




 Command Guidelens RISK ASSESS HAZARDS IDENTIFIED		BASIC (0 - 3)	EFFICIENT (4 - 7)	THOROUGH (8 - 10)
INITIAL TEAM APPROACH	FULL INNER AND OUTER SURVEY & INFO GATHERED	No effort to manage scene survey and act on information gathered.	Management of inner and outer scene survey is somewhat "mechanical" with poor information exchange.	Well organised and thorough inner and outer survey with complete and thorough information exchange.
	INITIAL PRIORITIES GIVEN TO TEAMS	Initial priorities not given clearly or not recognised and acted upon	Slow to identify initial priorities or not all acted upon or not in a timely manner	Initial priorities identified and acted upon thoroughly
	ESTABLISH DEGREE OF ENTRAPMENT	Degree of entrapment not identified at all	Degree of entrapment is partially identified and included late in the evolution after appropriate plan has been developed	Degree of entrapment is thoroughly assessed and factored into overall extrication plan.
PLANNING & COMMUNICATION	EXTRICATION PLANNING	No clear plan developed, IC becomes too focused on a single plan with no attempt to alter plan in time of difficulties. No emergency plan detailed	Full plan and an emergency route is outlined. IC modifies plan after encountering some difficulty but is slow to recognise problems. Plan is re-assessed only in anticipation of problems	Plan developed with awareness of access, extrication and pathway options. Demonstration that an emergency route is available and viable.
	COMMUNICATION & TEAM MANAGEMENT	IC overbearing towards team. No consultation, fails to listen and liaise with team	IC has limited discussion with team or consults excessively	IC consults and liaises with team and considers suggestions,
	INSTRUCTIONS ACTED ON & UNDERSTOOD	Instructions are ignored or not understood by team	IC gives clear instructions to team but does not confirm if team has clear understanding	IC effectively communicates and ensures all instructions are clearly understood.
	CASUALTY AWARENESS AT ALL TIMES	IC fails to consider impact on casualty and does not ensure team is actively advising casualty and medic before actions are taken.	Communications not consistent throughout scenario resulting in some activities being carried out without awareness of casualty.	IC's concern for the safety and welfare of the casualty is clearly evident by the instructions given.
INCIDENT COMMAND	COMMAND & LEADERSHIP	IC allows team members to take control and is not strong in the controlling of the scenario	IC's skills are clearly recognisable, some instances occur where focus is lost or issues missed.	Thorough command skills demonstrated throughout the scenario.
	GOOD OVERALL POSITIONING	IC not well positioned to manage team activities	Good position is taken but not maintained throughout the scenario	Maintains good overall positioning to effectively monitor and manage team throughout scenario.
	TECHNIQUE MANAGEMENT	IC does not ensure actions are completed systematically and efficiently to achieving the plan. No simultaneous activity with some resources delayed.	Choice of techniques, tools and equipment is consistent with achieving plan. Direction of team activities is systematic and consistent with techniques chosen, limited simultaneous activity.	All actions contribute to achieving the objective as systematically and efficiently as possible. Significant simultaneous activity demonstrated with no delays in obtaining resources.
	PLAN PROGRESSION	No attempt to follow initial plan with little achieved. No fore thought as scenario progresses.	Plan followed, with partial plan achieved. Little fore thought as scenario progresses.	Initial plan followed and progressive plans adopted and achieved as scenario progresses.
SAFETY	USE OF PPE	IC has little or no concern for the use of PPE by team and does not encourage team to use equipment	IC is aware of team safety and intermittently ensures use of appropriate PPE.	IC effectively controls safety and ensures all team make full use of PPE at all times
	MAINTAINS A SAFE WORKING AREA	Critical safety hazards/aspects are missed during the scenario which impacts on both the casualty and team	All safety hazards/aspects are taken into account but not all dealt with efficiently	All hazards clearly identified and managed efficiently. Clear focus on creating a safe work environment.
	CONTROL OF EXTRICATION PHASE	IC does not clearly identify the medical extrication phase of incident. Confusion with team members assuming control of casualty movement.	IC does not clearly identify the medical extrication phase of incident, confusion re who is in control during movement.	IC clearly identifies medic in control of casualty packaging and movements. IC has control of overall extrication.
	CONTROLS ALL ASPECTS OF SAFETY & WELFARE	Team is not rotated at all or only when they request it. No compliance with safe work practices. Manual handling managed poorly.	Team is rotated occasionally. Some attention is paid to manual handling and safe work practices but not consistently throughout scenario.	IC ensures team is rotated regularly and continually monitor each other for compliance with safe work practices. Manual handling is well managed.
SUPPORT	RESOURCE MANAGEMENT	Lack of pre planning, resulting in delays or minimal efficiency of resources, equipment and procedures.	Operations co-ordinated at times with little delay of resources, equipment and procedures.	All decisions made in a timely and efficient manner ensuring the efficient use of resources, equipment and procedures.
	MOTIVATION & MOMENTUM	IC does not encourage team. Tempo and momentum is slow throughout the scenario.	IC provides some encouragement and motivation to team, but a good tempo & momentum is not maintained throughout scenario.	IC effectively motivates and encourages team. Good tempo and momentum is maintained throughout the scenario.
	MINIMUM HANDS ON	IC becomes task focused and loses command overview for the majority of the scenario	IC becomes task focused from time to time. Continually assisting with major technical tasks.	IC does not become task focused and assists only where and when appropriate.
	MINIMUM ON SCENE COACHING/TEACHING	IC lacks confidence in team and gets too involved in specific techniques or actions	IC demonstrates confidence in the team but on occasions is focused on coaching specific techniques	IC demonstrates full confidence in team who carry out all tasks with little or no additional direction.

