

**SECTION 3**  
**LIFESAVING EVENTS**

## **Amendments:**

### **October 2015**

3.3.3.2 (e) - Handlers' allowed duties.

### **December 2015**

3.5.4 (a) (viii) - include minimum two PDF's in equipment.

3.5.11 (s) & (t) - 3rd Section timing reintroduced.

3.5.12 (f) - One AED and two PDF's brought into scenario area.

3.6.1 (b) - Non- Bronze competitors must be able to demonstrate the use and delivery of oxygen for resuscitation and therapy.

3.6.3 (b) & (d) First Aid standards from Public Safety and Aquatic Rescue Training Manual.

3.6.3 (h) - OxyViva to be supplied by teams.

### **August 2016**

3.3.3.3 (b) - Clarification that the starting signal or command is the "go" signal as defined in Section 2.19 of the SSM.

3.3.3.3 (c) - Clarification that after the starting signal sound the handlers may move the IRB to remain perpendicular to the wave line.

3.3.3.4 (d) - Clarification of the normal crewing position by deleting reference to the IRB Training Manual.

3.3.3.4(e) - Clarification that the normal patient position includes holding the pontoon lifeline rope with at least one hand.

3.3.3.4 (f) - Addition of an additional point viii) permitting a momentary shift from the respective normal position of the driver crew or patient.

3.3.3.7 (b) - Clarification of the Changeover tag procedure in the Mass, Teams and Relay Events.

3.3.4.3 (g) - Clarification that a maximum of two team members are to maintain contact (control) with the IRB on the beach in the IRB Rescue Event.

### **August 2017**

3.3.3.2 (b) - A note to clarify that once crews are in the "set" position for the start no (further) bonus time can be requested before that race. Should IRB equipment be damaged by waves while in the set position and before the start, the Referee may, at their discretion, allow for the equipment to be replaced or quickly repaired before proceeding with the start without the loss of bonus time.

3.3.3.6 (k) - A clarification that IRB teams are requested to stand away from the start/finish line when finished until all teams have completed the course. This will assist the finish judging process.

3.3.3.7 (b) - This paragraph has been amended to clarify that either the incoming or outgoing competitor may affect the tag.

3.4.1, 3.5.1 & 3.6.2 - The addition of a note for the Champion Lifesaver, Patrol Competition and First Aid Competitions that where Manuals or other documents are referenced the written word takes precedence over any photographs or diagrams. In addition, when words, photographs or diagrams are "silent" on process, competitors shall not be penalised for their methodology in completing required actions.

3.4.7 (i) (ii) & 3.5.11 (v) (ii) - The addition of wording that clarifies that the ECC count shall be given aloud commencing with "1" then "5, 10, 15, 20, 25, 26, 27, 28, 29, 30", or any other variation starting with "1 and ending with 30", over an approximate 20 second period.

3.5.2 (a) & 3.5.7 (a) - The points allocation for the scenario tasks to be increased from 40 to 60 points to allow for more detailed scoring of this section. Total maximum points shall now be 120.

3.5.5 (c) - The Open Patrol Competition draw has been reviewed and the positions clarified/re designated.

3.5.5 (c) - The U17 Patrol Competition draw has been reviewed and the positions clarified/re designated.

3.5.12 (d) & (e) - The Patrol Competition Scenario Task scoring for the scenario is further clarified to reflect the scenario task increase.

Appendixes B & C - It is clarified that Judges are not to confer on either major or minor points deductions. All judges need to have independently marked the major error for it to be accepted. Other amendments are also in the appendixes to reflect the changes to procedures.

### **3.1 GENERAL**

- (a) SLSA conducts many competitions that highlight the skills involved in rescue, resuscitation and first aid.
- (b) Details of lifesaving competition events are described in this Section and in separate Manuals and bulletins which may be issued from time to time.
- (c) SLSA reserves the right to introduce equipment and gear to assist in the judging of competitor performance in lifesaving events.

### **3.2 RESCUE & RESUSCITATION**

- (a) The Rescue & Resuscitation (R&R) competition provides the opportunity for SLSA members to demonstrate in a competitive manner some Rescue and Resuscitation methods.
- (b) The rules and regulations of the Rescue and Resuscitation event are encompassed within the Rescue & Resuscitation Competition Manual and subsequent bulletins.

### **3.3 INFLATABLE RESCUE BOAT (IRB) COMPETITION**

#### **3.3.1 Introduction**

- (a) The aims of Inflatable Rescue Boat (hereafter referred to as 'IRB') competition are to:
  - (i) Improve the prowess of IRB drivers and crewpersons (hereinafter collectively referred to as "crew").
  - (ii) Encourage crews to correctly equip and maintain their IRB and motors for optimum safe performance and reliability for both lifesaving patrol duties and competition.
  - (iii) Allow crews to demonstrate their techniques and their abilities to perform a rescue.
  - (iv) Bring crews together to discuss and improve IRB techniques and operations.
  - (v) Promote safety awareness techniques for the crew and patients in simulated rescue scenarios.
- (b) All IRB competition participants acknowledge and agree that:
  - (i) They each release and will release SLSA from all claims that they have or may have had but for this release arising from or in connection with their membership of SLSA and/or participation in any SLSA authorised or recognised competition or activity whether conducted under this Manual or otherwise.
  - (ii) They each indemnify and will keep indemnified SLSA to the extent permitted by law in respect of any claims arising as a result of, or in connection with their membership of SLSA and/or participation in any SLSA authorised or recognised competition or activity (whether conducted under this Manual or otherwise).
  - (iii) In paragraphs (a) and (b) above the word "claims" means and includes any action, suit, proceeding, claim, demand, damage, penalty, cost or expense howsoever arising but does not include a claim in respect of any action, suit, etc. made by any person entitled to make a claim under a relevant SLSA insurance policy or under the SLSA constitution or regulations.
  - (iv) The rules contained in this manual are made for the purpose of ensuring a safe and fair system or framework within which surf lifesaving competitions are to be regulated and conducted.

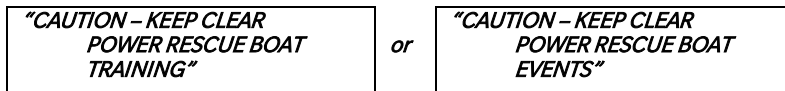
#### **3.3.2 General Conditions**

##### **3.3.2.1 Safety Essentials**

- (a) **WARNING:** IRB competition can be inherently dangerous. IRB competition participants acknowledge that they are exposed to certain risks during IRB competition including but not limited to leg, spinal and neck injuries, physical exertion, contact with the IRB, temperature, weather and water conditions and even drowning. IRB competition

participants acknowledge that accidents can and often do happen which may result in IRB competition participants being injured or even killed. All members through their participation in IRB events agree with, acknowledge and understand this warning and accept and assume the inherent risks in IRB competition.

- (b) Safety procedures – Course Judges will monitor and observe all driving, operating, safety practices and techniques. Should such practices and techniques be considered to be unsafe, dangerous or contrary to the rules or procedures of the event the Course Judges have the authority to immediately disqualify the offending competitor/s from the event and/or issue a safety infringement. Recommendation for further penalties and/or referral to the carnival disciplinary committee may also be considered.
- (c) Signs or banners shall be displayed to provide a 50-metre buffer zone on either side of the competition area. These may be the same signs used to indicate IRB training and shall be a minimum of 1 metre x 1 metre. For example:



### 3.3.2.2 Pre Carnival Safety Briefing

- (a) A pre carnival safety briefing may be conducted in conjunction with the officials, coaches and team managers before the commencement of IRB competition. The following items may be included:
  - (i) An explanation of all the safety procedures that shall be observed by all competitors.
  - (ii) Patient care and indicative water temperature.
  - (iii) Identification of the location of emergency and first aid areas during the competition.
  - (iv) Forecast of surf and weather conditions for the competition period, and any inherent dangers.
  - (v) Safety and rescue plan and, contingency relocation plan.
  - (vi) Attention shall be drawn to *Section 1 – Competition Safety* in the Surf Sports Manual.

### 3.3.2.3 Safety Infringements

- (a) A strong emphasis will be placed on safe driving, crewing and patient safety practices. All competitors must complete each event in a safe and controlled speed and manner or will face immediate disqualification from the event, and/or issue of a safety infringement and consideration for further penalties.
- (b) A safety infringement shall be issued to any competitor deemed to have committed an unsafe practice. This will result in immediate disqualification of the competitor and their entire team (i.e. crew and patient/s) from the event in which the infringement occurred. The name of the competitor and the details of the infringement shall be logged through the safety infringement register of the relevant State and National Office.
- (c) If a competitor receives more than one safety infringement in any one competition they shall be disqualified from the entire competition.
- (d) Should a history of safety infringements be identified by an SLSA office or official in a twelve month period, the matter shall be referred to the relevant state or national officer/s for consideration of further penalties or disciplinary action.

### 3.3.2.4 Competitor Pre-Requisites

At the date of entry closure for the competition to be contested:

- (a) Drivers are required to:
  - (i) Be a minimum of seventeen years of age as at the date of competition.

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- (ii) Hold their relevant state/territory maritime licence required to operate an IRB.
- (iii) Hold their IRB drivers award, be currently proficient as required by SLSA and have logged twenty (20) hours specific in-water IRB competition driving training under the supervision of a currently licensed IRB Surf Coach.
- (iv) Be endorsed by a currently licensed IRB Surf Coach as being competent for IRB competition.

**Note:** In all training and competition it is compulsory for drivers to wear high visibility (conspicuous colour) SLSA approved level 50 Australian Standard (AS4758) lifejackets or Type 2 (AS1499-1996) lifejackets. (Level 50S lifejackets unless listed on the SLSA Approved Gear and Equipment List are not approved.) It is not required for high visibility safety vests to be worn over the top of lifejackets. See also Section 2 of the Surf Sports Manual.

(b) Crewpersons are required to:

- (i) Be a minimum of sixteen years of age as at the date of competition.
- (ii) Hold their IRB crewpersons award, be currently proficient as required by SLSA and have logged twenty (20) hours specific in-water IRB competition driving or crewing training under the supervision of currently licensed IRB Surf Coach.
- (iii) Be endorsed by a currently licensed IRB Surf Coach as being competent for IRB competition.

**Note:** In all training and competition it is compulsory for crewpersons to wear high visibility (conspicuous colour) SLSA approved level 50 Australian Standard (AS4758) lifejackets or Type 2 (AS1499-1996) lifejackets. (Level 50S lifejackets unless listed on the SLSA Approved Gear and Equipment List are not approved.) It is not required for high visibility safety vests to be worn over the top of lifejackets. See also Section 2 of the Surf Sports Manual.

(c) Patients are required to:

- (i) Be a minimum of fifteen years of age before October 01 in the season the competition is being conducted.
- (ii) Hold their IRB crewpersons award, be currently proficient as required by SLSA and have logged twenty (20) hours specific in-water IRB competition driving or crewing training under the supervision of currently licensed IRB Surf Coach.
- (iii) Be endorsed by a currently licensed IRB Surf Coach as being competent for IRB competition.

**Note:** In all training and competition it is compulsory for patients to wear high visibility (conspicuous colour) SLSA approved level 50 Australian Standard (AS4758) lifejackets or Type 2 (AS1499-1996) lifejackets. (Level 50S lifejackets unless listed on the SLSA Approved Gear and Equipment List are not approved.) It is not required for high visibility safety vests to be worn over the top of lifejackets. See also Section 2 of the Surf Sports Manual.

**Note 2:** The wearing of approved helmets is compulsory for patients in all events (other than the Rescue Tube Race). IRB patients are to wear helmets in both training and in competition. See also Section 2 of the Surf Sports Manual.

(d) Handlers, at the date of competition, are required to:

- (i) Be a minimum of fifteen years of age before October 01 in the season the competition is being conducted.
- (ii) Hold the IRB crewpersons certificate and be currently proficient as required by SLSA.
- (iii) Be a member of the same club or team as the crews and be entered at the competition (exemption may be given by the Referee for a member of another club or team to be a Handler provided that the Handler is entered at the competition).

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- (iv) Wear a competition cap and shall be required to wear a distinctive high visibility pink, orange, yellow, green or red coloured vest as determined by SLSA (or relevant SLS Event Organiser) if entering the water beyond knee depth.

