



NSW STATE ROAD CRASH RESCUE CHALLENGE

STRONGER TOGETHER



CPR CHALLENGE RULES

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Authorised by NSW State Road Crash Rescue Challenge Organising Group

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Section	Changes
No Changes	

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1. Definitions

The term “Organisers” hereafter will refer to the NSW Road Crash Rescue Challenge Organising Group as the official organisers of the State Road Crash Rescue Challenge.

The term “Host” hereafter will refer to Fire and Rescue NSW and the NSW State Emergency Service.

2. Team Membership

Each team will consist of six (6) members. At the discretion of the Chief Assessor, a team may substitute a team member in the case of illness or injury.

At the discretion of the Chief Assessor, a team may substitute a team member in the case of illness or injury, except during a scenario. If, during a scenario, a team member is injured and has to withdraw, the team, if able, may continue until they finish, or ‘Time’ is called.

All members of the team must participate in the CPR Challenge, and each must perform the role of ventilator and chest compressor.

3. Accident Injury or Illness

If, during the CPR challenge, an accident, injury or illness or injury occurs to any person, which affects the running of the scenario, the injury will be advised to the Organisers as an authentic occurrence (i.e. ‘No duff’). The Chief Assessor, Assessor or Safety Officer will immediately instigate competent medical attention to the situation via the local provider or crew on standby at the site. The delay or ceasing of that scenario will be at the discretion of the Assessor in that pit. The Challenge Coordinator is to be advised immediately.

4. Pit Access

The pit area will be off limits to all persons unless authorised by the Organisers. Authorised persons will be admitted entry only by valid accreditation or other approved means.

5. Insurance

Adequate Workers Compensation and or Injury Insurance for the participating teams will be the responsibility of that team’s Service, Agency or “Employing Organisation”.

Upon request a letter and/or insurance certificate confirming adequate coverage of the team will be required with the entry form.

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6. Registration

Team application and registration for this challenge can only proceed on the official entry form supplied, accompanied by the prescribed fee which will be determined by the Organisers from year to year. As part of the process of registration teams must confirm that all members of the team comply with the requirements of rules 2 and 18 of this Challenge.

All extrication challenge teams must participate in the CPR Challenge.

Teams that are unable to participate in the challenge must notify the Organisers in writing of their decision to withdraw, or they will be deemed to be a 'No show' and be disqualified.

7. Assessors

A Chief Assessor will be appointed to co-ordinate all the Assessor panels for all challenge events and resolve any disputes. One medical assessor will be appointed by the Organising Group to oversee the CPR Challenge.

The winner of the CPR challenge will be determined by the score issued by the Laerdal Q CPR manikin and the score given by the medical assessor's evaluation.

8. Assessment Sheets

Teams participating in the CPR Challenge will be assessed using a Laerdal CPR manikin. This manikin will issue scores based on the effectiveness of ventilations and the effectiveness of external chest compressions.

The Medical Assessor will photograph the team score. The team will not be provided with their score. Photographs of the team scores will remain the property of the Organisers and will not be available for viewing or scrutiny by any unauthorised persons. Score sheet summaries for each team will be made available to that team after the conclusion of the challenge.

9. Appeals

The team leader of any team that has a grievance or dispute must report it in writing to the Chief Assessor within one hour of completing the scenario concerned on the day. All appeals in respect of a technical performance and associated scoring will be heard by the Chief Assessor who will, where required, investigate or discuss the issue with any involved assessors, whose deliberation is final.

All allegations of unfair assessment will be investigated thoroughly from all perspectives by the Chief Assessor who will present their findings to the Challenge Organising Group for their deliberation.

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10. Scenarios

Scenarios will involve one Laerdal QCPR manikin. The crew will need to ventilate the manikin and conduct CPR for twelve minutes. During these twelve minutes there must be two-minute role changes. At the conclusion of the evolution each team member must have completed two minutes of ventilation and two minutes of CPR.

The team is responsible for ensuring appropriate rotations. The crew will be disqualified if role rotation exceeds 180 seconds.

11. Scenario Aims and Objective

Each team will participate in one (1) CPR Challenge.