 Entrapped Immediate		Controlled		COMMAND ASSESSOR									
ASSESSOR :				TEAM :									
Spills		Slip/Trip		Batt		Airbags		Hybrid		SRS		LPG	
CATEGORY		0-3	4-6	7-10	score	COMMENTS				TIME :			
Initial Team Approach		B	E	T	S					POSITIVE POINTS			
RISK ASSESS HAZARDS IDENTIFIED													
FULL INNER AND OUTER SURVEY & INFO GATHERED													
INITIAL PRIORITIES GIVEN TO CREWS													
ESTABLISH DEGREE OF ENTRAPMENT													
Planning & Communication		B	E	T	S								
EXTRICATION PLANNING													
COMMUNICATION & TEAM MANAGEMENT													
INSTRUCTIONS ACTED ON & UNDERSTOOD													
CASUALTY AWARENESS AT ALL TIMES													
Incident Command		B	E	T	S					LEARNING POINTS			
COMMAND & LEADERSHIP													
GOOD OVERALL POSITIONING													
TECHNIQUE MANAGEMENT													
PLAN PROGRESSION													
Safety		B	E	T	S								
USE OF PPE													
MAINTAINS A SAFE WORKING AREA													
CONTROL OF EXTRICATION PHASE													
CONTROLS ALL ASPECTS OF SAFETY & WELFARE													
Support		B	E	T	S					POSITIVE POINTS			
RESOURCE MANAGEMENT													
MOTIVATION & MOMENTUM													
MINIMUM HANDS ON													
MIN. ON SCENE COACHING/TEACHING													
DEBRIEF SUMMARY													
Command Summary				Technical Summary				Medical Summary					
ASSESSORS SIGNATURE :						Date:		Total Score		Score checkers initials			