Alternatively, handlers may wear a high visibility (conspicuous colour) SLSA approved level 50 Australian Standard (AS4758) lifejacket or Type 2 (AS1499-1996) lifejackets. (Level 50S lifejackets unless listed on the SLSA Approved Gear and Equipment List are not approved.) It is not required for high visibility safety vests to be worn over the top of lifejackets.

- (v) Comply with all instructions of the officials.
  - (vi) Make every effort to ensure that they, or the equipment that they are handling, does not impede another crew, otherwise both their competitor and the Handler may be subject to disqualification.
- (e) Competitors should be conversant with all current specifications, competition rules and event conditions etc. pertaining to IRB competition and comply accordingly. Attention is also drawn to other relevant sections of the Surf Sports Manual including *Section 2 – General Competitive Conditions* and any other relevant circulars or bulletins that must also be complied with.

#### 3.3.2.5 Entry Limitations

- (a) IRB competition may be conducted in different categories of age, grade and gender.
- (b) Apart from IRB Relay events, a competitor may not compete or nominate to compete in more than eight events at any one competition. IRB Relay events may be entered in addition to this eight event maximum.
- (c) A Driver and/or crew may compete in a particular event once e.g. a driver cannot compete in an event in one team as a driver and compete again in the same event as a driver or crewperson in a separate team.

**Note:** This does not preclude an eligible driver, crew or patient from the same team swapping roles in different rounds of the same event.

- (d) If eligible to compete in multiple grades or age categories, drivers and crewpersons may do so, but may only compete in a particular event once e.g. open male rescue is a different event to the under 23 male rescue.
- (e) IRB patients are to be considered as gender neutral with respect to their participation in male and female IRB events.
- (f) Patients may compete in any grade, age or gender category events but may only compete in a particular event once.
- (g) Attention is also drawn to other relevant sections of the Surf Sports Manual including *Section 2 – General Competitive Conditions* and any other relevant circulars or bulletins which must also be complied with.

#### 3.3.2.6 Equipment Requirements, Scrutineering and Compliance

- (a) IRB competition equipment must be either club owned or provided on a pooled basis by SLSA.
- (b) All IRBs and equipment shall comply with the specifications of SLSA, scrutineering conditions and rules as specified by SLSA through circulars and bulletins.
- (c) All IRBs must have an “Approved Surf Rescue Craft” plate affixed.

**Note:** It is permitted to use wax on the motor, IRB and the floor etc. to improve driver and crew grip of their craft.

#### 3.3.2.7 The Course

- (a) The course for IRB competition shall be set at the discretion of the Referee. (See Appendix A).

- (b) A “lane” is defined as an area centred on a line of sight from the “beach position marker”, located on the “start/finish line”, and the relative “turning buoy”.
- (c) Lanes are bounded by “lane marker” poles (typically red or orange in colour) that are placed in a line parallel to start/finish line and approximately 10 metres from the water edge. These poles form the “changeover line” used for the tag in the teams and relay events. The beach position markers are placed in the centre of the lane and approximately 5 metres behind the changeover line.
- (d) The turning buoy shall normally be set at a minimum measured distance of 120 metres from the end of knee depth water at the low tide mark and taking into account varying conditions such as sandbars, exclusion of holes and rips, surf conditions, prevailing winds and safety factors.
- (e) The “patient pick-up buoy” for the rescue, mass rescue and teams rescue events is positioned approximately 10 metres directly behind the turning buoy.
- (f) The “rescue tube patient buoy” for the rescue tube event is positioned approximately 25 metres directly behind the turning buoy.

### **3.3.2.8 Course Variations**

- (a) Water finish – The team is deemed to have finished once any part of the hull of the IRB crosses the finish line from the seaward side between the two finishing flags/poles.
- (b) Curved beach start – Crews are positioned to take into account the curved nature of the beach.
- (c) Curved beach finish – The driver shall be required to run up to the start/finish line and raise the team’s beach position flag above their head whilst remaining on their feet.
- (d) Electronic finish – The driver shall activate an electronic device at the start/finish line to register the finish and, be on their feet when the device is activated.

### **3.3.2.9 Administration and Officials**

- (a) Events may be held separately or as part of a surf competition and, as such, will come under the overall control of the Referee/Sectional Referee. The Referee shall have knowledge of SLSA Surf Sports Manual, relevant bulletins and circulars regarding the competition and IRB operations.
- (b) Other officials shall be appointed to assist the conduct of the competition. In addition, specialist advisers (e.g. hull and motor experts etc.) may be appointed to assist SLSA.

### **3.3.3 Procedure**

#### **3.3.3.1 Placing of Patients**

- (a) Patients shall be taken to sea by either the duty boats or their own crews.
- (b) If crews take out their patients they may be transferred to the duty boats.
- (c) Patients shall be placed in the water at their allocated patient pick-up buoy. For the rescue tube event the patient shall be placed at the allocated rescue tube patient buoy.
- (d) Patients may hold onto their buoy until the patient pick-up. Patients are not permitted to attempt to move the buoy in any direction to gain an advantage. For the pick-up they shall release all contact with the buoy and position themselves clear of and behind their pick-up buoy on the seaward side.
- (e) In the mass rescue and teams events the second patient will wait on the beach side of the pick-up buoy and move to the seaward side of the buoy after the first patient has been picked up and the IRB has crossed back to the shoreward side of the pick-up buoy.

#### **3.3.3.2 Preparing for the Start**

- (a) Competitors in IRB events shall be assembled in the marshalling area. When entries are checked the Marshall shall inform each team of their allocated lane.



- (b) Crews are able to claim bonus time. This is an optional concession, provided at the discretion of the Referee, for crews at the start of events. Each club is allowed a maximum of five minutes bonus time per day of competition, which may be claimed in a minimum of one-minute increments.

**Note:** Once crews are in the “set” position for the start (as defined in Section 2 – General Competitive Conditions, Rule 2.19) no (further) bonus time can be requested before that race. Should IRB equipment be damaged by waves while in the set position and before the start the Referee may, at their discretion, allow for the equipment to be replaced or quickly repaired before proceeding with the start without the loss of bonus time.

- (c) On command from the Starter (usually by whistle), the crew and IRB shall proceed to the water’s edge of their allocated lane. Check Starter/s may be utilised to guide crews to their starting position. Note: This command is to be regarded as the commencement of the “set” position.
- (d) The IRB shall be positioned directly in front of the crew’s respective start/finish markers. Handlers may assist with the positioning of the IRB.
- (e) A maximum of two handlers may hold the IRB into the “set” position and assist keep it stationary for the start. The set position is defined as the IRB being held stationary, with the bow facing seaward perpendicular to the wave line, and wholly within its lane in a depth of water to enable a start as determined by the Referee. The motor may be in or out of gear.  
**Note:** If conditions warrant, the Referee may increase the number of handlers to four.
- (f) The driver and crewperson shall be positioned adjacent to their respective beach position marker in readiness for a race start with their toes on or behind the start/finish line. If a lane coloured vest is supplied it must be worn by the driver/s as directed by the Referee.

### 3.3.3.3 The Start

- (a) On the starter’s signal the driver and crew shall cross the start/finish line and proceed to the IRB. A break shall be adjudicated as defined in Rule 2.19 ‘Starting of Events’ in the Surf Sports Manual.
- (b) Any handlers used must be positioned at either side of the IRB in control of the IRB with at least one hand and must not be touching any part of the motor or fuel cell, fuel line assembly, and safety chain when the starting signal sounds.

**Note:** The starting signal is the signal or command that indicates “Go” as defined in Section 2 – General Competitive Conditions, Rule 2.19.

- (c) After the starting signal sounds handlers may move the IRB to assist with water depth positioning of the IRB and to maintain the bow seaward and perpendicular to the wave line but must not otherwise turn the IRB to an angle to assist the driver and/or crewperson entry to the IRB. At the time the driver or crew first makes visible contact with the boat handlers shall not further move the boat and shall ensure that the boat is in the “set” position
- (d) Handlers must visibly release all contact with the boat once the driver and/or crew touches the IRB and may not assist the driver and/or crewperson further.
- (e) The driver and crewperson, at their own discretion, shall board the IRB. This decision is ultimately the responsibility of the driver and crewperson and as such IRB crews cannot protest the start.
- (f) The driver starts the motor only when fully aboard the IRB. Only the driver may start the motor and the crewperson must be in contact with the IRB at the time the motor is started. During the course of any IRB race only the driver is permitted to touch any part of the motor once the starting signal sounds.
- (g) The motor may be started either in gear or out of gear. If starting the motor in gear and using one hand to start, the driver must maintain control of the motor throttle grip with their other hand. If a two handed start is used the motor must be in neutral.

- (h) During and immediately after starting the motor, the IRB must not move in an uncontrolled or unsafe fashion.

### **3.3.3.4 Proceed To and From Buoys**

- (a) The decision to proceed to sea is ultimately the responsibility of the driver and crewperson.
- (b) After entering the IRB the driver and crewperson must maintain their “normal position” as described below. This must be done in a safe manner with three secure points of contact maintained at all times.
- (c) The normal driver position is defined as right foot in the foot strap, left hand holding the driver pontoon handle, right hand holding motor throttle grip, and seated on the pontoon.
- (d) The normal crewperson position is the left foot in the foot strap, left hand holding the bow rope handle, right hand holding the inner pontoon (boarding) handle or lifeline rope, and seated on the pontoon.
- (e) The normal patient position is defined as crouched inside the IRB and holding onto the pontoon lifeline rope with at least one hand. The patient must not be seated on the floor or pontoon of the IRB.
- (f) The only exceptions to these normal positions are detailed below and must be done so in a safe manner whilst maintaining three secure points of contact at all times.
  - (i) The crewperson and/or driver may leave their normal position to drag the IRB over a sand bar if the motor is electrically dead, or in the neutral position if left running.
  - (ii) The crewperson may rise from the seated position to absorb the impact of negotiating a wave or swell.
  - (iii) The crewperson may move into the locked-in crewing position (*as described in the current edition of the SLSA Powercraft Training Manual*) when “punching” a wave.
  - (iv) The crewperson may move their weight for turning or negotiating shallow water.
  - (v) The crewperson may move their weight and adjust their securing points for buoy turns.
  - (vi) The crewperson may leave their normal position for all patient pickups.
  - (vii) The driver may leave their normal position for the rescue tube pick-up.
  - (viii) A momentary shift from the respective normal position of the driver, crew or patient(s) provided that the team member does not otherwise become dislodged from their correct position.
- (g) The driver and crewperson must maintain control of the IRB at all times during the competition to ensure it moves in a safe and controlled manner.
- (h) The leading IRB, whilst proceeding to the buoys, shall have right-of-way and the trailing IRB must take evasive action by turning or giving way to prevent collision.

### **3.3.3.5 The Turn and Patient Pickup**

- (a) The turn and patient pick-up process shall be as follows for the rescue, mass rescue and teams event:
  - (i) Crews must not steer a wide course or delay a turn that impedes the progress of another crew or forces them from their true course.
  - (ii) All buoys shall be turned anti clockwise and be maintained on the port (left hand) side of the IRB throughout turns. The buoy must not be forced under the pontoon during any part of a turn or patient pickup.

**Note:** For judging purposes should any buoy become fully submerged during a turn and/or patient pick up the crew shall be disqualified.

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- (iii) The IRB shall fully turn the allocated turning buoy and proceed to the allocated patient pick-up buoy aligning the patient to the port side.
- (iv) With the exception of the Rescue Tube Race (where the patient pick up procedure is described in the event rules), the patient will face towards the IRB in preparation for the patient pick-up. The patients hands must be clasped together or one hand held to the opposite wrist during the pick-up.
- (v) The patient pick-up shall be completed in a safe manner, on the port side of the IRB and on the seaward side of the pick-up buoy. The driver and crewperson may both assist with the patient lift.
- (vi) Once the patient pick up is completed the IRB shall complete the turn pass back to the beach side of the patient pick-up buoy and return to shore keeping their turning buoy on their left hand side. In the mass rescue this procedure is repeated for the second patient pick-up.
- (vii) The patient pick up is deemed to be completed when no part of the patient's body is in the water (but not necessarily completely inside the boat). For all IRB events, except for the rescue tube event, this must be completed before the entire IRB has passed the shoreward side of the patient pick - up buoy.
- (viii) The IRB shall not turn around any buoy other than the allocated turning buoy and the allocated patient pick-up buoy.
- (ix) If an IRB crew misses the patient pick-up they may continue to their respective turning buoy a second time, perform a 180 degrees turn around it and re-attempt the patient pick-up as described above.

