assessment	English
Duration	90 minutes
Pass mark	70% (42/60)
Grading	Pass/Fail

Example MCQs are included at Appendix 2.

16.2. Practical Observation

There are several practical observations. Assessors can use holistic assessment when assessing scenarios.

Language of assessment	English
Duration	As required
Pass mark	100%
Grading	Pass / Refer

Centres can develop their own assessment materials and strategies; however, these must be sent to the QNUK EQA department for verification. A fee of £350+VAT is chargeable for this verification.

17. Moderation

The level of external moderation required for this qualification will be risk based and in line with the Centre Assessment Standards Scrutiny Strategy applicable to this qualification.

There may be situations within the centre devised assessment methodology that require observations, in these situations QNUK EQA Department will also require to conduct verification visits to ensure the accuracy and consistency of assessment decisions.

QNUK EQA Department will advise the centre of the required levels of moderation/verification to anticipate for this qualification upon centre approval for delivery.

18. Resits

Learners may resit the examination using a different assessment paper. A second failure of the assessment paper will determine that the learner should undertake the full course again. For practical assessments where assessment criteria have not been met, learners may need to have their training topped up. Additional scenarios can be developed to allow for assessment criteria to be met.

Where learners do not meet assessment criteria on a second attempt, they should receive a not competent mark and will need to resit the course again.

19. Reasonable Adjustments

Learners are required to complete the assessments in a manner appropriate to the purpose of the qualification.

The prescribed assessment methods for this qualification should not unfairly disadvantage learners who would otherwise be able to demonstrate competence in line with the purpose of the qualification. Learners should contact their centre to discuss reasonable adjustment if they feel the prescribed assessment methods would disadvantage them.

20. Results

The centre is required to submit learner results within 10 working days of assessment to Qualifications Network UK for moderation. We will issue verified results and appropriate certification to the approved centre within 7 working days of receiving the results. Centres will forward results and/or certificates to learners, who can expect to receive them within 20 working days of taking the assessment. If learners have not received results and/or certificates within 25 working days, they should contact the centre in the first instance.

Appendix 1: Units

Unit 1 Managing Injuries and Illness for the International First Person on Scene (T/618/4964)

Unit Summary

This unit develops knowledge related to the roles and responsibilities of the First Person on scene operating in the UK and Internationally. The unit also develops skills related to basic life support and managing an incident.

1. The learner will: Understand the role and responsibilities of the first person on scene		
Assessment Guidance The learner must:		Types of Evidence
1.1	Outline the roles and responsibilities of a first person on scene , including: awareness of safety for self and others, working within own scope of practice.	MCQ
1.2	Use available First Aid equipment , including: standard First Aid equipment and other equipment related to the work environment.	Practical
1.3	Outline the principles of effectively communicating with others at an incident , including: colleagues, the casualty(s), local medical assistance.	MCQ
1.4	Provide an effective handover to a care provider using a recognised system. Systems may include but not be limited to ATMIST or 9 Liner	Practical
1.5	Use correct personal protective equipment while managing an incident , to include PPE required to reduce the risk of cross contamination.	Practical
1.6	Explain what is meant by ‘consent’ in relation to supporting a casualty , including the definition of consent and the legal and moral importance of gaining consent.	MCQ
1.7	Outline simple mental health conditions a first person on scene should be aware of , including: anxiety, depression, stress and PTSD.	MCQ
1.8	Identify the links in the chain of infection	MCQ
1.9	Give examples of infections a first person on scene should be aware of in their area of operation , including a range of diseases that individuals may be at risk of when treating casualties in the UK and internationally such as Coronavirus, HIV, Hepatitis B and C, Yellow Fever and Malaria.	MCQ
1.10	Minimise the risk of cross infection , including the use of appropriate personal protective equipment, good hand hygiene, maintaining appropriate distance.	Practical

