Simulations

For your simulations, there will be approximately five victims of varying types in some order. All victims should be treated to the standards taught in the class. You will be expected to adapt principles learned to new situations, and to work with any other candidate in the class. Any actions that would seriously jeopardize a positive outcome for any given scenario will constitute a 'fail'. Two major weak areas will also constitute a 'fail.' Here is a copy of the marksheet that I use for evaluating simulations

Public Relations:		Minor Incident:	
Ţ	Recognition		☐ Recognition
	☐ Communication		□ Communication
	Assertiveness		☐ Assertiveness
	☐ Problem Solving		☐ Problem Solving
	(Pool Search)		☐ (Pool Search)
	(Police Called)		☐ (Police Called)
	Pool Coverage		☐ Pool Coverage
Drowning Non-Swimmer:		Drowning Non-Swimmer:	
	Recognition		☐ Recognition
I :	☐ Communication	.	☐ Communication
1	☐ Entry & Approach	.	☐ Entry & Approach
1	☐ Support		☐ Support
	☐ Backup		☐ Backup
I :	Assessment	■	☐ Assessment
1	☐ History	•	☐ History
1	☐ Education		☐ Education
1	Redirection	•	☐ Redirection
1	Pool Coverage		☐ Pool Coverage
<u> </u>	1 Foor Coverage		- Foor Coverage
Major Incident:		Major Incident:	
	☐ Recognition	•	☐ Recognition
	☐ Communication		Communication
	☐ Entry & Approach		Entry & Approach
	☐ Rollover & Support		☐ Rollover & Support
	Assessment		☐ Assessment
	☐ Critical Intervention		☐ Critical Intervention
	☐ Focal Point		Focal Point
	☐ Removal		□ Removal
	☐ Patient Position		Patient Position
	Assessment		☐ Assessment
	⊒ EMS		□ EMS
	Pool Clear		□ Pool Clear
	Critical Intervention		☐ Critical Intervention
	RBS		□ RBS
[Blanket		☐ Blanket
I	☐ Oxygen	•	☐ Oxygen
	☐ Oral Airway		☐ Oral Airway
	☐ Vitals	■	☐ Vitals
1	History		☐ History
	Head to Toe		☐ Head to Toe
I :	Treatment	■	☐ Treatment
	☐ Victim Care		☐ Victim Care
1	Personal Protection		☐ Personal Protection
		erall	2 Tersonar Frotection
	<u> </u>		
			☐ Scanning
			☐ Prevention
			☐ Communication
			☐ Teamwork
			☐ Knowledge
			Judgement
		I	☐ Confidence
			Professionalism

<u>Lifeguarding Situations</u>

☐ Follow-up and reporting

Respond to an emergency situation as a single lifeguard or as a member of a team; correctly assess and resolve situation.

Purpose: To apply lifeguarding principles and theoretical knowledge to a practical.

situation	cal knowledge to a practical ineguarding emergency
□ Recognition and immediate response to situation	☐ Appropriate role in handling of situation
☐ Effective communication	☐ Accurate communication with EMS at earliest possible moment
☐ Appropriate response and execution of procedures	☐ Continued supervision of other patrons
☐ Selection/demonstration of effective rescue techniques or support role	
☐ Proper use/application of equipment	☐ Accurate record keeping and appropriate follow-up
- Troper dest apparation of equipment	The state of the s
Lifeguarding Techniques	
3a. Scanning	3c. Communication
☐ Quick identification of potential accidents	☐ Immediate communication with other lifeguards when responding
☐ Quick recognition of patrons in need of assistance	to an incident or emergency
☐ Quick accurate analysis	☐ Accurate communication and response to other lifeguards and
☐ Ability to identify communication from other guard	patrons
, ,	☐ Clear concise and accurate communication with EMS in
3b. Positioning	emergency situations at earliest possible moment
☐ Positioning of guards with consideration for bather load,	
equipment location, lifeguard number and ability, danger spots, blind	3d. Recognition
spots, leisure equipment and patron activity	☐ Identification of patrons in need of assistance
☐ Effective rotation of guards while maintaining effective coverage	Quick accurate response
	 Prevention of preventable accidents
	☐ Identification of high and low priorities
<u>Procedures</u>	
4a. DNS Procedure	4c. Spinal Procedure
☐ Quick recognition	 Quick, accurate recognition
☐ Support of victim's head and shoulders above the surface within	☐ Rollover performed if necessary
approximately 15 seconds of recognition.	 Primary assessment
Approach such that the victim is unlikely or unable to grab	☐ Immobilization of the spine during rollover and throughout
rescuer	procedure
☐ Transportation of victim to shore, pool deck, or other place of	 Resuscitation as required using modified jaw thrust
safety maintaining shoulders at or above surface	Monitoring of vital signs
☐ Reassurance, assessment of the victim	☐ Entry into EMS
☐ Communication with other lifeguards	☐ Stabilization with spine board
	 Preparation for transport and removal
4b. Submerged Victim	☐ Ability to deal with complications such as vomiting or obstructed
☐ Quick entry and descent	airway
☐ Rapid ascent with secure hold on victim	☐ Safe removal where possible
 Protection of airway during ascent and thereafter 	
☐ Quickest route to focal point	4d. Missing Person
☐ ABC check in water	☐ Recognition of problem
☐ Effective rescue breathing if necessary	☐ Immediate implementation of missing person procedures
 Protection of head during removal 	☐ Description of person and other key information obtained
☐ Ability to deal with complications (vomiting, obstructed airway)	☐ Thorough search in area where person last seen or area of greatest
	danger if not seen
	☐ Immediate search of water area (if appropriate)
	☐ Proper use of necessary equipment
	☐ Reassurance, assistance, and/or direction to police
4e. Public Relations Incident	1
☐ Ability to deal positively with public relations situations	
Positive solutions or alternatives proposed to various public relations si	ituations