#### **3.3.3.6 The Exit and Finish**

- (a) The IRB shall beach and remain inside the allocated lane until the driver has exited the IRB.
- (b) When beaching the IRB, the driver must throttle the motor back to idle and stop the motor, i.e. render it electrically dead by activation of motor kill switch, prior to the IRB being grounded on the shore edge. If a motor kill switch safety lanyard is used it must remain attached to the motor.
- (c) The driver, crewperson or patient must not be dislodged from their normal positions by grounding the IRB with excessive speed or beaching at an awkward angle. The crewperson must be seated in an upright position in the IRB during the beaching or grounding. It is not permissible to lie on any part of the IRB (refer also Rule 3.3.3.4(d)).
- (d) The motor must be stopped, i.e. electrically dead by activation of the motor kill switch, before the driver, crewperson or patient exits the IRB. The patient must not exit prior to the driver. The crewperson may alight before the driver to steady the IRB if done so in a safe manner but only after the motor has been made electrically dead. The motor may be left in gear. The crewperson may use the side lifting handles to exit the IRB.
- (e) When exiting the IRB, the driver must keep both feet on the IRB floor until the motor is electrically dead by activation of the motor kill switch.
- (f) The driver must remain seated until both feet are swung outside the IRB. The definition of "outside" is past the centreline of the port side pontoon.
- (g) The driver must have completed their exit aft of the IRB front lift handles and must not step off any part of the IRB or floorboard when exiting.
- (h) The driver must exit in a safe and controlled manner and must not fall during the exit process as a result of poor technique, or the IRB being grounded with excessive speed. The "exit process" starts when the driver begins to leave their normal driving position and finishes when the driver regains normal running composure (i.e. not stumbling) after the momentum of the grounding, beaching or forward velocity of the IRB has dissipated. A fall is defined as when any part of the driver other than his/her feet touches the ground.

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- (i) The crewperson shall remain in control of the IRB while the driver runs to the start/finish line. The patient may assist the crewperson in the control of the IRB.
- (j) The driver must be outside the IRB and on his/her feet when they cross the finish line at the end of an event. The exception to this is if the Referee or his/her delegate has advised that the finish will be a “water finish” as defined in Rule 3.3.2.8.
- (k) The finish is judged on the chest of the driver when they cross the start/finish line. **To assist with the finish judging process IRB teams are requested to stand away from the start/finish line until all teams have completed the course.**

**Note:** Unless otherwise specified (e.g. a wet finish in Rule 3.3.2.8 (a)) a team cannot drive their IRB across a finish line to record a finish result. The driver must be on their feet and outside the IRB when they cross the finish line. Should an IRB crosses a finish line the driver may exit the boat and pass to the seaward side of the start/finish line and re-cross the line on their feet to record a finish.

#### **3.3.3.7 The Changeover (Mass, Teams and Relay Events Only)**

- (a) During all changeovers the crewperson must maintain contact with the IRB and control it in a safe manner. In changeovers the crewperson and patient, as detailed under the relative event descriptions, may turn the IRB around and may place the boat at an angle to assist driver entry if it is safe to do so.

**Note:** When completing the changeover the driver, crew and patients must follow the exit procedures detailed in Section 3.3.3.6.

- (b) For the changeover in the teams and relay events, **the first and second driver must visibly tag (refer section 2.28 for definition of a tag). To do this** the first driver proceeds to the start/finish line, rounds their respective beach position marker (see Rule 3.3.2.7(c)) and visibly touches (tags) **with** the second driver who is positioned with their toes on or behind the shoreward side of the changeover line and to the seaward side of the beach position marker. The outgoing driver is not required to be stationary but the tag must occur within this changeover zone.

#### **3.3.4 IRB Events – Description**

##### **3.3.4.1 Event No. 1 – IRB Rescue Tube**

- (a) Each team shall comprise one driver, one crewperson and one patient.
- (b) The patient is positioned as described in *Procedure Rule 3.3.3.1*.
- (c) For the purpose of this event only, the rescue tube may be either in the normal stowage position or under the spray dodger with the harness looped over the crewpersons bow rope.
- (d) The start shall be as described in *Procedure Rule 3.3.3.3*.
- (e) After the break has been negotiated the crewperson, whilst maintaining a secure position, shall don the rescue tube harness in a safe manner prior to rounding the turning buoy.
- (f) The IRB shall round the turning buoy anti-clockwise and then must remain wholly, i.e. all parts of the IRB, on the beach side of the turning buoy until the patient pick-up has commenced (*see Rule 3.3.4.1 (k)*).
- (g) After the IRB has rounded the turning buoy the crewperson shall enter the water from the port side maintaining the turning buoy on their left. The rescue tube shall be unclipped and held in a secure grip. It must be ensured that no part of the rescue tube, lanyard or harness snags the IRB or driver.
- (h) The crewperson shall then swim to their respective patient keeping their allocated turning, patient pick-up and rescue tube patient buoys on their left hand side.
- (i) The rescue tube must then be fastened around the patient and under both arms by the crewperson and/or patient. The patient may clip themselves into the tube unaided. The crewperson does not have to break stroke during this process as long as the clip on the

rescue tube is secured to an o-ring prior to the patient crossing to the shoreward side of the rescue tube patient buoy.

- (j) The crewperson completes their 180 degrees anti-clockwise turn around the buoy and tows the patient to the IRB maintaining the patient pick-up buoy and turning buoy on their left hand side. The patient is permitted to assist by kicking, and sculling with arms under the surface, but must not swim with an out-of-water arm recovery. The patient must not be towed on their stomach. The use of swim fins, hand fins or other non-approved aids is not permitted.
- (k) Once the driver makes visible physical contact with the patient (not the rescue tube harness) the patient pickup is deemed to have commenced and the IRB may cross to the seaward side of the turning buoy.
- (l) The crewperson and patient shall board the IRB on the port side, with or without assistance from the driver. The driver may release the motor throttle grip and stand to assist the pick-up providing the motor is in neutral.
- (m) The IRB shall continue anti-clockwise around the turning buoy. The patient and crewperson must be completely out of the water prior to the IRB proceeding back to the beach side of the turning buoy.
- (n) The rescue tube shall remain around the patient and the crewperson shall remove the harness and pass it to the patient. The patient must have hold of the lanyard and harness before the driver exits the IRB. The patient must keep a secure grip on the lanyard and harness and ensure that they do not snag anything within the IRB, extend past the transom or pass through either of the self-bailers.
- (o) The crew shall return to shore, as described in *Procedure Rule 3.3.3.4*.
- (p) The finish shall be as described in *Procedure Rule 3.3.3.6*.

#### **3.3.4.2 Event No. 2 – IRB Mass Rescue**

- (a) Each team shall comprise one driver, one crewperson and two patients.
- (b) Both patients are positioned as described in *Procedure Rule 3.3.3.1*.
- (c) The start shall be as described in *Procedure Rule 3.3.3.3*.
- (d) The crew shall proceed out to sea, pick up their first patient and then return to shore, as described in *Procedure Rule 3.3.3.4 and Rule 3.3.3.5*.
- (e) The driver shall exit as described in *Procedure Rule 3.3.3.6*. At the shore the crewperson, controls the IRB as described in *Procedure 3.3.3.7(a)* and may turn it around. The patient must exit the IRB, after the driver exits. The patient is permitted to assist the crewperson to turn and hold the position of the boat.
- (f) The driver proceeds to the start/finish line, rounds their respective beach position marker and returns to the IRB. The driver may also assist the crewperson to turn the IRB around. Should the first patient have assisted the crewperson turn and hold the position of the boat the patient must release contact when the driver makes contact with the boat. The driver must not start the motor until the first patient is clear of the boat.  
  
The patient must then place themselves in a position where they do not impede the conduct of the race or the judging of the event.
- (g) The IRB shall be relaunched and restarted and the crew will proceed out to sea to pick up their second patient and then return to shore, as described in *Procedure Rule 3.3.3.4 and Rule 3.3.3.5*.
- (h) The finish shall be as described in *Procedure Rule 3.3.3.6*.

#### **3.3.4.3 Event No. 3 – IRB Teams Rescue**

- (a) Each team shall comprise of two drivers, two crewpersons and two patients.
- (b) The patients are positioned as described in *Procedure Rule 3.3.3.1*.

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- (c) The start shall be as described in *Procedure 3.3.3.4 and 3.3.3.5*.
- (d) The second driver and second crewperson shall position themselves at the changeover line.
- (e) The crew shall proceed out to sea, pick up their first patient and then return to shore, as described in *Procedure 3.3.3.4 and 3.3.3.5*.
- (f) The driver, crewperson and patient shall exit the IRB as described in *Procedure Rule 3.3.3.6(d)*. The second crewperson crosses the changeover line and proceeds to the IRB once the driver has left the IRB.
- (g) The first crewperson turns the IRB and must maintain control of it as described in *Procedure Rule 3.3.3.7(a)*. Unless otherwise permitted by the Referee a maximum of two team members are permitted to maintain contact (control) with the IRB at any one time.  
**Note:** The first crewperson/first patient must retire and stand clear of the IRB when contact (control) with the IRB is released.  
**Note:** The patient/first crewperson that releases contact with the IRB must retire and stand clear of the IRB.
- (h) The driver proceeds to the start/finish line, rounds their respective beach position marker and visibly tags the second driver who is positioned with their toes on or behind the shoreward side of the start/finish line and to the seaward side of the beach position marker. The outgoing driver is not required to be stationary but the tag must occur within this changeover zone.
- (i) After the tag the second driver proceeds to the water's edge to relaunch and restart the IRB. The one remaining first crewman/patient must release contact with the IRB when the driver makes contact with the IRB. The second driver must not start the motor until the one remaining first crewperson/patient are clear of the boat.  
**Note:** The first crewperson and first patient must place themselves in a position where they do not impede the conduct of the race or the judging of the event.
- (j) The second crew will proceed out to sea, pick up their second patient and then return to shore, as described in *Procedure Rule 3.3.3.4 and Rule 3.3.3.5*.
- (k) The finish shall be as described in *Procedure 3.3.3.6*.

#### **3.3.4.4 Event No. 4 – IRB Rescue**

- (a) Each team shall comprise one driver, one crewperson and one patient.
- (b) The patient is positioned as described in *Procedure Rule 3.3.3.1*.
- (c) The start shall be as described in *Procedure Rule 3.3.3.3*.
- (d) The crew shall proceed out to sea, pick up their patient and then return to shore, as described in *Procedure Rule 3.3.3.4 and Rule 3.3.3.5*.
- (e) The finish shall be as described in *Procedure Rule 3.3.3.6*.

#### **3.3.4.5 Event No. 5 – IRB Relay**

- (a) This event is a continuous relay involving the four events detailed above. The four legs of this event shall be conducted in the order: 1 - IRB Rescue Tube, 2 - IRB Mass Rescue, 3 - IRB Teams Rescue and 4 - IRB Rescue.
- (b) Six patients shall be taken to sea by the competing club's nominated "patient boat".
- (c) The patient for the first leg, i.e. the Rescue Tube is positioned as described in *Procedure Rule 3.3.3.1*. The five other patients wait in the club's patient boat for their respective leg. The patient boat must remain clear of and on the seaward side of the rescue tube patient buoy for the duration of the event.
- (d) The start shall be as described in *Procedure Rule 3.3.3.3*.

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- (e) Each leg shall be as per the individual event descriptions except for the start of legs two, three and four and the finish of legs one, two and three which shall be changeovers as detailed in the Teams Rescue event description *Rule 3.3.4.3(i)*.
- (f) Patients for legs two, three and four shall swim to their respective pick-up position, as described in *Procedure Rule 3.3.3.1*, after all patient pick-ups for the proceeding leg are completed as per *Procedure Rule 3.3.3.5*.
- (g) After completing their respective leg of the race, drivers, crew persons and patients must place themselves in a position where they do not impede the conduct of the race or the judging of the event.

