



Outdoor First Care 2019 Instructor Guide

Introduction

Outdoor First Care (OFC) is a first aid course taught primarily to personnel at ski resorts, bike patrollers, and other individuals who need a basic/introductory first aid course meeting the Occupational Safety and Health Administration (OSHA) guidelines for first aid. The topics covered in OFC are necessary to comply with these guidelines. It is designed primarily for use in the host program and mountain bike patrols of the National Ski Patrol (NSP) but is available for other purposes as well. It is not used to replace a full Outdoor Emergency Care (OEC) course, *nor is it to be taught at the level of an OEC course*. The OEC course is a first responder course while the OFC is a first aid course.

The local ski patrol should take an interest in teaching this course, as ultimately it can benefit patrollers by training other ski area personnel to help them care for patients. Mountain and bike hosts are trained in first aid and communication skills, so they can **assist** patrollers in patient care.

OFC provides area management with a basic first aid course for resort personnel, other than ski patrol. This will help the resort comply with various OSHA guidelines, when a first aid requirement is necessary. For example, many resorts must have someone trained in first aid for the "midnight shift." If a grooming machine flips over at 3 AM, the area may need to have someone present who can care for the needs of the injured driver until EMS arrives.

OFC is designed to teach candidates how to recognize patient problems, manage life threats, conduct basic skills, and call for help. The OFC provider may assist the patroller or higher medical provider as directed or allowed for by area management.



OFC Candidate Requirements

1. Completion of a basic (lay person or non-healthcare provider) *CPR/AED* course provided by the American Red Cross OR American Heart Association (AHA) Heartsaver/AED course OR the National Safety Council. The course taken must include instruction on the AED. A professional level CPR/AED card is also acceptable, but not required. Each candidate **MUST** present a current/valid CPR card **prior** to taking the hands-on part of the course.
2. Completion of the OFC *online* program with the written 25-question evaluation (80% is required to pass). Certificate of completion must be presented **prior** to taking the hands-on part of the course.
 - a. An option to the online learning/review portion of the OFC modules is to have a classroom setting instruction/review of all the modules.
3. Completion of a *practical* "hands-on day." Training modules are provided for hands-on practice. At the end of this day, there is another written 25-question evaluation (80% required to pass) and a "hands-on" scenario for each candidate, to be evaluated by an OEC instructor.

Instructor of Record (IOR) Responsibilities

1. Obtain area management's approval of the course and decide who and how many people will attend the program.
2. Register the course with NSP.
3. An Instructor/Trainer (IT) needs to monitor the practical and testing portions of the course for Q/A. Arrange assignment of the IT.
4. Notification of the course – this can be handled in a variety of methods such as sending out emails to area personnel or posting notices at the ski area.
 - a. Recruit candidates.
 - b. Explain to the candidates what the 3 components of the course require.
 - c. Demonstrate how to register for the course and provide directions on how to access and use the online portion of the course.
 - d. Note the facility location and dates of the "hands-on" day.
5. Recruit instructors and helpers.



OFC Course Planning/Requirements

1. Each OEC instructor **must** read the same material that the candidate will receive. This material is available on the online LMS in the form of PowerPoint slides in 21 modules. This allows the instructor to understand what the candidate has been presented with before beginning the hands-on day. Going through the material will allow the instructor to better plan the day and will allow the instructor to answer specific questions the OFC candidates may have regarding the scenarios presented in the various modules.
2. A ratio of one instructor for every 6 to 8 candidates is recommended.
3. Instructors need to prepare ahead of time. It is suggested that there be a "pre-practical" work meeting for instructors who have not taught the OFC course to ensure that all are on the same page. This pre-meeting would be similar to a refresher planning meeting. This meeting could cover who is going to teach what portion or who will be demonstrating which skill. You will also want to plan for an adequate amount of instructors and helpers for the candidates and to conduct the final practical evaluation.
4. The 7 hands-on modules (scenarios) and the practical test will need to be set up prior to the candidate's arrival. Each scenario consists of an instructor and a patient *who has previously been instructed* on how to represent the condition at that station. Using moulage for injuries will add a realistic touch, which can be of benefit to the candidate. The helper who is the patient could be anybody, but a patroller may be preferable, as he or she has trained on what signs or symptoms a patient might present with.
5. If needed, provide extra time for local protocols and information that is specific to the local host/bike program. Local protocols should be approved by management and, if needed, the local medical advisor.