 5a. Assessment of an Injured Victim □ Assessment of environmental hazards □ Removal of/from dangers □ ABC check □ Check for major bleeding 	 Evaluate level of consciousness/response to stimuli Assess for spinal cord injury Systematic secondary survey (head to toe, vital signs, history) Life threatening conditions treated before minor conditions Entry into EMS
5b. Treatment of an Injured Victim	
Respiratory Emergencies	Hypothermia
□ ABC's	☐ ABC's
☐ Establishment of nature of complaint	Identification and assessment of signs and symptoms
☐ Reassurance for victim	☐ Warming of victim as soon as possible concentrating efforts on
☐ Proper positioning	core temperature
☐ Monitoring of vital signs and treatment for shock	☐ Entry into EMS
☐ Appropriate use of any equipment used	Heat Stroke and Exhaustion
Determination of history	□ ABC's
☐ Assistance with medication if appropriate and requested	Recognition of difference between heat stroke and exhaustion
Appropriate response to complications	Removal from source
□ Entry into EMS	☐ Encouragement of fluids for heat exhaustion victims
Circulatory Emergencies	☐ Cooling of victims
□ ABC's	☐ Entry into EMS for heat stroke victims
☐ Identification and control of bleeding by direct pressure to extent possible	Fractures, Sprains, and Dislocations ☐ Assessment of condition (check for sensation above and below)
Reassurance for victim and treatment for shock	☐ Assessment of condition (check for sensation above and below) ☐ Immobilization of injury site
☐ Placement in appropriate position	☐ Circulation check below injury; if possible, check pulse
☐ Monitoring of vital signs	☐ Effective immobilization prior to movement of victim
☐ Appropriate use of any equipment used	☐ Entry into EMS if necessary
☐ Determination of history	Burns
☐ Assistance with medication if appropriate and requested	☐ Determination of severity of burn
Appropriate response to complications	☐ Immediate immersion in cold water if present at time of injury and
☐ Entry into EMS	the injury is a localized burn
Head and Spine	☐ Flushing with water for wet chemical burn
□ ABC's	 Dusting for dry chemical burns
☐ Identification and treatment as spinal injury	 Covering with dry sterile dressing
☐ Evaluation of LOC	☐ Entry into EMS if necessary
☐ Monitoring of vital signs (rechecking)	Eye, Ear, Nose and Mouth
☐ Appropriate use of any equipment used	Assessment and determination of severity of injury
☐ No movement unless required	☐ Treatment in line with priorities
☐ Effective response to complications	☐ Entry into EMS if necessary
☐ Entry into EMS	Pressure-related Injuries
Medical Emergencies	□ ABC's
□ ABC's	Determination of history
☐ Identification and assessment of signs and symptoms	☐ Position of patient
Assistance with medication if appropriate and requested	☐ Stabilization, monitoring of vital signs, reassurance, treatment for
□ Appropriate use of any equipment used□ Contact with poison control if necessary	shock Appropriate use of any equipment used
☐ Entry into EMS if necessary	☐ Entry into EMS if necessary
a Entry line EWIS it necessary	Lifty into Livis it necessary
10. Entries and Removals	11. Specialized Rescues
☐ Appropriate, safe and efficient entries	☐ Ability to adapt to limitations imposed by unique facility design
☐ Maintenance of ABC's	_ 1.5, to adapt to infinations imposed by unique identity design
☐ Care for victim (especially for head)	
☐ Choice of removal appropriate for condition of victim	
☐ Recruitment of other lifeguards or bystanders if necessary	
☐ Communication	

☐ Safe lifting techniques for rescuer

The following list is a sample of examples of items that constitute a 'weak' or a 'fail' during a simulation. This list is not comprehensive or inflexible. It should help to give you an idea of how the NLS standards are usually interpreted.