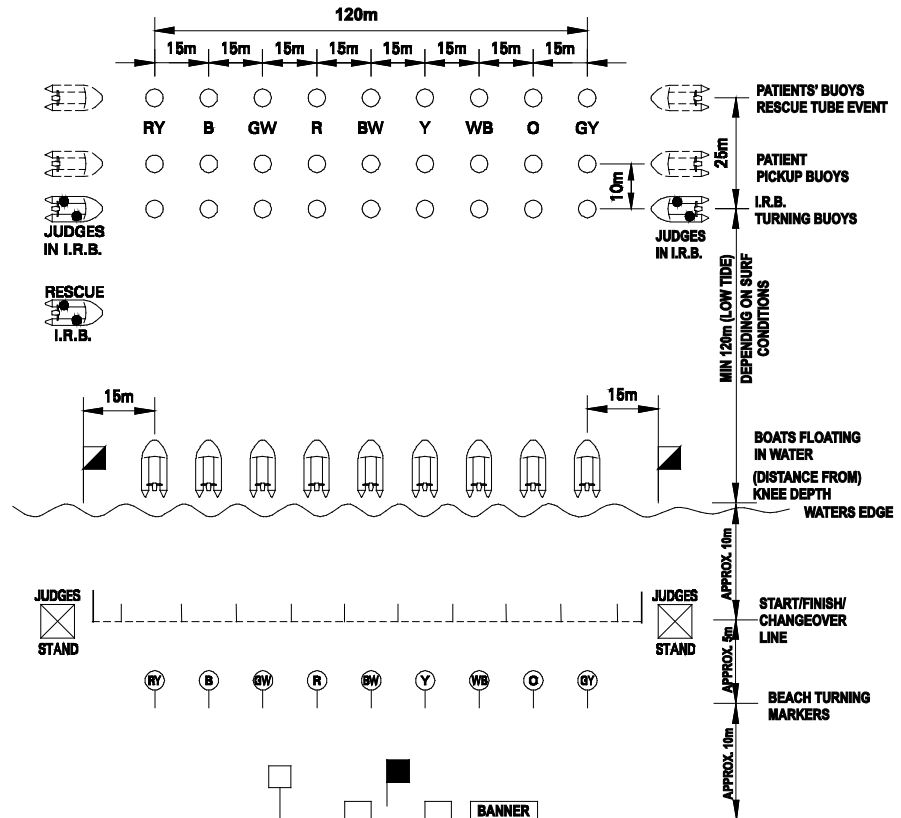
**Note:** In the first leg of the race the rescue tube shall remain around the first patient after the tow and this patient must have hold of the lanyard and harness before the first driver exits the IRB. This patient must then exit the boat and ensure that the rescue tube, lanyard or harness remains well clear of the IRB. As such the first patient (only) is not permitted to assist turn and/or hold the IRB after their leg of the race. After moving well clear of the IRB the first patient may remove the tube and place it in a safe position that does not impede the conduct or judging of the race.

- (h) The finish shall be as described in *Procedure Rule 3.3.3.6*.

#### **3.3.5 Disqualifications**

- (a) Crews shall be disqualified if found to have:
  - (i) Failed to comply with any matter contained in the Surf Sports Manual, bulletins or circulars relevant to the event.
  - (ii) Failed to comply with the event procedure, description and/or rules detailed in this document.
  - (iv) Interfered with, or used any components of the course to gain an unfair advantage.
  - (vi) Attempted to start an event or negotiate the surf in subsequent legs with the IRB not correctly assembled.

**APPENDIX A – TYPICAL IRB COMPETITION AREA**



**LEGEND**

- |  |   |   |   |
|--|---|---|---|
|  | ORANGE & BLUE AREA FLAGS                            |  | LANE MARKERS (RED OR ORANGE)                                    |
|  | PRE-START FLAG OR TIMING LIGHTS<br>GREEN-YELLOW-RED |  | BUOY COLOURED BEACH FINISH AND<br>BEACH TURNING POSITION MARKER |
|  | I.R.B. DANGER WARNING SIGN                          |  | "I.R.B. SIMULATED RESCUE EVENTS"                                |

**FIGURE 1: TYPICAL INFLATABLE RESCUE BOAT COMPETITION AREA**

(Distances approximate only)

(NOTE: The beach setup relative to the positioning of the buoys may be adjusted dependent upon the prevailing surf conditions)



### 3.4 CHAMPION LIFESAVER

#### 3.4.1 Aim

- (a) The Champion Lifesaver event provides individual SLSA members the opportunity to demonstrate in a competitive manner the physical, lifesaving and knowledge skills required of a Lifesaver.

**Note:** Where Manuals or other documents are referenced for the conduct of this event the written word takes precedence over any photographs or diagrams. In addition, when words, photographs or diagrams are “silent” on a process, competitors shall not be penalised for their methodology in completing required actions.

#### 3.4.2 Equipment

- (a) Each competitor shall provide as a minimum the following equipment, which shall be available for use by the competitor at the commencement of the competition:
- (i) One rescue board or Malibu racing board.
  - (ii) One rescue tube.
  - (iii) One pair of swim fins (optional).
  - (iv) One adult resuscitation manikin.
- (b) All equipment used shall meet SLSA specifications.

**Note 1:** If a rescue board is used in competition it is required only to meet the specification for Malibu racing boards.

**Note 2:** Any manikin provided by the competitor shall not be marked in any way to gain advantage in competition.

**Note 3:** The swim fins shall comply with the following dimensions:

- Maximum 65cm overall length including “shoe” or ankle strap (ankle strap extended).
- Maximum 30cm width at the widest point of the blade.
- Swim fins are to be measured with the shoe or ankle strap extended but not stretched. The swim fins will not be permitted to be used if they do not conform to specifications or if they are considered a safety hazard.

**Note 4:** Event organisers reserve the right to expect competitors to use supplied manikins.

#### 3.4.3 Uniforms

- (a) All competitors are to present themselves for the event wearing their competition cap and costumes as well as comfortable attire for the resuscitation and theory sections (footwear optional), provided such attire does not impede the judging process for the resuscitation section.

#### 3.4.4 Procedure

- (a) The Champion Lifesaver event is determined on a point score basis with the competitor scoring the highest points being declared the winner. The total maximum points available are 120.
- (b) The three sections that comprise the Champion Lifesaver event and allocated maximum points are:
- (i) Physical Skills 40 points
  - (ii) Questionnaire 40 points
  - (iii) Resuscitation 40 points

Competitors must complete 50% or more of the physical events and attempt all theory and resuscitation tasks in order to be eligible for a place. If competitors do not meet these requirements they will be disqualified from the event.

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- (c) The Referee, taking into account the suitability of the area and the conditions, shall determine the order in which the sections are to be conducted.
- (d) Sections may be conducted concurrently, depending on the number of competitors and available time.
- (e) Draws for positions in the physical skills components will be made prior to each race. Similarly draws for competitor position order in the resuscitation section will be made prior to that section.
- (f) The rules, sections, points allocation and procedure for the conduct of the Champion Lifesaver event are detailed in the subsequent paragraphs.

**3.4.5 Physical Skills**

- (a) The Physical Skills section will comprise four components and the maximum points allocation is as follows:
  - (i) Surf Race 10 points
  - (ii) Board Race 10 points
  - (iii) Beach Sprint 10 points
  - (iv) Rescue Tube Race 10 points
- (b) The distances in the Surf Race, Board Race and Rescue Tube Races shall be as per the swim and board sections of the Ironman/Ironwoman events. The start, finish and conduct of these events shall be as per the conventional Swim, Board, and Rescue Tube events.
- (c) The use of swim fins is optional in the Rescue Tube Race and, if used, shall be placed with the Rescue Tube on the Rescue Tube line.
- (d) The Beach Sprint race shall be conducted as per the Beach Sprint event.
- (e) Competitor Limitations for events in heats, semi-finals and finals are outlined in Section 2 of this Manual.
- (f) Each competitor must start in each of the Physical Skills components. Failure to start each component shall result in disqualification from the Champion Lifesaver Competition.
- (g) Failure of a competitor to complete the course within any time limit allocated (refer Section 2) or complete the course correctly will mean that nil points shall be allocated to that competitor in that particular component.
- (h) The first competitor to correctly finish the final of each of the four physical skills components shall be declared the winner of that component. Points allocation for each of the competition components is as follows:

<b>Finish Position</b>	<b>Points</b>
1st	10
2nd	9
3rd	8
4th	7
5th	6
6th	5
7th	4
8th	3
9th	2

**3.4.6 Questionnaire**

- (a) The theory paper section will consist of forty Multiple Choice Questions derived from the current edition of the SLSA Public Safety and Aquatic Rescue Manual and relevant to the minimum qualifications required to compete in the event. A thirty minute time limit shall be allowed.

- (b) The maximum points allocated for each competitor in this section is 40 points. Points allocation for this section of the competition is as follows:

Each question answered correctly                      1 point

### **3.4.7 Practical Resuscitation**

- (a) The practical resuscitation section will comprise the following two parts:
- (i) Part A – Live patient assessment including lateral position, (20 points maximum);
  - (ii) Part B – One person Cardiopulmonary Resuscitation (CPR) on a manikin, (20 points maximum).
- (b) The organising group shall arrange the live patients or specify if clubs are to provide patients.
- (c) The manikin can either be provided by the competitor or pre-arranged with sufficient notice for the organising group to provide.
- (d) No watches are to be worn by any competitors during the resuscitation section.
- (e) The section will commence with a live person assessment including lateral (recovery) position.
- (f) At the conclusion of the live patient assessment the competitor shall maintain their position and await the direction of an appointed official who will give instructions to the competitor to move to the manikin.
- (g) Upon the direction of the appointed official the competitor shall undertake 1 person CPR on a manikin, commencing with ECC, for 5 complete cycles. The time taken to complete the 5 cycles shall be timed.
- (h) At the conclusion of the 5th cycle the appointed official shall declare “Operator halt. The patient is now breathing normally.” The CPR on a manikin section is then concluded, resuscitation shall conclude and no further action is required.
- (i) The procedure and timing for CPR is as follows:
- (i) One complete cycle for 1 person CPR (for all patients) is an External Cardiac Compression (ECC) count of 30 immediately followed by 2 breaths. Each complete cycle is to take approximately 24 seconds with an optimum minimum of 5 cycles taking 2 minutes.
  - (ii) The ECC count shall be given aloud commencing with “1” then “5, 10, 15, 20, 25, 26, 27, 28, 29, 30”, or “1 to 30”, or any other variation starting with “1 and ending with 30”, over an approximate 20 second period.
  - (iii) Immediately following delivery of the 30th compression, the competitor shall move to the head of the patient and deliver 2 inflations in approximately 4 seconds. The competitor will then commence the next cycle.
- (j) The point system for judging this section is designed with an emphasis on judgement of fact. A maximum of 20 points each will be allocated for the two parts of this section. Points will be allotted with deductions as follows:
- Major faults (each)    4.0 points deduction.
  - Minor faults (each)    0.5 points deduction.
  - Timing deductions (manikin)                                      4, 3, 2, 1 or nil points deduction.
- (k) For Part A or Part B of this section, if total deductions exceed the 20 points, the competitor will score zero for that part.
- (l) Refer to Appendix B for additional details on deductions schedule for major, minor and timing faults, in addition to commands given to competitors by officials.

### 3.4.8 Tied Scores

- (a) In the event of equal points at the completion of the competition, the winner shall be decided by a count back system in the following order:
  - (i) Practical Resuscitation Part A
  - (ii) Practical Resuscitation Part B
  - (iii) Questionnaire
  - (iv) Surf Race
  - (v) Rescue Tube Race
  - (vi) Board Race
  - (vii) Beach Sprint
- (b) If a winner cannot be determined by count back then a dead heat will be declared as provided in Section 2 of this Manual.

## 3.5 PATROL COMPETITION

### 3.5.1 Aim

- (a) The aim of the Patrol Competition is to demonstrate how lifesavers work as a team in performing some or all of the skills associated with surf rescue patrol work. Team members in the Patrol Competition must be members of the same club, but not necessarily be from the same club patrol.

**Note:** Where Manuals or other documents are referenced for the conduct of this event the written word takes precedence over any photographs or diagrams. In addition, when words, photographs or diagrams are “silent” on a process, competitors shall not be penalised for their methodology in completing required actions.

- (b) The Patrol Competition includes a number of physical skills, practical and theory tasks involving racing, rescue and/or first aid situations.

