

FPOS – APPROVED TUTOR LIST

Instructional Qualifications

IHCD Tutor Award

IHCD Instructional Methods Course (PASS)

Level 3 Certificate for Teaching in the Life Learning Sector (CTLLS)

Certificate of Education

Basic Instructional Techniques (BITS), Ministry of Defence.

80 hours of certificated training/teaching from a recognised awarding organisation

ENB Nurse Tutor qualification (previously known as the 998)

** Tutors registered for tutor qualifications may teach on FPOS courses as part of their evidence gathering towards achievement*

Clinical Qualifications

FPOS BASIC, INTERMEDIATE & ENHANCED

IHCD Ambulance Technician qualification

IHCD Ambulance Paramedic qualification

State Registered Paramedic

Doctor (GMC registered)

Nurse (NMC registered with relevant clinical experience) such as A&E or Trauma Nurse

FPOS BASIC & INTERMEDIATE

IHCD Ambulance Technician qualification

IHCD Ambulance Paramedic qualification

State Registered Paramedic

Doctor (GMS registered)

Nurse (NMC registered with relevant clinical experience)

CMT1 (Ministry of Defence)

St John Ambulance, Tech 3

FPOS BASIC

IHCD Ambulance Technician qualification

IHCD Ambulance Paramedic qualification

State Registered Paramedic

Doctor (GMS registered)

Nurse (NMC registered with relevant clinical experience)

CMT1 (Ministry of Defence)

CMT 2 & 3 (Ministry of Defence)

FPOS Intermediate (to teach FPOS Basic)

5 day Emergency Medical Technician (EMT) course

British Red Cross First Aid with Enhanced Skills

St John Ambulance, Tech 1, 2 or 3

IHCD EXAMINATION PAPER CONTROL SHEET

Annex 4

Course	Exam date	Date downloaded	Files deleted	Witnessed by	No. copies	Papers destroyed	Witnessed By
Basic	11/2/11	10/2/11	10/2/11	A N Other	12	11/2/11	A N other

FPOS - GUIDANCE TO LEARNERS***BASIC AWARD*****Part 1 - Knowledge Assessment (time allowed - 30 minutes)**

This paper comprises 25 questions made up of 10 true/false and 15 multi-choice. The pass mark is 70% (Learners results can be calculated by multiplying the combined marks for true/false and multi-choice by 4).

- a) Write your learner number on your Answer sheet - NOT YOUR NAME.
- b) Read the questions carefully before answering them.
- c) Answer as many questions as you can; marks will not be deducted for any questions that you leave unanswered.
- d) One mark will be awarded for each correct answer.
- e) Questions 1 to 10 provide two options, a) or b); in some cases the options will be true or false, in others, two choices are given. Encircle your answer, on the sheet provided, against the corresponding number.
- f) Questions 11 to 25 offer four choices, only one of which is correct. Encircle your answer, on the sheet provided, against the corresponding number.
- g) If at any stage you change your mind, you must ensure that the final answer to a question you wish the examiner to mark is clearly indicated.
- h) Queries or questions regarding any of the questions on the Paper should be raised with the invigilator after the exam.
- i) If you need to leave the exam room at any stage during the exam, you should indicate to the invigilator; you will be accompanied at all times as is reasonable, and should minimise any disruption to other learners.
- j) You will be advised when there are 10 minutes left before the end of the exam. When you are asked to do so, you must stop writing.
- k) You must not leave the exam room until instructed to do so; **if you leave before being instructed to, you may be disqualified.**

Part 2 - Practical Assessments (time allowed - 45 minutes)

Three practical assessments will be set, each with associated oral questions:

- Scenario
- Basic Life Support
- Automated External Defibrillator

Each test is a PASS / FAIL - for a pass to be achieved, all the key areas of the assessment must be met.

FPOS - GUIDANCE TO LEARNERS***INTERMEDIATE QUALIFICATION*****Part 1 - Knowledge Assessment (time allowed - 30 minutes)**

This paper comprises 25 questions made up of 10 true/false and 15 multi-choice. The pass mark is 70% (Learners results can be calculated by multiplying the combined marks for true/false and multi-choice by 4).

- a) Write your learner number on your Answer sheet - NOT YOUR NAME.
- b) Read the questions carefully before answering them.
- c) Answer as many questions as you can; marks will not be deducted for any questions that you leave unanswered.
- d) One mark will be awarded for each correct answer.
- e) Questions 1 to 10 provide two options, a) or b); in some cases the options will be true or false, in others, two choices are given. Encircle your answer, on the sheet provided, against the corresponding number.
- f) Questions 11 to 25 offer four choices, only one of which is correct. Encircle your answer, on the sheet provided, against the corresponding number.
- g) If at any stage you change your mind, you must ensure that the final answer to a question you wish the examiner to mark is clearly indicated.
- h) Queries or questions regarding any of the questions on the Paper should be raised with the invigilator after the exam.
- i) If you need to leave the exam room at any stage during the exam, you should indicate to the invigilator; you will be accompanied at all times as is reasonable, and should minimise any disruption to other learners.
- j) You will be advised when there are 10 minutes left before the end of the exam. When you are asked to do so, you must stop writing.
- k) You must not leave the exam room until instructed to do so; **if you leave before being instructed to, you may be disqualified.**

Part 2 - Practical Assessments (time allowed - 45 minutes)

Six practical assessments will be set, each with associated oral questions:

- Scenario
- Basic Life Support
- AED
- Unconscious Patient (Suction)
- Oxygen Supplementation
- Removal of Crash Helmets
- Immobilisation

Each test is a PASS / FAIL - for a pass to be achieved, all the key areas of the assessment must be met.