Training Modules (sample schedule provided)

1. The **third part** of the course is scheduled as a practical day with OEC instructors and experienced patrollers. Except for introductory comments, this practical day consists of "hands-on" participation with some discussion. It is *not intended as a lecture course* but an active interaction between the instructors and the candidates. Each of the 7 modules given during this day's



activities will cover two or more of the topics presented in the online part. An Instructor Trainer needs to monitor this part of the course for QA.

2. The IOR or host leader will need to verify that the candidate has the correct level of CPR/AED training prior to starting the hands-on portion of the course. If the area has the resources to arrange for a classroom course, it can schedule the course prior to beginning the hands-on portion. It should be noted that it is not required that the IOR or area be mandated to provide a CPR/AED course to the mountain host or OFC candidates.
3. After registration and a brief explanation of the day's activities, it would be prudent to first demonstrate to all the candidates a pre-arranged scenario using an instructor and a patient. The demonstration should show the proper way to assess a patient, how to call for assistance and the other items that are expected of the OFC candidate. This will provide the candidate with a visual of the assessment process and could act as your "set" for the day.
4. The practical evaluation includes **10 critical performance points**. These should be reviewed in each of the 7 scenario-based modules. These 10 points are:
 - a. Scene safety
 - b. Introduction, name, who you are, what is patient's name
 - c. Permission to care for patient
 - d. PPE, Standard Precautions
 - e. History of problem from patient (or bystander)
 - f. ABCD's with pulse and respirations taken. Immediate action for life saving problem
 - g. Further assessment of medical illness or trauma problem
 - h. Communication skills
 - i. Simple bandaging if needed
 - j. Call for back-up and management when needed
5. Training Modules
 - a. Each of the 7 modules should be 25-30 minutes in length.
 - b. Each candidate should be the lead in at least one of the modules.
 - c. Ratio should be 1 instructor to 6-8 students; consider running more than one module at a time with rotation if more students are enrolled.
 - d. Give positive feedback at the end of each scenario. Review the 10 critical performance points above and how they relate to the scenario.



- e. Teach the candidate what to do! If it appears that a candidate is having problems at this point, and if resources allow, have that candidate work one-on-one with an instructor to develop the skills and confidence. You will want to make this a positive experience.
 - f. The patient role should be straight forward, not confusing or trying to “trick” the OFC candidate. The purpose is NOT to embarrass the candidate but help the candidate through the problem, with the instructor giving guidance.
 - g. The presentation by the patient should take less than one minute. This is to show the candidate how the scenario is set up and what to expect in a scenario. This will also help to reduce the candidate’s anxiety worrying about what to expect in a scenario. If the patient does not present as the scenario indicates, the instructor should correct the scenario and help the candidate.
6. Skill Guides – The online portion of the OFC course is made up of 21 modules. The 7 SKILL GUIDES are mixed into these modules. The instructor will need to teach and reinforce these skills throughout the hands-on portion of the course. The Skill Guides and the module where they can be located for review are as follows:
- a. Assessing Mental Status (AVPU) – module 4 Patient assessment
 - b. Assessing Vital Signs – module 4 Patient assessment
 - c. Recognizing Shock – module 4 Patient assessment
 - d. Opening an Airway – module 8 Breathing
 - e. Protecting the Spine – module 13 Altered Mental Status
 - f. Log Rolling the Patient - module 13 Altered Mental Status
 - g. Lifting & Moving the Patient - module 13 Altered Mental Status

Testing

1. Each candidate must pass this final written evaluation with a score of at least 80%. Participants who have completed the preliminary work, passed the pre-test, and participated during the hands-on day should be able to pass the final written and practical evaluation. A reasonable amount of time should be given for the written evaluation. If someone has a documented reading problem, an oral test may be substituted using the same test. An OEC



Instructor or experienced patroller should be assigned to read the test to the candidate in a private area.