### 3.5.2 General

- (a) The Patrol Competition is divided into four sections and the maximum points allocation is as follows:

(i) Physical Skills	20 points
(ii) Theory	20 points
(iii) Resuscitation	20 points
(iv) Scenario Task	60 points

The total of all four sections is 120 points maximum.

Teams must complete 50% or more of the physical events and attempt all theory, resuscitation and scenario tasks in order to be eligible for a place. If teams do not meet these requirements they will be disqualified from the event.

- (b) Teams shall compete against each other in the components of the physical skills section.
- (c) Draws for positions in the two physical skills components shall be made prior to each race, as will the draw for position order for resuscitation and scenario task sections.
- (d) The team with the greatest number of points awarded from all sections will be declared the winner.
- (e) The Referee, taking into account the suitability of the area and the conditions, shall determine the order in which the sections are to be conducted.

- (f) Depending on the number of teams and the availability of times, the sections of the event may, if possible, be conducted concurrently (e.g. Resuscitation and Board/Tube Rescue Relay).
- (g) The organising group shall arrange the live patients or specify if clubs are to provide patients. The organising group shall provide patrol equipment and relevant log books or specify what clubs are to provide for the event. Teams shall provide equipment and uniforms as prescribed for this event.

### 3.5.3 Uniforms

- (a) All team members are to present themselves for the event in the following items of the respective SLSA patrol uniform, worn in conjunction with a club competition cap and team costume:
  - (i) Yellow shirt identified with the words “Surf Rescue” or “Beach Patrol”.
  - (ii) Red Shorts.
- (b) All uniforms must be in good condition.
- (c) Any advertising, lettering etc. on club patrol uniforms shall be in accordance with SLSA’s current policy in respect to Patrol Uniforms. Further, competing teams shall be required to comply with SLSA’s Sponsorship Policy.

### 3.5.4 Equipment

- (a) Each team shall provide as a minimum the following equipment, which shall be available for use by the team at commencement of the competition.
  - (i) One rescue board or Malibu racing board.
  - (ii) One rescue tube.
  - (iii) A first aid kit (refer Appendix C)
  - (iv) One pair of swim fins (optional).
  - (v) One Air Bag Oxygen Resuscitation unit (Air Bag).
  - (vi) One Automated External Defibrillator (AED) Trainer
  - (vii) One adult resuscitation manikin.
  - (viii) A minimum of two SLSA approved Life Jackets to suit IRB Driver and IRB Crewperson to be used during the Open Scenario Task, where the use of an IRB is optional.
- (b) All equipment used shall meet SLSA specifications.

**Note 1:** If a rescue board is used in competition it is required only to meet the specification for Malibu racing boards.

**Note 2:** Any manikin provided by the competitor shall not be marked in any way to gain advantage in competition.

**Note 3:** The swim fins shall comply with the following dimensions:

- Maximum 65cm overall length including ‘shoe’ or ankle strap (ankle strap extended).
- Maximum 30cm width at the widest point of the blade.
- Swim fins are to be measured with the shoe or ankle strap extended but not stretched. The swim fins will not be permitted to be used if they do not conform to specifications or if they are considered a safety hazard.

**Note 4:** Event organisers reserve the right to expect competitors to use supplied manikins.

### 3.5.5 Team (Patrol) Competition

- (a) The Team (Patrol) Competition shall be conducted in Open and U/17 age categories. The Open competition shall consist of six members per team and the U/17 competition shall consist of four members per team as follows:

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- (i) Open – each team shall consist of six competitors who are all proficient SLSA Bronze Medallion/Cert II awardees and are all proficient Advanced Resuscitation Techniques Certificate (ART) holders.

In addition, at least one member of the Open team shall have a Silver Medallion IRB Driver's Certificate (IRBD) and at least one other member shall have either of the following awards:

- IRB Crewperson Certificate; and/or
- Silver Medallion IRB Driver's Certificate (IRBD)

- (ii) U/17 – each team shall consist of four competitors who are all proficient SLSA Bronze Medallion/Cert II awardees and are all proficient Advanced Resuscitation Techniques (ART) Certificate holders.

**Note:** In the U/17 age category there is no requirement for any of the team members to hold IRB qualifications as the preparation and use of the IRB is not included in the U/17 event.

- (b) In both Open and U/17 events all team members shall be involved in a draw to determine their individual team positions for the Board/Tube Rescue Relay and the Resuscitation Sections.

- (c) The Open event team members shall be designated as follows:

- No.1 – “Manikin” Resuscitation Team (First Role – One person CPR Operator)
- No.2 – “Manikin” Resuscitation Team (First Role – Two person CPR, ECC Operator)
- No.3 – “Manikin” AED Operator and Patient Swimmer (Board/Tube Relay)
- No.4 – “Manikin” Resuscitation Team (First Role – Two person CPR, Prepares oxygen equipment and introduces mask)
- No.5 – Live Patient Assessment (First Role – One person CPR Operator) and Tube Rescuer (Board/Tube Relay)
- No.6 – Live Patient Assessment (First Role – Two person CPR, ECC Operator) and Board Rescuer (Board/Tube Relay)

**Note:** The team members shall wear a numbered cap (No's 1 to 6) corresponding with their drawn position.

- (d) The U17 event team members shall be designated as follows:

- No.1 – “Manikin” Resuscitation Team (First Role – One person CPR Operator) and Patient Swimmer
- No.2 – “Manikin” Tube Rescuer and Resuscitation Team (First Role – Two person CPR, ECC Operator)
- No.3 – “Manikin” AED Operator and Board Rescuer
- No.4 – “Manikin” Resuscitation Team (First Role – Two person CPR, Prepares oxygen equipment and introduces mask) and Observer

**Note:** The team members shall wear a numbered cap (No's 1 to 4) corresponding with their drawn position.

- (e) Patrol Competition may also be conducted in other age groups. The conduct and rules for such events shall be promulgated by Bulletin from time to time.

#### 3.5.6 Substitution of Competitors

- (a) The substitution of team members prior to competitors being marshalled is permitted (refer Section 2 – General Competitive Conditions). However, once marshalling has been completed, no further substitution of competitors shall be permitted, for that round, semi-final or final.

#### 3.5.7 Patrol Competition Format

- (a) The Patrol Competition event is determined on a point score basis with the team scoring the highest points being declared the winner. The total maximum points available are 120.

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- (b) Failure of a team (or team member/s) to commence a section or component of the Patrol Competition event shall result in disqualification of the team from the entire event.
- (c) If for some reason the team (or team member/s) do not correctly complete (or complete within the time limit) a section or component, the team will not be disqualified from the total Patrol Competition event. In this case the team will be given zero points for that section/component of the event.
- (d) The competition will consist of the following sections and points allocation:
  - (i) Physical Skills
    - Surf Teams (10 points maximum)
    - Board/Tube Rescue Relay Race (10 points maximum)
  - (ii) Theory
    - Theory (written paper) (20 points maximum)
    - Resuscitation – Live Patient Assessment and Manikin Resuscitation (20 points maximum)
  - (iii) Scenario Task
    - Lifesaving task (60 points maximum)

Details of the sections and components are as detailed in the following paragraphs.

### 3.5.8 Surf Teams

- (a) All team members for Open (six members) and U/17 (four members) shall make up the Surf Team for this component of the event.
- (b) The distance in the Surf Teams race shall be as per the Masters Surf Race. The start, finish, conduct and determination of placings of the Surf Teams race shall be as per the conventional Surf Teams event (refer Section 4 – Swimming Events).
- (c) Refer Section 2 – General Competitive Conditions for the competitor limitations of the total number of competitors in a Surf Teams event.
- (d) A time limit, as defined in Section 2 – General Competitive Conditions, may be set by the Referee. When such a time limit is set, competitors shall be notified prior to the start of the event.
- (e) Total points allocated to each team in the Surf Teams component is as follows:

<b>Finish Position</b>	<b>Points</b>
1st	10
2nd	9
3rd	8
4th	7
5th	6
6th	5
7th	4
8th	3
9th	2

### 3.5.9 Board/Tube Rescue Relay Race

- (a) The team members that have drawn the relevant numbers shall contest this component of the event. The numbers are:
  - (i) Open Team: No's 3, 5 and 6
  - (ii) U/17 Team: No's 1, 2 and 3
- (b) The course shall be set as per the Rescue Tube Event (refer Section 4 – Swimming Events):
  - (i) The two green flags shall indicate the start/finish line

Section 3 – Lifesaving Events

- (ii) The rescue tube (and swim fins, if used) shall be placed on a line approximately 10m from the start line and opposite and at 90 degrees to each team's individual buoy position peg. The rescue tube swimmers may lay the rescue tube and or swim fins to suit themselves provided that the rope or belt harness shall not extend on the seaward side of the tube.
  - (iii) If the option not to use swim fins is taken the swim fins are not required to be placed with the rescue tube.
- (c) Each patient shall take up their position on the start line in the allotted position.
- (d) On the starting signal, each patient shall enter the water and swim to their allotted buoy. On reaching their allotted buoy, the patient shall place their forearm over the top of the buoy and then signal their arrival by raising their other arm to a vertical position whilst remaining in contact with the buoy. The said signal, subject to all conditions being fulfilled, shall be the determining factor in judging the patient's arrival at their buoy. Should a competitor swim to a wrong buoy and signal the team shall be disqualified. The patients must then release contact with the swimming buoys, retire to the seaward side of the swimming buoys and await arrival of their rescuer.
- Note:** The swimming buoy is described as the buoy only and does not include any attaching ropes or straps.
- (e) In the interim each rescue tube swimmer shall take up their position on the starting line in the allotted position and await the arrival signal from the patient.
- (f) On receiving the patient's signal the rescue tube swimmer shall race up the beach and take hold of the rescue tube and swim fins (if used). They shall don the rescue tube and swim fins (if used) at their own discretion and swim to their allotted buoy.
- (g) On reaching their allotted buoy, the rescue tube swimmer shall place their forearm over the top of the buoy and then signal their arrival by raising their other arm to a vertical position whilst remaining in contact with the buoy. The said signal, subject to all conditions being fulfilled, shall be the determining factor in judging the rescue swimmer's arrival at their buoy. Should a competitor swim to an incorrect buoy and signal the team shall be disqualified. The rescue tube swimmers must then release contact with the swimming buoys, retire to the seaward side of the swimming buoys with their patient and await arrival of their board rescuer.
- Note:** The swimming buoy is described as the buoy only and does not include any attaching ropes or straps.
- (h) Each board rescuer shall take up the allotted position with their board on the starting line, to await the signal from the rescue tube swimmer.
- (i) On receiving the signal the board rescuer shall enter the water and paddle to and around the allotted buoy. The board rescuer shall turn the buoy from left to right unless otherwise directed by the Referee. Each patient shall make contact with any part of the board on the seaward side of the swimming buoy. The patient pick up shall be affected on the seaward side of the buoy. The patient may position themselves on the front or rear of the board, with or without assistance and may assist the rescuer by paddling the board on the return to shore.
- Note:** A team shall not be disqualified if part of the board extends onto the shoreward side of the buoy during the patient pick up process.
- (j) Losing control of patient and/or board – the board rescuer may lose control/contact and then regain control of the board on the way to their turning buoy. The rescuer and patient may lose contact with the board on the return journey. However, both the rescuer and patient must be in contact with the board when crossing the finish line.
- (k) The finish is judged on the chest of the first competitor of the team (i.e. patient or rescuer) crossing the start/finish line on their feet, with both the rescuer and patient being in control and in contact with the board.



- (l) The rescue tube swimmer then returns back to the beach and, as such, is not regarded as having any further part of the board rescue section of the event.
- (m) Total points allocated to each team in Board/Tube Rescue Relay component is as follows:

Finish Position	Points
1st	10
2nd	9
3rd	8
4th	7
5th	6
6th	5
7th	4
8th	3
9th	2

### 3.5.10 Theory

- (a) In the Open event, all six members of the team shall contest this component of the event. In the U/17 event, all four members of the team shall contest this component of the event.  
The theory section will consist of a 20 Multiple Choice Questions Test Paper on general surf lifesaving, patrol requirements, communication, basic first aid and surf awareness, based on questions drawn from the current edition of the SLSA Public Safety and Aquatic Rescue Manual and relevant to the minimum qualifications required to compete in the event. Each team member will receive the same paper and each will individually complete the paper.
- (c) A total time limit of 15 minutes will be allowed.
- (d) To determine the total points in the Open event, all team members' correct answers shall be added and then divided by 6 to give a score out of 20.
- (e) To determine the total points in the U/17 event, all team members' correct answers shall be added and then divided by 4 to give a score out of 20.