VIVA-VOCE ASSESSMENTS

There are many reasons why learners do not pass examinations; examination nerves, illness on the day, mis-reading of the questions, complacency etc,

A verbal assessment - *viva-voce*, is one way of checking whether the individual had a bad day or simply did not know. They should be seen as a legitimate part of the assessment process to be used where circumstances allow; they are not intended to be a re-run of the entire assessment.

Selection of Individuals

The use of *viva-voce* assessments is discretionary, and should be by agreement between the trainer involved in the training and the individual.

Due account should be taken of the individuals performance during their training, and whether both parties feel that the learner would benefit from additional training before re-sitting the exam.

It must be remembered that *viva-voce* assessments are used where learners have not met the required standard, and it may not be in the best interests of the learner or the potential patient if there are general underlying weaknesses.

If a decision is made to *viva-voce* a learner, then it should be undertaken as soon as is practicable.

Application of the *Viva-voce*

The *viva-voce* should focus on those areas where the learner answered incorrectly or avoided answering or had difficulty in expressing themselves in the case of practical assessments.

Learners should be encouraged to give an explanation of the area in question, e.g. " can you describe ", " tell me what considerations you would make when"

Assessors should avoid leading questions which may indicate what the answer should be; give the learner sufficient time to answer fully, but also need to be aware of when a suitable 'break point' occurs, i.e., the point at which the learner has either given a satisfactory answer that conveys sufficient understanding for the questions they originally answered incorrectly, or is unable to do so.

Account should be taken of the continuity of the responses and the logical progression of the thinking; avoid stopping the learner in full flow.

The *viva-voce* should seek to establish that the learner has sufficient knowledge and understanding to achieve the original pass mark. The assessment decision should be recorded appropriately.

IHCD FIRST PERSON ON SCENE (BASIC) - RPL COMPARATOR

MODULE	ELEMENTS	EVIDENCE REFERENCE	ASSESSED
THE PRE-HOSPITAL ENVIRONMENT	A1.1 The role of FPOS		
	A1.2 Scene safety		
	A1.3 Minimising the risk of infection		
	A1.4 Post-incident procedures		
PATIENT ASSESSMENT	A2.1 Communicating with patients		
	A2.2 Examination and assessment		
	B2.3 Safe moving and handling *		
RESPIRATION & AIRWAY MANAGEMENT	A3.1 Recognition of respiratory problems		
	A3.2 Common breathing difficulties		
	A3.3 Basic airway management		
	- Causes of blocked airway		
	- Opening & maintaining a clear airway		
	- Choking		
BASIC LIFE SUPPORT	A4.1 Perform basic life support		
	A4.2 Recovery position		
DEFIBRILLATION	A5.1 Automated external defibrillation		
CIRCULATION AND SHOCK	A6.1 Recognition and initial care of - haemorrhage		
	- bleeding		
	- shock (to include faints)		
MEDICAL RELATED EMERGENCIES	Recognition and initial care of :		
	A 7.1 Heart attack/angina		
	A7.2 Diabetes		
	A7.3 Stroke		
	A7.4 Epilepsy		
	A7.5 Unconscious patient		
TRAUMA RELATED EMERGENCIES (optional)	A8.1 Recognition and initial care of injuries to bones, joints, tendons and ligaments *		
	A8.2 Recognition and initial care of burns and scalds *		
	A8.3 Recognition and initial care of other trauma related injuries *		
	A8.4 Skeletal stabilisation *		

* indicates additional optional units for the FPOS Basic award

IHCD FIRST PERSON ON SCENE (INTERMEDIATE) - RPL COMPARATOR

MODULE	ELEMENTS	EVIDENCE REFERENCE	ASSESSED
THE PRE-HOSPITAL ENVIRONMENT	A1.5 The role of FPOS		
	A1.6 Scene safety		
	A1.7 Minimising the risk of infection		
	A1.8 Post-incident procedures		
	A1.9 Scene management - safety ----- - triage		
PATIENT ASSESSMENT	A2.3 Communicating with patients		
	A2.4 Examination and assessment		
	A2.5 Safe moving and handling		
RESPIRATION & AIRWAY MANAGEMENT	A3.4 Recognition of respiratory problems		
	A3.5 Common breathing difficulties		
	A3.6 Basic airway management - Causes of blocked airway ----- - Opening & maintaining a clear airway ----- - Choking		
	B3.4 Use of suction		
	B3.5 Removal of crash helmets #		
	B3.6 Use of oro-pharyngeal airways		
	B3.7 Oxygen supplementation		
	B3.8 Ventilation support		
	B3.9 Bag/valve/mask #		
	BASIC LIFE SUPPORT	B4.1 Perform basic life support	
B4.2 Recovery position			
B4.3 Perform child & infant basic life support #			
DEFIBRILLATION	B5.1 Automated external defibrillation		
	B5.2 Normal/abnormal heart rhythms		
CIRCULATION AND SHOCK	B6.1 Recognition and initial care of - haemorrhage ----- - bleeding ----- - shock (to include faints)		

IHCD FIRST PERSON ON SCENE - INTERMEDIATE AWARD RPL COMPARATOR (CONTINUED)

MEDICAL RELATED EMERGENCIES	Recognition and initial care of :		
	B7.1 Heart attack/angina		
	B7.2 Diabetes		
	B7.3 Stroke		
	B7.4 Epilepsy		
	B7.5 Unconscious patient		
	B7.6 Asthma / anaphylaxis		
	B7.7 Assisting the Paramedic		
TRAUMA RELATED EMERGENCIES (optional)	B8.1 Recognition and initial care of injuries to bones, joints, tendons and ligaments #		
	A8.2 Recognition and initial care of burns and scalds #		
	A8.3 Recognition and initial care of other trauma related injuries #		
	A8.4 Skeletal stabilisation #		

indicates additional optional units for the FPOS Intermediate qualification