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Technical guidelines		BASIC (0 - 3)	EFFICIENT (4 - 7)	THOROUGH (8 - 10)
Vehicle Preparation	STABILITY RAPID & LOGICAL	Primary and Secondary stabilisation (if required) not achieved or revisited.	Primary and Secondary stabilisation (if required) is achieved and revisited.	Thorough Primary and Secondary stabilisation (if required) achieved and revisited.
	ASSESSED REGULARLY	Basic stabilisation with little or no rechecking at relevant stages of operations.	Efficient checking of stabilisation but not always at relevant stages of operations.	Thorough checking of stabilisation at all relevant stages of operations.
	GLASS MANAGED EARLY & LOGICAL	Glass not managed at appropriate time and hinders operations later in the scenario	Glass managed at appropriate time and some hindrance to operations later in the scenario	Thorough glass management at appropriate time with no hindrance to operations later in the scenario
SPACE CREATION -casualty access	FULL PROTECTION GIVEN	Glass incorrectly managed or little regard given to safety / No warnings given. Basic casualty protection demonstrated	Glass correctly managed with some regard given to safety . Some warnings given. Efficient casualty protection demonstrated	Glass thoroughly managed with full regard given to safety . Thorough warnings given. Thorough casualty protection demonstrated
	EARLY INITIAL ACCESS	Technical personnel provide delayed initial access to casualty for medic	Technical personnel provide prompt initial access to casualty for medic	Technical personnel provide rapid initial access to casualty for medic
	EFFECTIVE EXTRICATION TECHNIQUES	No attempt/ Minimal internal space creation.	Some internal space generated but still not sufficient for medic or extrication.	Excellent , timely and sufficient internal space created for medical duties and extrication route.
	EFFECTIVE EXTRICATION PLAN	Techniques adopted do not contribute to Extrication plan or gaining full access	Techniques to gain full access are relevant but progress is insufficient	Techniques are appropriate and executed to a high standard to achieve the extrication plan
TOOL OPERATION	FINAL EXTRICATION SPACE	Final space insufficient for the safe removal of casualty	Final space is sufficient but casualty requires manoeuvring out.	Maximum space created. Full access achieved with no manual handling issues
	RESCUE TOOLS & TECHNIQUES CORRECT WORKSPACE MANAGED CORRECTLY	Technical personnel demonstrated incorrect use of equipment, techniques or vehicle knowledge. Basic workspace management carried out	Technical personnel demonstrated correct use of equipment, techniques or vehicle knowledge. Efficient workspace management carried out	Technical personnel demonstrated thorough use of equipment, techniques or vehicle knowledge. Thorough workspace management carried out
	TOOL OPERATION,ANGLE PURCHASE ETC	Tool operators have basic knowledge of correct tool selection,angles,purchase points and general tool control.	Tool operators have efficient knowledge of correct tool selection, angles, purchase points and general tool control.	Tool operators have thorough knowledge of correct tool selection, angles, purchase points and general tool control.
	WARNINGS GIVEN AND ACKNOWLEDGED	No warnings given or acknowledgement received throughout the scenario.Basic managed workspace in relation to equipment, personnel and debris.	Some warnings given, and acknowledgement received throughout the scenario. Efficient management of workspace in relation to equipment,personel and debris.	At all times warnings were given and acknowledged throughout the scenario. Thorough managed workspace in relation to equipment personnel and debris
CASUALTY PACKAGING AND PA	HAZARDS CONSIDERED, REVEALED, IDENTIFIED,ACTED UPON	Tools used in unsafe manner -Hazards not considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc	Tools used in an inconsistent safe manner -Hazards not considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc	Tools used in a safe manner- All Hazards considered, revealed, identified or acted upon during scenario .i.e. SRS/struts etc
	STABILITY NO ADVERSE MOVEMENT	Large amount of adverse Movement/ Vibration transferred to casualty during operations.	Minimal adverse Movement / Vibration transferred to casualty during operations	No adverse Movement / Vibration transferred to casualty during operations
	PROTECTION AS REQUIRED	Little/ No protection for casualty during operations.	Some protection provided for casualty during operations	Excellent casualty protection given at all times and stages during operations.
	FINAL EXTRICATION PATH AND EGRESS	Final extrication path not successful or sufficient for casualty, considering their condition. (Key-hole)	Final extrication path successful for casualty given their condition, with some manipulation during extrication. Space not sufficient	Final extrication path successful and executed to a high standard during extrication
TEAMWORK/EFFICIENCY/SAFE	CASUALTY AWARENESS & PACKAGING	Little or No concern given casualty's well being or emotional state during operations packaging insufficient or inappropriate	Good level of consideration given to both Physical and Mental welfare of casualty. Packaging appropriate for plan	Excellent consideration given to all aspects of casualty care at all times. Thorough packaging for extrication plan
	PREPLANNING, TASK PREPARATIONS & GOOD COMMUNICATIONS	Technical personnel unsure of role or assigned tasks / demonstrating limited task preparation	Technical personnel demonstrate common understanding of the objective, which leads to some pre planning and task preparation	Technical personnel fully proficient in their role/function which leads to pre planning and task preparation.
	EFFICIENT TEAMWORK - SIMULTANEOUS ACTIVITY	Technical personnel work as individuals or demonstrate poor communications or demonstrate limited simultaneous activity.	Technical personnel demonstrate good communications, teamwork and some simultaneous activity.	Excellent communications, teamwork and simultaneous activity demonstrated at all times
	GOOD MOMENTUM ACHIEVED	Little progression towards the objective achieved	Time reasonably well spent to accomplish tasks by technical personnel.	Efficient, controlled and safe progression of plan achieved making the best use of time.
	SAFE TOOL OPERATION WITH PPE	Personnel fail to demonstrate correct procedures in relation to tool safety and PPE.	Good Tool safety and PPE demonstrated with some minor issues	Technical personnel provide an excellent demonstration of tool safety and PPE at all times.