### 3.5.11 Practical Resuscitation

- (a) This practical resuscitation section will comprise two parts:
  - (i) Part A – Live patient assessment including lateral (recovery) position; and
  - (ii) Part B – Cardiopulmonary Resuscitation (CPR) and Defibrillation on a manikin.
- (b) The **open** team members that have drawn No's. **5 and 6 shall complete the 2 person live patient assessment. The Open and U/17 event team members that have drawn** No's. 1, 2, 3 and 4, shall contest this section of the competition. These members shall operate as a resuscitation team rotating after the delivery of each five cycles of CPR (i.e. one cycle is the delivery of 30 ECC and 2 breaths, commencing with ECC).
- (c) The practical resuscitation section shall consist of four components:
  - (i) Two person assessment of a live patient
  - (ii) CPR on a manikin (1 person)
  - (iii) CPR on a manikin (2 person)
  - (iv) Defibrillation Procedure (using Automatic External Defibrillator (AED) unit) on a manikin (3 person)
  - (v) CPR with AED and oxygen on a manikin (4 person)
- (d) The practical resuscitation section will also involve:
  - (i) Assessment of teamwork
  - (ii) Assessment of timing
  - (iii) Defibrillation (AED) Procedure Technique

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- Simulate turning on AED unit
  - Apply Pads one at a time
  - Check Pads are connected to AED unit
- (iv) Checking of Air Bag and oxygen equipment
- (v) Introduction of the Air Bag
- (e) The organising group shall arrange the live patient for part of the practical resuscitation section, or specify if clubs are to provide the patients.
- (f) The manikin can either be provided by the competitor or pre-arranged with sufficient notice for the organising group to provide.
- (g) No watches are to be worn by any competitors during the resuscitation section.
- (h) All changes of resuscitation techniques and rotations shall be undertaken without break, simulating the need to maintain continuous resuscitation on a patient who is not breathing normally.
- (i) The time taken by the resuscitation team to complete each of the 5 cycles in each of the resuscitation techniques shall be timed.
- (j) Team members No. 1 and No.2 shall undertake the live patient assessment including lateral position placement and demonstration of ECC hand positions by No.2.
- (k) At the conclusion of the live patient assessment teams shall maintain their positions and await the direction of an appointed official who will give the instructions to the team to move to the manikin for CPR and defibrillation (AED) assessment on a manikin.
- (l) Upon the direction of the appointed official team member No.1 shall undertake 1 person CPR on a manikin for the initial 5 cycles (over a timed period, commencing with ECC).
- (m) While 1 person CPR by No. 1 on the manikin is being undertaken team member No.2 takes up a kneeling at ease position ready to commence ECC in 2 person CPR. No.3 prepares the AED unit and No.4 prepares the oxygen equipment.
- (n) Two person CPR will commence immediately following completion of the 5th cycle of 1 person CPR. Team members shall move without ceasing CPR from the 1 person to the 2 person CPR technique. No commands for team members to rotate will be given by the Judging official.
- (o) The resuscitation team will carry out 2 person CPR with No. 1 undertaking Rescue Breathing and No.2 undertaking cardiac compressions for the next 5 cycles of CPR (over a timed period). The AED unit shall be introduced by No.3 without a break to the 2 person CPR. The pads are to be applied before the completion of the 5th cycle.
- Note:** It is permissible for No. 1 or any other team member to count/declare the number of completed cycles of CPR.
- (p) While 2 person CPR is being performed No 4 shall become responsible for the preparation and checking of the oxygen equipment including the introduction of the mask to the patient (when ready during any of the 5 cycles).
- (q) Two person CPR using AED and Air Bag Resuscitation will commence immediately following completion of the 5th cycle of 2 person CPR and without ceasing CPR. No commands for team members to rotate will be given by the Judging officials.
- (r) As CPR using AED and Air Bag Resuscitation is introduced team members shall rotate their roles. No. 1 shall ensure backward head tilt and mask seal, No.4 shall undertake ECC and No.2 shall introduce/operate the Air Bag and monitor the oxygen equipment. No. 3 shall operate the AED.
- (s) At the conclusion of the 5th CPR cycle using AED and Air Bag Resuscitation the appointed official shall declare/command given; “The patient is now breathing normally. Operators halt.”

**Note:** It is permissible for No.1 or No.2 or any other team member to count/declare the number of completed cycles of CPR.

- (t) The CPR and defibrillation procedure on a Manikin section is then concluded, resuscitation shall cease and no further action is required from teams. The total period of resuscitation is therefore 15 cycles of CPR plus Defibrillation procedure over an approximate continuous period of 6 minutes and 30 seconds as follows:
- (i) 1 person CPR (5 cycles, approximately 2 minutes); to
  - (ii) 2 person CPR (5 cycles, approximately 2 minutes); to
  - (iii) CPR with AED and Oxygen (5 cycles, approximately 2 minutes and 30 seconds).
- (v) The procedure and timing for CPR is as follows:
- (i) One complete cycle for both 1 person and 2 person CPR (for all patients) is an ECC count of 30 immediately followed by 2 breaths. Each complete cycle is to take approximately 24 seconds with an optimum minimum of 5 cycles taking 2 minutes.
  - (ii) The ECC count shall be given aloud commencing with “1” then “5, 10, 15, 20, 25, 26, 27, 28, 29, 30”, or “1 to 30”, or any other variation starting with “1 and ending with 30”, over an approximate 20 second period.
  - (iii) In the 1 person operation immediately following delivery of the 30th compression, the operator shall move to the head of the patient and deliver 2 inflations in approximately 4 seconds. The operator will then commence the next cycle.
  - (iv) In the 2 person CPR operation immediately following the count of 30, the ECC operator shall stop counting while the Rescue Breathing Operator delivers 2 inflations in approximately 4 seconds. The ECC Operator will then commence the next cycle.
  - (v) One complete cycle is an ECC count of 30 immediately followed by 2 breaths. Each complete cycle is to take approximately 24 seconds with an optimum minimum of 5 cycles taking 2 minutes.
- (w) The point system for judging this section is designed with an emphasis on judgement of fact. A maximum of 20 points will be allocated to this section with team deductions as follows:
- Major faults (each) 4.0 points deduction.
  - Minor faults (each) 0.5 points deduction.
  - Timing deductions (manikin) 4, 3, 2, 1 or nil points deduction.
- (x) If total deductions exceed the 20 points for the section the competitors will score zero.
- (y) Refer to Appendix C for additional details on deductions schedule for major, minor and timing faults, in addition to commands given to competitors by officials.

### 3.5.12 Scenario Task

- (a) In the Open event, all six members of the team shall contest this component of the event. In the U/17 event all four members of the team shall contest this component of the event.

**Note:** The event scenario in Championship competition shall be judged over a total of 15 minutes with the following time periods:

- Set-up 3 minutes
- Task 9 minutes
- Pack-up 3 minutes

- (b) Each team shall be given the same task involving a rescue or number of rescues. First aid or other situations that confront patrols may also be involved. The prevailing conditions of the day shall be taken into account. The team’s assessment will include:
- (i) The Patrol Captain’s effective use of the patrol to carry out the task.

- (ii) The initiative of Patrol Captain.
  - (iii) Effecting the rescue(s).
  - (iv) Effective utilisation of patrol equipment.
  - (v) Effective use of communications and signals.
  - (vi) Correct assessment and treatment of patients.
  - (vii) Use of log books.
- (c) All assessments shall be made from the current Public Safety and Aquatic Rescue Manual.
- (d) Scoring shall be weighted (this may be done by a spread weighting from a total of 360 points for the Open Team and 240 points for the U/17 Team for the individual parts of the scenario section. These points shall be totalled and divided by the number of team members to give a score out of 60).
- (e) The points to be allocated to this section total 60 points maximum.
- (f) When entering the designated area for the scenario task, team members shall be wearing their patrol uniform and competition cap and shall carry their First Aid Kit, Air Bag Oxygen Resuscitation unit, one Automated External Defibrillator (AED) Trainer and Open teams will include a minimum of two PDF's to suite IRB Driver and IRB Crewperson to be used during the Open scenario task. Each team member has the option of wearing one bum bag. No other gear or equipment can be carried by team members.
- Note 1:** The kit “bum” bag can only house the following items: Gloves (two pairs only), whistle, blank notepad, pen, pocket mask, roller bandage (one only) and triangular bandage (one only). Items that can be included in each bum bag are exclusive from the items contained in the First Aid Kit.
- Note 2:** First Aid Kits must meet the first aid kit requirements as set out in Appendix D.
- (g) Teams will have their equipment checked by an official prior to entering this component of the event.
- (h) Teams will be provided with Patrol Log and Incident Report Form and any other equipment required for the scenario shall be made available by the organisers e.g. rescue equipment, stiff neck collars, signage, etc.
- (i) Prior to the commencement of the scenario section all teams shall go into isolation and shall be marshalled from the isolation area for the scenario task assessment. The Referee has the discretion to either have the teams that have completed the scenario section, either to return to the isolation area or be permitted to observe any remaining teams completing the section.
- (j) The Referee also has the discretion to manage isolation rules in relation to competitors competing in other events. Priority needs to be given to ensuring that isolation protocols are strongly adhered to, to enable effective and fair Patrol Competition conduct. Competitors should be aware of these requirements when entering the Patrol Competition event.

### 3.5.13 Tied Scores

- (a) In the event of equal points at the completion of the competition, the winner shall be decided by a count back system in the following order:
- Scenario task
  - Resuscitation task
  - Board/Tube Rescue Relay Race
  - Surf Teams Race
  - Theory
- (b) If a winner cannot be determined by count back then a dead heat will be declared as provided in Section 2 of this Manual.

### 3.6 FIRST AID COMPETITION

#### 3.6.1 General Conditions

- (a) Members competing in U/15 First Aid Competitions are required to hold, as a minimum, a current proficient SLSA Surf Rescue Certificate and to have fulfilled all other requirements such as patrol hours etc. as detailed in this Manual and appropriate SLSA policies, bulletins and circulars.
- (b) Members competing in U/17 to Open age group First Aid Competitions are required to hold as a minimum, a current proficient SLSA Bronze Medallion/Cert II and/or a current proficient SLSA Provide First Aid Certificate (or equivalent). Teams will also need to demonstrate the use and delivery of oxygen therapy during scenarios. In addition all competitors must have fulfilled all other requirements such as patrol hours etc. as detailed in this Manual and appropriate SLSA policies, bulletins and circulars.
- (c) Competitors are not permitted to bring any form of communication devices into the “isolation area”.

**Note:** Competitors are permitted to wear a watch of a non-electronic communication kind.

#### 3.6.2 Aim

- (a) The first Aid competition is a team event designed to promote and to demonstrate a high standard of First Aid prowess by SLSA members.

**Note:** Where Manuals or other documents are referenced for the conduct of this event the written word takes precedence over any photographs or diagrams. In addition, when words, photographs or diagrams are “silent” on a process, competitors shall not be penalised for their methodology in completing required actions.

#### 3.6.3 Nature of First Aid Competition

- (a) Each First Aid competition event shall be held with a set simulated accident scenario and a set time limit for each team in the event. The time limit shall be advised to teams prior to the commencement of the event.

**Note:** The event scenario in Championship competition shall be judged over the following time periods:

- Open & U/19 12 minutes
- U/17 8 minutes
- U/15 8 minutes

- (b) The First Aid standard and treatments for U/17 to Open teams will come from the current SLSA First Aid Manual, along with any updates and will be relevant to chapters required for competitors to be able to enter this event.
- (c) The rates of resuscitation will be as per the current edition of the SLSA Public Safety and Aquatic Rescue Manual.
- (d) Less sophisticated competition than that described in this Manual is conducted for the U/15 and below age categories. Refer to current SLSA Public Safety and Aquatic Rescue Manual, updated bulletins and relevant competition entry bulletins for details.
- (e) The scenario, including props to specifications etc., shall be arranged by the Sectional Referee or their appointee. The organising group shall arrange the casualties or specify if clubs are to provide the casualties.
- (f) Every effort shall be made to achieve realism with the scenario and in the presentation of casualties and to also give the competitors the correct atmosphere by using casualty make-up, acting and staging. As far as possible the injuries will be similar to those an SLSA Club First Aid member may be called upon to treat using the resources of the First Aid Room. Scenario examples may include but are not limited to spearing with a beach umbrella, surf boat overturning, heart attack on the beach, falls down rock walls, or over fences, etc. Each team in the competition will be judged on the same scenario.