The objective is to improve survival from out-of-hospital cardiac arrest, by enhancing the resuscitation skills of rescuers.

12. Props

Will include one Laerdal QCPR manikin. A spare manikin must also be available in the pit.

13. Medical Equipment

The hosts will provide a complete bag mask. For consistency and fairness, crews will not be permitted to substitute this bag mask. Equivalents will be available for team inspection.

14. Team Presentation at CPR Challenge

Teams are to present themselves at the designated reporting location well ahead of the published time they are required.

No isolation is required.

The evolution consists of On-Scene (12 minutes) and some brief feedback from the Assessor (but teams will not be told their score).

15. Breakdown of Scenario

The team is not required to assist with pack / make up.

16. Assessment of Performance

Assessment will be based on the score issued by the Laerdal Q-CPR manikin and score from the Medical Assessor score sheet.

The Medical Assessor will photograph the team score.

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17. Debrief

Following each scenario, the Assessor panel will conduct a short debrief with each participating team. The debrief is designed to provide a learning opportunity for all involved.

18. Personal Protective Equipment

All competing team members will always during the challenge wear suitable clothing and personal protective equipment as approved by their agency. As a minimum, suitable turn out gear, coveralls, safety boots and medical gloves.

In keeping with occupational health and safety work practices, teams are required to supply and use their own medical gloves and other consumable personal protective equipment supplies.

19. Challenge Safety

Where the command “STILL” or “FREEZE” or where a whistle is blown, ALL members of the team will immediately stop their actions. If this occurs the team will be required to restart the evolution.

The above safety calls can be made by any of the Assessors or Safety Officers. If the problem can't be rectified the Chief Assessor may disqualify the team or cancel the evolution.

20. Timing

Assessors will be responsible for accurate timing of the scenario. The Medical Assessor will call “time” when time has elapsed.

21. Casualties

The casualty will be a Laerdal QCPR manikin.

22. Non-attendance of Team

In the event of a ‘No Show’ by any registered team at their appointed time for equipment inspection, the Organisers may disqualify them from the CPR competition.

23. Information

The Organisers reserve the right to use all information that may be obtained from the Challenge and its participants for educational purposes.

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24. Team Briefing by Organising Group's Medical Specialist

A briefing will be held at a time to be notified prior to the Challenge. It is mandatory for all teams to attend. Team managers may also attend if a team has someone nominated to this role.

Some or all members of the following groups may also attend the briefing:

- Challenge Organising Group members.
- Representatives of the host agency.
- Special guests, including representatives of the host agency for the following year.
- Others at the discretion of the Event Coordinator.

25. Determination of Results

The Organisers will determine the prizes to be awarded from year to year.

Determination of results will be based on the following criteria:

- Rankings will be allocated for each assessor in such a manner that the team that scores the highest score from an assessor will be given a 'rank score' equal to the number of teams in the challenge. The team that scores the next highest score from that assessor will be allocated a 'rank score' one less and so on. The team that scores the lowest from that assessor will be allocated a 'rank score' of 1.
- Rank scores for each team from the different assessors will be added together.

Count back procedure:

In the unlikely event that two or more teams score equally the event will be declared a draw. No count back procedure will be required.

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26. Disqualification

Any team or team member that does not adhere to these rules or brings disrepute upon the Challenge may be disqualified.

Any matter concerning the possibility of a team disqualification or a matter bringing the Challenge into disrepute will be heard by a committee made up of the Chief Assessor and two other members from the organising body. Any decision made by this group will be final.

Spectators or team supporters may barrack and encourage teams in the spirit of fair play; however any “coaching”, including calling time remaining, from the spectators or team supporters will result in a “Freeze” being called, but the clock will continue to run. The Assessor panel leader will give a warning to the offending person or persons. Any subsequent coaching call will result in time being called on the participating team.

27. Participation in the Learning Symposium

The intent of the State Road Crash Rescue Challenge is to explore, develop and promote best practice in the delivery of integrated road rescue services and patient care. To this end the challenge each year includes a learning symposium the day before the challenge. To ensure maximum learning opportunity by all participants, attendance by teams competing in the CPR Challenge at the symposium is strongly encouraged.

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