Resuscitation

Rescue Breathing with Near-Drowning Patients

W patient left up to 30 seconds on back

F patient left more than 30 seconds on back

W patient left up to 30 seconds without an open airway

F patient left more than 30 seconds without an open airway

W no initial pulse check more than 20 seconds after initial ventilations

F no initial pulse check more than 60 seconds after initial ventilations

W vomiting patient not rolled into a drainage position

W no finger sweep after unconscious patient vomits

W ventilations consistently slower than 1 every 5 seconds for adult

F ventilations consistently slower than 1 every 10 seconds for adults

W single delay in ventilations over 10 seconds

F single delay in ventilations over 15 seconds

W/F seal is not consistently made over mouth

W landmarking is unecessarily high or low

note: a double breath will extend a single delay by 5 seconds

Obstructed Airway Unconscious Victim

W hook/look consistently missed in procedure

Obstructed Airway Conscious Victim

W abdominal thrusts done on partially obstructed airway (exceptions)

W not encouraged to cough

Lifeguarding Techniques

Scanning

W no recognition within 30 seconds of DNS or major

Positioning and Rotation

W does not reposition to cover first guard's area (if required)

F does not reposition to cover first guard's area and does not respond to situation

Communication Skills

W either consistently leaving your area without signaling, or leaving the deck without signaling

W either not calling for, or an excessive delay in activating EMS longer than 3 minutes or longer than 30 seconds for a pulseless victim)

W not signaling for back-up when going into deep water

Victim Recognition

W no recognition of potential accidents (ex. gutter grabber, diving in shallow water, etc.)

Lifeguarding Skills

Distressed Non-Swimmer

W more than 15 seconds from recognition to support victim's head and shoulders above the surface

W no follow up for secondary drowning

W patient is not adequately supported during carry

F if patients head submerges after support from guard

Submerged Victim

W ABC assessment not done in shallow water (or pool edge when shallow water not accessible)

W removal of victim to supine or prone position and then rolled into a drainage position within 30 seconds

F Airway not protected or supported during carry

F if victim not placed in drainage position within 30 seconds of removal

Use of Equipment

Spineboard

W sandbags or V-blocks not removed for victim roll

W poor lifting techniques causing unnecessary movement to patient on spineboard

W lifeguard uses improper lifting techniques (uses back for lifting)

Oxygen

W

W does not use oxygen when available

W dangerous handling

Lifeguard Situations

W does not attempt to provide appropriate assistance (ex. support in water if needed or removal if at edge)

pool not cleared when unsupervised for an extended period of time

Entries and Removals

W rough handling and excessive movement

Specialized Rescues

W/F unable to adapt to unique facility design (ex. deep water spinal procedure, deep water lumbar, tot pool spinal, land spinal, etc)

Spinal Injured Victim

Cervical

W modified jaw thrust not used to resuscitate unconscious patient

F improper immobilization (readjusts clamp after rollover)

F does not assess ABCs

Lumbar

W does not support/immobilize

W no stability below injury site and legs move (ex. Legs not supported during removal)

W secure strap across injury site

Missing Person

W does not communicate situation to other guard

F does not search water immediately

Public Relations

W negative attitude toward patron/public

W situation not resolved

First Aid Skills

Assessment

W does not assess fracture (use point tenderness)

W fails to quickly assess breathing for any cardiorespiratory emergency

W fails to do a systematic secondary assessment

W fails to assess hazards

Treatment

1. Respiratory Emergencies

W conscious short of breath patient not placed in position of respiratory comfort

2. Circulatory Emergencies

W no rapid body survey performed if needed (deadly bleeding check)

W does not control minor bleeding

F does not control deadly bleeding

3. Head and Spine

W does not monitor vital signs for indication of severity (re-checking)

4. Medical Emergency

W does not ask person with non-traumatic complaints about medical conditions or medications

5. Hypothermia

improper re-warming of patient (ex. putting patient into hot tub)

6. Heat Stroke and Exhaustion

W improper cooling of patient (ex. putting patient into pool)

W failure to cool patient suffering from severe heat stroke

7. Fractures, Sprains, and Dislocations

W does not immobilize injury above and below the injury site

8. Burns

W no understanding of the severity of burn (ex. fails to call EMS for third degree burns)

W no cooling