- (g) Teams will be required to examine the casualty(s), make their diagnosis and then treat the casualty(s) using the materials provided and/or their first aid kit.
- (h) First aid kits shall be supplied by the team (refer Appendix D for a list of the contents). OxyVivas shall be supplied by the team unless specified that they will be supplied by the competition organising group. Teams will need to be conversant with all common types of OxyVivas. OxyVivas will need to include equipment to deliver oxygen for resuscitation and therapy.
- (i) Each competitor may also take their own kit (bum) bag into the competition arena. Kit bags shall contain a maximum of 20 items. Contents of the kit bag are to be comprised solely of items coming from the First Aid kit. Two pairs of gloves and up to six safety pins will be the only multiple items considered as single items in a kit. A note book with pens and/or pencils may be carried in the competitor's pocket and shall not be counted as part of the kit items. The Referee shall advise whether the gloves may be worn into the competition arena but it is mandatory that gloves are worn when undertaking treatments.

**Note 1:** First aid kits, OxyVivas and personal kit bags shall be made available for inspection as advised by the Referee.

**Note 2:** A team shall not be permitted to start the scenario if the equipment does not meet the requirements laid down for this event.

**Note 3:** First Aid kits with removable trays may be split during competition and must remain uncontaminated at all times.

#### **3.6.4 Composition of Teams**

- (a) Each first aid team shall be comprised of two members from the same club.

#### **3.6.5 Competitors' Dress**

- (a) Section 2.5 of General Competition Conditions shall apply to the dress of competitors in first aid events, except for the following provisos:
  - (i) No item worn by a competitor is permitted to be used to treat a casualty.
  - (ii) The wearing of footwear is optional.
  - (iii) Shorts and shirts may be worn provided such clothing does not impede the judging for the event. This also includes protective clothing if worn. A peaked cap may be worn under or over the top of the fastened club cap.

#### **3.6.6 Competition in other Events**

- (a) If a team member, who is in isolation, has to compete in another event, that competitor will be accompanied by an appointed official who will wait while the event is completed and then will return to the isolation area with the competitor.

#### **3.6.7 Judging of the Competition**

- (a) Judging at the competition shall be effected by utilising marking sheets which are related to the following five sections of the scenario:
  - (i) Approach to casualty.
  - (ii) Examination of casualty and diagnosis of injuries
  - (iii) Specific points for all treatments
  - (iv) Disposal of casualty.
  - (v) Management of the incident.
- (b) The marks allotted to the various sections may be varied for each different scenario.
- (c) The percentage total for the five sections must equal 100% (the overall mark). For a competition there is flexibility permitted, provided that each section does not exceed the following percentages of the overall mark which must total 100%:

- (i) 5% - Approach to casualty.
  - (ii) 30% – Examination of casualty and diagnosis of injury.
  - (iii) 60% – Specific points for all treatments.
  - (iv) 10% – Disposal of casualty.
  - (v) 10% – Management of the incident.
- (d) Placings shall be determined by the aggregation of points.
- (e) In the event of equal points at the completion of the competition, the winner shall be decided by a count back system using Clause 3.6.7 (c) and the order for the count back shall be sub-clause (iii), (ii), (iv), (v) and (i).
- (f) If a winner cannot be determined by count back then a dead heat will be declared as provided in Section 2 of this Manual.

### **3.6.8 Competition Administration and Officials Control**

- (a) The event may be held as a separate event or as part of a surf competition and as such will come under the overall control of the Referee/Sectional Referee.

### **3.6.9 Sectional Referee**

- (a) The immediate control of the competition should be allocated to a Sectional Referee who has knowledge of both SLSA competition and First Aid.
- (b) The relevant SLSA authority conducting the event shall appoint currently accredited SLSA competition officials and/or other suitably qualified persons to conduct the event. Appointment of officials should be based on First Aid knowledge. Further, other SLSA members may be used to assist or be involved in the tasks e.g. casualties.
- (c) The Sectional Referee shall be responsible for the planning, preparation, distribution and organisation of all matters relative to the scenarios and tasks.
- (d) The Sectional Referee prior to the competition shall:
- (i) Ensure that the appropriate SLSA authority has approved the rules for the competition.
  - (ii) Ensure that the competition area including the competitors' isolation area is organised.
  - (iii) Ensure no conflict takes place with any SLSA Manual.
  - (iv) Arrange for any locations or special equipment or props required for the event.
  - (v) Arrange for the scrutineering of First Aid equipment supplied by teams for use in competition.
  - (vi) Arrange for staging of the scenario and for any special equipment or personnel required.
  - (vii) Ensure casualties are fully briefed.
  - (viii) Ensure that the appropriate marking sheets are prepared.
- (e) Competitors must remain within the competition area for the duration of the scenario and will not be permitted to leave for the retrieval of their personal equipment which includes first aid kits, personal kit bags, notebook, pens/pencils, blanket and splints, or other approved personal equipment for use in the scenario.

**Note:** Where competitors request bystanders placed within the scenario area to assist and the bystander is required to leave the area to collect items that are part of the scenario but placed outside of the scenario area, the bystander must be asked to confirm whether or not they will return and a nominal "One Minute Time Delay" will be applied before the bystander is to re-enter the scenario area with the item(s).

- (f) At the conclusion of the competition the Sectional Referee may debrief/comment on the performance of teams.

### **3.6.10 The Judges**

- (a) Judges should have a comprehensive knowledge of the rules governing the competition based on current SLSA First Aid practices and Manuals on which the competition is based.
- (b) Sufficient Judges should be appointed to adequately cover judging and administration of the event.
- (c) Once competitors have been placed into isolation, Judges must not retain any form of communication devices on their person within the competition area other than approved competition communication equipment. Apart from the Referee, Sectional Referee, Area Liaison Officer, and Isolation Judges, officials will not be permitted to enter the isolation area for the duration of the competition. Judges should not communicate with competitors or spectators about the specifics of the scenario from commencement of the isolation period until completion of competition.

**Note:** The Sectional Referee may give special exemption to these requirements.

### **3.6.11 The Marshall**

- (a) The Marshall shall:
  - (i) Ensure that entry conditions are not breached and that any infringements are reported to the Sectional Referee.
  - (ii) Escort each team from the isolation area to the competition area by the route indicated by the Sectional Referee.

### **3.6.12 The Isolation Judge**

- (a) The Isolation Judge shall:
  - (i) Ensure teams are restricted to the isolation area prior to them being escorted to the competition arena.
  - (ii) Ensure that no communication takes place between the team and any unauthorised person during isolation.
  - (iii) Ensure that the isolation conditions of the competition are not violated and immediately report any infringement to the Sectional Referee.
  - (iv) Ensure that competitors do not bring any form of communication devices into the isolation area.

**Note:** Competitors are permitted to wear a watch of a non-electronic communication kind.

### **3.6.13 Casualties**

- (a) One or more people may be required to act as casualties or act out a given role for the event and they must follow the instructions of the Sectional Referee and carry out the same procedure for each competing team.

### **3.6.14 Bystanders**

- (a) SLSA members may be required to act as bystanders to assist in the scenario. They must follow the instructions of the Sectional Referee and carry out the same procedure for each competing team.

### **3.6.15 Competition Area**

- (a) The competition area will be defined by the Referee.
- (b) The area will be roped off and sign posted to keep spectators clear and to avoid any confusion regarding the equipment and staging required. A First Aid post (tent) may be set up on the beach for the event.



**3.6.16 Presentation, Diagnosis and Treatment of Casualties**

- (a) The injuries or disabilities from which a casualty is suffering will be depicted as accurately as possible by casualty simulation.
- (b) Each team may check their first aid kit and personal equipment prior to leaving the isolation area.
- (c) One whistle blast will signal the start of the event for the team. Teams will be advised two minutes prior to finish time with a single whistle blast and a verbal announcement “two minutes to go” and subsequently, two blasts of the whistle will signal the finish of the scenario.
- (d) Competitors will be required to manage the situations, examine the casualties, diagnose the nature of the injuries and disabilities and carry out necessary treatment in priority order as dictated by the scenario.

**3.6.17 Release of Competitors**

- (a) When a team has completed its scenario, the team may be released.

**3.6.18 Results**

- (a) At the end of the scenario the judge(s) shall hand their marking sheet to the Recording Judge. The Recording Judge(s) must immediately check that every item has, in fact, been marked and any alterations have been initialled by the judge(s) before they leave the area.
- (b) The result shall then be determined.
- (c) The Sectional Referee shall check results and if correct arrange for placing results to be advised.

**APPENDIX B**

**CHAMPION LIFESAVER PRACTICAL RESUSCITATION**

The ‘Patient’ for this Section has been determined as an adult.

**Maximum Points Deduction:**

For both Sections of the Champion Lifesaver practical resuscitation:

- Section A – Live Patient Assessment including Lateral Position
- Section B – Assessment of 1 person C.P.R. on a Manikin
- The maximum deduction for each Section shall be 20 points.

**Note:** No competitor can earn less than 0 points in Section A or Section B in the practical resuscitation component of the event.

**Points Deductions:**

Points deductions for each Section will be as follows:

**Major Faults:**

Major Faults (on competition marking sheet indicated with a circle for judges to mark)

- For each Major Fault, 4.0 Points to be taken off the total 20 points in the relevant Section being judged.

**Note:** Judges are not to confer on any Major Faults. All judges need to have independently recorded the same major deduction for it to be accepted.

**Minor Faults:**

Minor Faults (on competition marking sheet indicated with a square for Judges to mark)

- For each Minor Fault 0.5 Point to be taken off the total 20 points in the relevant Section being judged.

**Note:** Judges are not to confer on any Minor Faults.

**Section A Points Calculation – Live Patient Assessment including Lateral Position**

Number Major Faults		X 4.0 points each	=
Number Minor Faults		X 0.5 points each	=
TOTAL POINTS DEDUCTION			=
20 POINTS MINUS TOTAL POINTS DEDUCTION			= /20

**Section B Points Calculation – Assessment 1 person C.P.R. on a Manikin**

Number Major Faults		X 4.0 points each	=
Number Minor Faults		X 0.5 points each	=
Timing Deductions: 4, 3, 2, 1 or Nil points			=
TOTAL POINTS DEDUCTION			=
20 POINTS MINUS TOTAL POINTS DEDUCTION			= /20

TOTAL SCORE OUT OF 40 POINTS FOR SECTION A PLUS SECTION B			= /40
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## SECTION A JUDGE'S MARKING SHEET

### Live Patient Assessment Including Lateral Position

#### Command Given:

**"A patient is found lying on the ground motionless, please assess the situation and declare patient assessment. Further instructions will be given at each stage of the segments"**

Failure to assess for danger to self, bystanders or patient, and remove danger if necessary .....

Incorrect assessment of above .....

#### If asked by competitor "is there any danger" – respond appropriately

Failure to "Squeeze shoulders, shout and ask simple commands" .....

Incorrect assessment of above .....

#### Command Given:

**"Patient is not responsive, not moving and is unconscious"**

Failure to request a "send" for assistance.....

Failure to check airway.....

Incorrect method of checking airway.....

#### Command Given:

**"Foreign body and fluids are visible"**

Failure to roll patient on to side .....

Incorrect method of rolling patient on side .....

Failure to place head in backward head tilt, apply jaw support correctly and open mouth with head turned slightly downwards .....

Incorrect assessment of above .....

Failure to assess patient's airway and simulate inspection and cleaning of the mouth.....

Not looking inside mouth after simulating the cleaning out with fingers.....

Having visibly sandy or dirty fingers when cleaning the mouth.....

Failure to assess patient's breathing .....

Not placing ear over nose, cheek over mouth to assess for breathing .....

Not correctly observing/feeling chest and abdomen for movement.....

#### Command given:

**"Patient is not responsive and is not breathing normally"**

Not declaring that "Patient is not responsive and is not breathing normally".....