 Entrapped Controlled Immediate		TECHNICAL ASSESSOR				iRescue2010 <i>cutting edge</i>	
ASSESSOR :					TEAM :		
Spills	Slip/Trip	Batt		Airbags	Hybrid	SRS	LPG
CATEGORY	0-3	4 6	7-10	score	COMMENTS		TIME :
Vehicle Preparation	B	E	T	S	Time S:	F:	POSITIVE POINTS
STABILITY RAPID & LOGICAL							
ASSESSED REGULARLY							
GLASS MANAGED EARLY & LOGICAL							
FULL PROTECTION GIVEN							
Space Creation	B	E	T	S	Time S:	F:	
EARLY INITIAL ACCESS							
EFFECTIVE EXTRICATION TECHNIQUES							
EFFECTIVE EXTRICATION PLAN							
FINAL EXTRICATION SPACE							
Tool Operation	B	E	T	S			LEARNING POINTS
RESCUE TOOLS & TECHNIQUES CORRECT WORKSPACE MANAGED CORRECTLY							
TOOL OPERATION,ANGLE PURCHASE ETC							
WARNINGS GIVEN AND ACKNOWLEDGED							
HAZARDS CONSIDERED, REVEALED, IDENTIFIED,ACTED UPON							
Casualty packaging and pathway	B	E	T	S	Time S:	F:	
STABILITY NO ADVERSE MOVEMENT							
PROTECTION AS REQUIRED							
FINAL EXTRICATION PATH AND EGRESS							
CASUALTY AWARENESS & PACKAGING							
Teamwork/Efficiency/Safety	B	E	T	S			POSITIVE POINTS
PREPLANNING, TASK PREPARATIONS & GOOD COMMUNICATIONS							
EFFICIENT TEAMWORK - SIMULTANEOUS ACTIVITY							
GOOD MOMENTUM ACHIEVED							
SAFE TOOL OPERATION WITH PPE							
DEBRIEF SUMMARY							
Techniques used: Full Side / Front Door / Rear Door / B Pillar / Other Roof Removed / Forward Fold / Rear Fold / Side Fold / Oyster						Vehicle Orientation: Wheels / Roof / Side	
Raming technique used: B to A / B to B / Other; comment.						Vehicle relocation: Winching/Manual /Other	
ASSESSORS SIGNATURE :						Vehicle type: Ute / Wagon / Sedan	
Date:						Total Score	Score Checkers Initials

		APPROACH	PRIMARY SURVEY/TRIAGE	ASSESSMENT OF ENTRAPMENT	COMMUNICATIONS	SPINAL MANAGEMENT	MEDICAL EQUIPMENT
BASIC	0 - 3	Medic doesn't heed warnings of dangers or hazards.	ABC's checked	Only visual assessment of extent of entrapment	Minimal communication maintained with patient	Applies manual stabilisation	Poor location/staging of equipment for entry/egress
		Shows no concern for own safety	Consideration of possible C spine injury demonstrated	Utilises team members to assess extent of entrapment where possible	Establishes communication about extent of entrapment only when prompted by team or team leader	Achieve initial neutral alignment when possible	Fails to keep medical equipment protected from contamination
		Medic approaches casualty in a safe manner	Some attempt to manage airway		Inadequate directions by medic, leading to questioning by team	Recognised appropriateness to fit collar	
		Slow to make contact with casualty	Basic triage and recognition of priorities		Poor communication with team second medic leading to bad practice and patient care	Reasonable decision made to not fit collar immediately with effective alternate immobilisation technique applied	
		Obvious lack of concern for casualty				Procedure explained	
EFFICIENT	4 - 6	Some dangers or hazards noticed	Excellent airway management	Physically establishes extent of entrapment	Maintains good communication & reassurance of patient	Correct size of collar chosen & fitted correctly	Locates equipment suitably for egress
		The scene is surveyed for what is involved	Bleeding assessment conducted, major bleeding addressed immediately	Medic communicates extent of entrapment with team or team leader	Good teamwork and feedback	Does not rely on collar as sole mode of immobilisation	Correctly assess equipment required
		Appropriate direction of approach to casualty	Identifies priorities and triage into classes		Keeps team leader informed without prompting	Neutral alignment maintained and casualty correctly managed	Correctly utilises appropriate equipment
		Medic checks for verbal responses			Communications patient care goals and plan	Appropriate use of extrication devices	Demonstrates effective use of equipment
		Assurance provided			Efficient teamwork between medics		
		Issues directive not to move head during replies					
THOROUGH	7 - 10	Well-organised systematic approach to ensure area is safe	Checks are carried out to see if casualty can breathe without pain and checks patients' respiratory status	Maintains an ongoing assessment regime to monitor the extent of entrapment throughout extrication	Excellent communication with team captain leading to minimal interruptions	Safe use of extrication devices	Manages equipment and always aware of location
		Identify/locate all patients	Reassurance given to casualty		Excellent communications regarding the patient's injuries and extrication requirements	Decision to not fit extrication device acceptable	Manages equipment well during extrication
			Thorough decision making on triage and rapidly demonstrates leadership in management of the casualty		Excellent communication leading to best practice in patient care	Procedure explained to casualty	
					Thorough plan and goal to achieve efficiency	Excellent immobilisation is maintained from the first contact with the casualty onwards	