2. The learner will: Understand the principles of scene management		
Assessment Guidance The learner must:		Types of Evidence
2.1	Explain the principles of scene safety including awareness of potential risks and controls in relation to: mental state of the casualty; traffic; environmental factors; sharps; infections; falling objects; utilities; animals; terrorism; weapons.	MCQ
2.2	Explain how a first person on scene can undertake a dynamic risk assessment of an incident , including being able to differentiate between manageable and unmanageable risks; understands the purpose of a dynamic risk assessment; can identify appropriate ways to manage the level of risk.	MCQ
2.3	Differentiate the priority level of casualties using a recognised triage model. As per the National Ambulance Resilience Triage Sieve.	MCQ
2.4	Manage a scene safely , including awareness of hazards, ensuring the safety of people involved and making the area as safe as appropriate.	Practical
2.5	Outline what is meant by the term ‘mechanism of injury’ (MOI) , including defining the term and giving examples.	MCQ

3. The learner will: Be able to undertake basic casualty assessment and monitoring		
Assessment Guidance The learner must:		Types of Evidence
3.1	Perform a respiratory assessment for breathing rate, depth and quality , including checking and recording a casualty's breathing rate, depth and quality using manual techniques	Practical
3.2	Assess the presence, rate and rhythm of circulation. The learner must know where to monitor circulation in a casualty including the radial, brachial and carotid arteries; can monitor and record circulation in terms of rate and rhythm. Is aware of the need to check for presence of circulation beyond the point of an injury such as a fracture.	Practical
3.3	Assess a casualty's capillary refill time , including performing a capillary refill check on a casualty	Practical
3.4	Undertake a casualty history , the SAMPLE criteria.	Practical

4. The learner will: Be able to assess and manage a casualty who is unresponsive		
Assessment Guidance The learner must:		Types of Evidence
4.1	Perform a primary survey , showing awareness of the elements and sequence with examples as appropriate, including: <ul style="list-style-type: none"> primary survey is danger, Response, Catastrophic haemorrhage, Airway (including awareness of C-spine) Breathing, Circulation, Disability, Exposure response to include the use of AVPU airway to include performing the head tilt, chin lift in line with current Resuscitation Council (UK) guidelines breathing check to include checking an unconscious casualty's breathing for up to 10 seconds and differentiating between normal breathing and agonal gasps. 	Practical
4.2	List the causes of unconsciousness , including fainting, imbalance of temperature, shock, head injury, stroke, heart attack, asphyxia, poison, epilepsy, diabetes	MCQ
4.3	Perform cardio-pulmonary resuscitation on an adult manikin , in accordance with current guidelines; perform basic life support resuscitation to current Resuscitation Council (UK) guidelines	Practical
4.4	Explain the safety considerations when using an automated external defibrillator , including ensuring correct pad placement; suitable casualty preparation; safe use of oxygen; removal of metal objects; etc	MCQ
4.5	Use an automated external defibrillator safely , in accordance with current guidelines, including correct pad placement; application to appropriate casualty; following instructions of AED and troubleshoot where appropriate.	Practical
4.6	Perform a head to toe survey , showing awareness of the appropriate time, after a primary survey on a casualty who is breathing normally; checking underneath casualty, awareness of blood soaking into clothing; awareness of dark clothing masking blood; awareness of the signs of blood in poor lighting and where blood may soak away.	Practical
4.7	Place an unconscious casualty in the recovery position , in accordance with current Resuscitation Council (UK) guidelines.	Practical

5. The learner will: Be able to support a casualty with suitable airway management techniques		
Assessment Guidance The learner must:		Types of Evidence
5.1	Explain how to recognise an obstructed airway , including mild or severe airway obstruction, in line with current Resuscitation Council (UK) guidelines.	MCQ
5.2	Manage an adult casualty who is choking , performing the correct protocol for a mild or severe airway obstruction in line with current Resuscitation Council (UK) guidelines.	Practical
5.3	Place the casualty's head in neutral alignment , using appropriate PPE; explaining actions; gaining consent; holding head firmly; if head not in neutral, asking casualty to move head; if casualty unconscious, manually aligning head; stopping immediately if pain or resistance; continue to hold until instructed by a Clinician.	Practical
5.4	Open the casualty's airway using the jaw thrust procedure	Practical
5.5	Demonstrate the 'action for vomit'. Learners will be able to demonstrate action for vomit in line with current accepted guidance.	Practical
5.6	Size and insert a simple airway adjunct , correctly sizing and inserting OP and NP airways and use with appropriate indications.	Practical