2. Each candidate must also be given an individual practical scenario and go through the problem alone, with an OEC instructor evaluating the candidate's skills. This practical problem will be very similar in scope and complexity to the scenarios given in each module. Two scenarios will be provided by the National OEC Committee for the final practical evaluation.
3. The instructor should ensure that the candidate can render "first aid" at an OFC level and have the tools to request additional help of a higher level. They are *not* providing the same level of care that an OEC technician or first responder gives. They can **assist** a patroller in helping to put on a traction splint or assist the patroller when applying oxygen. The candidate must also be able to interact with a higher level of pre-hospital care provider and **assist** that provider as needed. The instructor must feel confident that the candidate has a grasp of what is needed to perform a logical and complete evaluation of the patient in the scenario and be able to interact with a patient who is sick or injured "on the hill."
4. The practical evaluation includes ***10 critical performance points*** (listed above). If the practical scenario provided by the National OEC Committee does not include one of the performance points, that point is given to the candidate. For example, if there is no bleeding issue in the scenario, the performance point for bandaging is 'given' to the candidate. Another example would be an unresponsive patient without a bystander present, and the candidate would be unable to obtain a history for the unresponsive patient. An exception for the unresponsive person would be for a patient who is wearing a medical alert tag/bracelet indicating an issue such as diabetes. The candidate would need to notate the medical alert as part of the patient history.
5. The practical should take no more than 10 minutes per candidate. There must be at least one OEC Instructor evaluating at each station. Additional experienced patrollers can help at the stations, but the determination of whether the candidate has passed the scenario **must** be conducted by an OEC instructor. Feedback to the candidate is important and can be given right after the scenario completion.



6. If there are any questions about an evaluation of a candidate, either written or "hands-on," the IOR has the final word related to the passing of the scenario/course.



Sample Schedule for Activities on the OFC Practical Day

6:30 or 7:00 AM Registration (depends on how many in class).

- Verify current and appropriate level of CPR/AED.
- Turn in Certificate of Completion from preliminary test (if didactic portion has been completed online).
- Breakfast items, coffee as desired.
- Set up modules so they are ready at 8:00 AM.

7:30 AM Introductions should be given and the IOR discusses how day is to run, what modules are to be covered, what skill guides are covered, and how the final written and practical evaluation will be deployed. A sample scenario is given in front of all candidates so they see what is to happen at each station.

8:00 AM Begin hands-on training modules (each is approximately 30 minutes)

- (1) Communications
Bleeding, Splinting, Bandaging
- (2) Unresponsiveness and Altered Mental Status
Moving the Patient
- (3) Chest Pain
Altitude Sickness

9:30 AM *break*

10:00 AM Continue with the modules

- (4) Hypothermia
- (5) Alcohol-Related Conditions
Burns
- (6) Stroke and Altered Mental Status



(7) Breathing Difficulty
Asthma

NOON: LUNCH (30 minutes)

12:30 PM Written Evaluation & Practical Evaluation. These can occur simultaneously, where candidates are called in to take the practical, interrupting their written test. They can then return to the written test. Dependent on the instructor/evaluator-to-candidate ratio.

2:00 *or later* Completion, wrap up, course evaluation

Please note that this is a sample schedule only. You may provide more time or move through the modules faster—it all depends on how well prepared the candidates are and the instructors-to-candidates ratio.



SCORE SHEET: OFC 2019 PRACTICAL EVALUATION

Circle number if candidate completes item.

Use space at the end of the sheet for notes/comments.

Candidate Name: _____

- 1 Scene safety
- 2 Introduction of candidate, obtains patient's name
- 3 Permission to care for patient
- 4 PPE, Standard Precautions
- 5 History of problem from patient (or bystander)
- 6 ABCD's with pulse and respirations taken.
Immediate action of life-saving problem
- 7 Further assessment of medical illness or trauma problem
- 8 Communication skills using SAILER
- 9 Simple bandaging if needed
- 10 Calls for patrol or other additional assistance. Notifies management when needed.

Notes/Comments:

Instructor Signature: _____

Total Points Scored: _____/10