Spinal Management is scored out of 0 - 6 in the first sub section, then 7 - 10

		SECONDARY SURVEY	PACKAGING	EXTRICATION	HAND OVER OF PATIENT	CASUALTY SAFETY	EFFICIENCY
BASIC	0 - 3	Takes excessive time to commence secondary survey	Extrication process explained to patient	Extrication not attempted	Basic Handover of patient no history of events and injuries	Casualty not advised of all actions taken and rescue process	Some coordination between internal & external rescue
		Head to Toe assessment commenced	C spine managed during extrication	Extrication achieved or imminent with basic spinal management and packaging.		Poor reassurance techniques	Casualty packaging started late resulting in delays
		Systematic approach to secondary survey, no vital signs established	Some command of team during movement	Extrication achieved or imminent with basic casualty safety and basic extrication techniques.		Casualty not protected with appropriate cover during evolution	Extrication process delayed unnecessarily
		Locates most injuries	Some regard for casualty's injuries during extrication			Eye protection not provided	
EFFICIENT	4 - 6	Determines casualty/s medical history	Good communication with team leader & team during extrication	Extrication not achieved	Efficient handover with good history, injuries patterns and vital signs allowing for ongoing care	Hearing protection when appropriate	Time reasonably well spent to accomplish tasks
		Considers casualty/s respiratory status	Due regard given to injuries, casualty handled with dignity	Extrication achieved or imminent with efficient spinal management and packaging		Good communication between medic and casualty	Timely start of Casualty packaging
		Systematic approach to secondary survey, some vital signs measured	Correct utilisation of appropriate extrication devices	Extrication achieved or imminent with efficient casualty safety and extrication techniques.		Medic provides some reassurance	
		All significant injuries identified and treated accordingly	Appropriate infection control precautions				
THOROUGH	7 - 10	Complete and thorough systematic approach to secondary survey	Removed nonessential equipment during extrication	Extrication achieved or imminent	Thorough Handover with history, detailed injury pattern, vital signs care given and dx of patient injuries	Excellent communication between medic and casualty	Team is well coordinated & well drilled
		All vitals and GCS/conscious state established	Excellent command of team during movement	Thorough spinal management and packaging		Casualty reassured constantly	Time used in most efficient manner to accomplish tasks
		Perfusion status identified	Casualty handled appropriately	Thorough safety and extrication techniques		Casualty constantly informed about actions	
		All significant and minor injuries are identified and treated accordingly				Very good response to the needs of the casualty	
		Pain levels assessed and appropriate action taken					
		Casualty condition continuously re-assessed					



Entrapped Controlled
Immediate

MEDICAL
 ASSESSOR

iRescue2010
cutting edge

ASSESSOR : _____ TEAM : _____

DATE: _____ TIME: _____ MEDIC NAME: _____

CATEGORY	B	E	T	SCORE	Time	COMMENTS
	0-3	4-6	7/10			
APPROACH						
PRIMARY SURVEY/TRIAGE						
ASSESSMENT OF EXTENT OF ENTRAPMENT						
COMMUNICATIONS						
SPINAL MANAGEMENT						
MEDICAL EQUIPMENT						
SECONDARY SURVEY						
PACKAGING						
EXTRICATION						
HAND OVER OF CASUALTY						
CASUALTY SAFETY						
EFFICIENCY						

DEBRIEF SUMMARY

POSITIVE POINTS	LEARNING POINTS	POSITIVE POINTS