6. The learner will: Be able to perform basic life support procedures on a paediatric casualty		
Assessment Guidance The learner must:		Types of Evidence
6.1	Perform cardio-pulmonary resuscitation on a paediatric casualty , in line with the paediatric protocols for basic life support (non-Healthcare professional) as per current Resuscitation Council (UK) guidelines.	Practical
6.2	Manage a choking paediatric casualty , performing the correct protocol for a mild or full obstruction to the airway for a child or infant.	Practical
6.3	Place an unconscious paediatric casualty into the recovery position , on the floor for a child and in the arms for an infant.	Practical

7. The learner will: Be able to recognise and manage a casualty with a minor injury		
Assessment Guidance The learner must:		Types of Evidence
7.1	Identify the characteristics of different types of wounds , including puncture wound, contusion, gunshot, abrasion, incision, laceration, degloving injury.	MCQ
7.2	Identify the characteristics of different types of bleeding , including arterial, venous and capillary bleeding	MCQ
7.3	Explain how to estimate the amount of blood loss based on the types of wounds , including type of wound, type of bleed, duration of bleed.	MCQ
7.4	Manage a casualty who is bleeding , including assessing the injury in relation to the severity of bleeding and any embedded objects; supporting a casualty to apply direct pressure initially; covering/dressing a wound with a suitable dressing; able to dress a wound to the hand, foot, leg, head, arm, torso, abdomen.	Practical
7.5	Outline the management of a casualty with an eye injury , in line with current First Aid procedures, including: blunt trauma, foreign object, chemical splash, embedded object.	MCQ
7.6	Explain how to recognise and treat bites and stings	MCQ
7.7	Identify the factors that affect the severity of a burn , including the size, cause, age of casualty, location and depth of burn.	MCQ
7.8	Outline the recognition and management of different burns , in line with current best practice for the treatment of burns, including chemical, ice, dry, electrical, radiation and scalds. Treatment will also include acid burns.	MCQ

8. The learner will: Be able to manage a casualty who has a catastrophic bleed		
Assessment Guidance The learner must:		Types of Evidence
8.1	Define the term “catastrophic bleeding”	MCQ
8.2	Explain how to recognise catastrophic bleeding, including how to recognise using MOI; possible full or partial amputation of a limb; likely arterial bleed; signs of hypovolaemic shock.	MCQ
8.3	Manage a casualty with a catastrophic bleed, including use of packing, haemostatic agents, direct pressure; manage a bleed to limb, with and without full amputation; bleed to the head, neck or torso.	Practical
8.4	Use haemostatic agents, to manufacturer’s instructions	Practical
8.5	Use a manufactured tourniquet, in line with the current position statement from the faculty of Pre-hospital Care Royal College of Surgeons.	Practical

9. The learner will: Understand how a blast or ballistic injury may affect a casualty		
Assessment Guidance The learner must:		Types of Evidence
9.1	Outline the features of a gunshot wounding in relation to: <ul style="list-style-type: none"> energy tissues factors missile features aerodynamics of the bullet 	MCQ
9.2	State the different types of injuries caused by different weapons including handguns, shot guns and assault rifles.	MCQ
9.3	Explain how to support a casualty with a gunshot wound including resuscitation, management of entry and exit wounds and general casualty management following CABCADE	MCQ
9.4	Identify the different classifications of blast injury including primary, secondary, tertiary and quaternary; typical mechanisms of injury related to each classification.	MCQ
9.5	Explain how to support a casualty who has experienced a blast injury, including resuscitation; dealing with external wounds caused by projectiles and fragments; amputations; mentally traumatised casualties.	MCQ

10. The learner will: Know how to recognise and manage a casualty who is in shock		
Assessment Guidance The learner must:		Types of Evidence
10.1	Explain the term ‘shock’, including that it is an acute medical condition associated with a fall in blood pressure.	MCQ
10.2	Identify the different types of shock, including hypovolaemic shock, cardiogenic shock, septic shock, neurogenic shock and anaphylactic shock	MCQ
10.3	Manage a casualty in hypovolaemic shock, including managing the cause of shock; summon assistance; keep the casualty warm; if possible, lie them down and raise their legs; monitor the casualty; provide supplementary oxygen if available.	Practical

11. The learner will: Know how to recognise and manage common trauma related injuries		
Assessment Guidance The learner must:		Types of Evidence
11.1	Outline the recognition and management of common trauma related head, neck and back injuries , including concussion; cerebral compression; skull fracture; spinal injury	MCQ
11.2	Explain the common mechanisms of injury for a spinal injury Learners will know common events associated with a spinal injury including: falls from height, sporting injuries, being struck by a vehicle; know the different types of force related to spinal injuries including hyperflexion, hyperextension, rotation, compression and direct force and can provide examples.	MCQ
11.3	Manage a casualty with a suspected spinal injury , including appropriate manual inline stabilisation, removal of crash helmet, application of a cervical neck collar; management should be appropriate to the work environment and equipment commonly available.	Practical
11.4	Explain how to recognise a suspected: <ul style="list-style-type: none"> • Flail chest • Penetrating chest injury 	MCQ
11.5	Perform a chest examination	Practical
11.6	Outline how to administer First Aid for a: <ul style="list-style-type: none"> • Flail chest • Penetrating chest injury 	MCQ
11.7	Outline how to recognise suspected: <ul style="list-style-type: none"> • Fractures and dislocations • Sprains and strains 	MCQ
11.8	Outline how to administer First Aid for: <ul style="list-style-type: none"> • Fractures and dislocations • Sprains and strains 	MCQ

12. The learner will: Know how to recognise and manage a casualty experiencing a common medical emergency		
Assessment Guidance The learner must:		Types of Evidence
12.1	Explain how a first responder can recognise an individual with a common medical emergency , including angina; asthma; diabetic emergency; drowning; heart attack; stroke	MCQ
12.2	Explain how a first responder can support an individual with a common medical emergency including angina; asthma; diabetic emergency; drowning; heart attack; stroke	MCQ
12.3	Perform a FAST test , in line with current practice from the Stroke Association	Practical
12.4	Explain what a TIA is , in relation to a trans ischaemic attack	MCQ

13. The learner will: Know how to recognise and manage a casualty experiencing an anaphylactic reaction		
Assessment Guidance The learner must:		Types of Evidence
13.1	Identify common triggers for anaphylaxis	MCQ
13.2	Explain how to recognise suspected anaphylaxis	MCQ
13.3	Explain how to manage a casualty suffering from anaphylaxis	MCQ
13.4	Administer an adrenaline autoinjector , in line with manufacturer's instructions	Practical

14. The learner will: Know how to recognise and manage a casualty affected by heat or cold		
Assessment Guidance The learner must:		Types of Evidence
14.1	Outline how to recognise and support a casualty suffering from the effects of the cold, including hypothermia and frost bite.	MCQ
14.2	Outline how to recognise and support a casualty suffering from the effects of heat including heat exhaustion and heat stroke.	MCQ

15. The learner will: Know how to provide First Aid to a casualty with sudden poisoning		
Assessment Guidance The learner must:		Types of Evidence
15.1	Identify the routes that poisons can take to enter the body	MCQ
15.2	Identify how to manage a casualty affected by sudden poisoning, including Carbon monoxide, Alcohol, Cyanide, Paracetamol and Opioid drugs	MCQ

Appendix 2: Specimen Assessment Material

1 A casualty has been found outside in cold wet weather; they have a suspected fracture to the upper leg. They sustained the injury a couple of hours ago. What other conditions should be suspected?

- A** Hyperthermia
- B** Hypothermia
- C** Heat exhaustion
- D** Frost bite

2 Which of the following are **COMMON** triggers for an anaphylactic reaction?

- A** Flour and water
- B** Nuts and seeds
- C** Milk and bread
- D** Pain killers and muscle relaxants

3 A burn caused by touching a hot engine should be cooled for a minimum of

- A** 5 minutes
- B** 15 minutes
- C** 20 minutes
- D** 30 minutes