Section 3 – Lifesaving Events

- Failure to roll patient on back .....
- Failure to attempt to obtain an open airway .....
- Failure to give 2 rescue breaths.....
- Incorrect method of delivering 2 rescue breaths .....
- Failure to achieve head tilt .....
- Occasional incorrect head tilt .....
- Not observing chest movement between breaths .....
- Failure to correctly position compressing hand on the sternum for effective E.C.C .....

**Note: No pressure is to be applied to patient’s chest**

**After hand positions are assessed command given:-**

**“Patient is now breathing normally”**

- Not declaring that “Patient is now breathing normally” .....
- Failure to place patient into lateral (recovery) position.....
- Failure to maintain an open airway after securing the patient in the lateral position.....
- Incorrect patient roll.....
- Incorrect placement of knee/leg in lateral position (each occasion) .....
- Incorrect position of patient’s arms (both) in lateral position .....
- Not pointing the head slightly downward for drainage from mouth.....
- Not monitoring the patient.....
- Rough handling of patient.....
- Other deductions (specify) .....

**Command given: “Operator halt”**

**Note 1: Judges to complete/finalise markings for the live patient assessment – Section A**

**Note 2: Judges are not to confer on any observed faults. All judges need to have independently recorded the same major deduction for it to be accepted.**

**Competitor to prepare manikin for Section B**

Total Number Major Faults		Total Number Minor Faults	
------------------------------	--	------------------------------	--

### SECTION B JUDGE'S MARKING SHEET

Assessment of 1 person C.P.R. on a manikin

Command given:-

**“The patient has been assessed as not responsive, not moving and is unconscious. The patient is not breathing normally after 2 initial rescue breaths have been delivered”.**

Command given: – **“Operator ready”**

Failure to immediately attempt to take up hand position for E.C.C. ....

Occasional incorrect position of the compressing hand on the sternum for E.C.C. ....

Totally incorrect position of compressing hand on the sternum for E.C.C.....

**Note: Upon hand position being located for E.C.C.**

Command given: **“Operator commence”**

**Note: timing for 5 complete cycles, beginning with E.C.C., to commence on this command**

Failure to begin C.P.R. commencing with E.C.C. ....

Failure to attempt rescue breathing .....

Failure to maintain backward head tilt during rescue breathing .....

Occasional failure to maintain backward head tilt during rescue breathing .....

Failure to consistently achieve a seal during inflations .....

Failure to consistently achieve correct chest inflation during rescue breathing .....

Failure to consistently achieve sufficient chest depth during E.C.C. ....

Failure to consistently achieve correct hand position for ECC .....

Occasional incorrect hand positions for E.C.C. ....

Occasional incorrect pressure for E.C.C.....

Not maintaining a consistent rate during C.P.R. ....

Not counting E.C.C compressions aloud (The ECC count shall be given aloud commencing with “1” then “5, 10, 15, 20, 25, 26, 27, 28, 29, 30”, or “1 to 30” or any other variation starting with “1 and ending with 30”). ....

Not Maintaining Correct Ratio of 30:2 .....

Incorrect rescue breathing technique .....

Occasional incorrect mouth seal during rescue breathing .....

Occasional over/under inflation of lungs.....

- Not observing rise and fall of chest during rescue breathing .....
- Rough handling of patient .....
- Other deductions (specify) .....

**Note: Assessor to time competitor over 5 complete cycles**

**Command given at the completion of the 5th cycle**

**“Operator halt. The patient is now breathing normally”**

- Not declaring assessment that “Patient is now breathing normally” .....

**Record of timing for 5 complete cycles**

Record time taken for competitor to complete 5 full cycles – 30 compression / 2 rescue breaths = 1 cycle.

**Note: Timing to start on first compression and timing to stop at the completion of the 2<sup>nd</sup> rescue breath on the 5<sup>th</sup> cycle**

5 cycles completed in .....

**Deductions:**

**Assessor to tick the appropriate timing deduction**

- Slower than 2:05.00 ..... 4 point deduction
- 2:03.00 – 2:04.99 ..... 2 point deductions
- 2:01.00 – 2:02.99 ..... 1 point deduction
- 1:55.00 – 2:00.99 ..... Nil deduction
- 1:53.00 – 1:54.99 ..... 1 point deduction
- 1:51.00 – 1:52.99 ..... 2 point deduction
- 1:50:00 – 1:50.99 ..... 3 point deduction
- Faster than 1:50.00 ..... 4 point deduction

**Note 1: Judges to complete marking C.P.R. on manikin assessment**

**Note 2: Judges are not to confer on any observed faults. All judges need to have independently recorded the same major deduction for it to be accepted.**

<b>Total Number Major Faults</b>		<b>Total Number Minor Faults</b>	
<b>Timing Deductions</b>			
<b>Signature of Assessor</b>			

**APPENDIX C**

**PATROL COMPETITION PRACTICAL RESUSCITATION**

The ‘Patient’ for this Section has been determined as an adult.

**Team positions:**

Open team members will draw for the positions of 1, 2, 3, 4, 5 and 6. Under 17 team members will draw for positions 1, 2, 3 and 4. As per the rules of the event competitors in this section will assume different roles relevant to their draw.

**Points Deductions:**

A maximum of twenty (20) points will be allocated to this section with team deductions as follows:

**Major Faults:**

Major Faults (on competition marking sheet indicated with a circle for judges to mark)

- For each Major Fault, 4.0 Points to be taken off the total 20 points in the relevant Section being judged.

**Note:** Judges are not to confer on any Major Faults. All judges need to have independently recorded the same major deduction for it to be accepted.

**Minor Faults:**

Minor Faults (on competition marking sheet indicated with a square for Judges to mark)

- For each Minor Fault 0.5 Point to be taken off the total 20 points in the relevant Section being judged.

**Note:** Judges are not to confer on any Minor Faults.

**Score**

Number Major Faults		X 4.0 points each		=	
Number Minor Faults		X 0.5 points each		=	
Timing Deductions	(A)=	(B)=	(C)=	=	
20 POINTS MINUS TOTAL POINTS DEDUCTION				=	/20

**Note:** No teams can earn less than 0 points in the practical resuscitation section of the event.

## JUDGE'S MARKING SHEET

**Under 17 teams 2 person assessment of live patient – including Lateral position by numbers 1 and 2**

**Open teams 2 person assessment of live patient – including Lateral position by numbers 5 and 6**

**First roles on the manikin will be:**

- No.1 – 1 person C.P.R.,
- No.2 – 2 person C.P.R. as the E.C.C. operator,
- No.3 – Preparing AED unit and introduces AED pads in last cycle of 2 person CPR.
- No.4 – preparing oxygen equipment and introduces mask in 2 person C.P.R.
- **No.5 – Live Patient Assessment One person CPR.**
- **No.6 – Live Patient Assessment two person CPR, ECC operator.**

**Command given:**

**“A patient is found lying on the ground motionless, please assess the situation and declare patient assessment. Further instructions will be given at each stage of the segment”**

Failure by No.1 and No.2 to assess for danger to themselves, bystanders or patient, and remove danger if necessary .....

Incorrect assessment of above .....

**If asked by competitor “Is there any danger” – respond appropriately**

Failure of No.1 to “Squeeze shoulders, shout and ask simple commands” .....

Incorrect assessment of above .....

**Command given:**

**“Patient is not responsive, not moving and is unconscious”**

Failure of No.1 to request a “send” for assistance.....

Failure of No.1 to check airway .....

Incorrect method of No.1 checking airway .....

**Command Given:**

**“Foreign body and fluids are visible”**

Failure to roll patient on to side position .....

Incorrect method of rolling patient onto side.....

Failure of No.1 to place head in backward head tilt .....

Inconsistent backward head tilt.....

Incorrect method of No.1 opening mouth correctly.....

Head not pointed down slightly.....

Failure of No.2 to simulate inspection and cleaning of mouth .....



- No.2 not looking inside mouth after simulating the cleaning out with fingers .....
- No.2 having visibly sandy or dirty fingers when cleaning the mouth .....
- Failure of No.1 to assess patient’s breathing .....
- Incorrect method of No.1 assessing for breathing – not placing ear over nose, cheek over mouth .....
- No.2 not correctly observing/feeling chest and abdomen for movement.....

**Command given:**

**“Patient is not responsive and is not breathing normally”**

- No.1 not declaring that “Patient is not responsive and is not breathing normally” .....
- Failure to roll patient on back .....
- Failure of No.1 to attempt to obtain an open airway .....
- Failure of No.1 to give 2 rescue breaths.....
- Incorrect method of delivering 2 rescue breaths .....
- Failure to achieve head tilt.....
- Occasional incorrect head tilt .....
- Not observing chest movement between breaths .....
- Failure of No.2 to immediately attempt to take up hand positions for E.C.C. ....
- No.2 not attempting to locate position of compressing hand on the sternum for E.C.C. ....
- Totally incorrect position of compressing hand on the sternum for effective E.C.C. ....

**Note: No pressure to be applied to patient’s chest**

**After hand positions are assessed command given:-**

**“Patient is responsive and is now breathing normally”**

- No.1 not declaring that “Patient is responsive and is now breathing normally” .....
- Failure to place patient into lateral (recovery) position .....
- Failure of No.1 to maintain an open airway after securing patient in the lateral position .....
- Incorrect patient roll .....
- Incorrect placement of knee/leg in lateral position (each) by No.2.....
- Incorrect position of patient’s arms (each) in lateral position by No.2 .....
- No.1 not positioning head slightly downward for drainage from mouth .....

- No.1 and No.2 not monitoring the patient.....
- Rough handling of patient.....
- Other deductions (specify).....

**Command given: “Operators halt”**

**Competitors to prepare manikin for Section B**

**One person C.P.R. assessment on a manikin by number 1**

**Command given:-**

**“The patient has been assessed as not responsive, not moving and is unconscious. The patient is not breathing normally after 2 initial rescue breaths have been delivered”**

**Command given:- “Operator ready”**

- Failure to immediately attempt to take up hand position for E.C.C. ....
- Occasional incorrect position of compression hand on the sternum for E.C.C. ....
- Totally incorrect position of compressing hand on the sternum for E.C.C.....

**Note: Upon hand position being located for E.C.C. by No. 1**

**Command given: “Operator commence”**

**Note: timing for 5 complete cycles, beginning with E.C.C., to commence on this command**

- Failure to begin C.P.R. commencing with E.C.C. ....
- Failure to attempt rescue breathing .....
- Failure to maintain backward head tilt during rescue breathing .....
- Occasional failure to maintain backward head tilt during rescue breathing .....
- Failure to consistently seal the nose during inflations.....
- Failure to consistently achieve correct chest inflation during rescue breathing .....
- Failure to consistently achieve sufficient chest depth during E.C.C. ....
- Failure to consistently achieve correct hand position for E.C.C. ....
- Occasional incorrect hand position for E.C.C.....
- Occasional incorrect pressure for E.C.C.....
- Not maintaining a consistent rate during C.P.R. ....
- Not counting E.C.C compressions aloud (The ECC count shall be given aloud commencing with “1” then “5, 10, 15, 20, 25, 26, 27, 28, 29, 30”, or “1 to 30” or any other variation starting with “1 and ending with 30”.).....

Section 3 – Lifesaving Events

- Not Maintaining Correct Ratio of 30:2 .....
- Incorrect rescue breathing technique .....
- Occasional incorrect mouth seal during rescue breathing .....
- Occasional over/under inflation of lungs.....
- Not observing the rise and fall of chest during rescue breathing.....
- Rough handling of patient.....

**Record of timing for 5 complete cycles – 1 person C.P.R.**

**Note: timing to start on first compression and timing to stop at the completion of the 2<sup>nd</sup> rescue breath on the 5<sup>th</sup> cycle**

5 cycles completed in: .....

**Timing (A) Assessor to tick the appropriate timing deduction**

- Slower than 2:05.00 ..... 4 point deduction
- 2:03.00 – 2:04.99 ..... 2 point deduction
- 2:01.00 – 2:02.99 ..... 1 point deduction
- 1:55.00 – 2:00.99 ..... Nil deduction
- 1:53.00 – 1:54.99 ..... 1 point deduction
- 1:51.00 – 1:52.99 ..... 2 point deduction
- 1:50.00 – 1:50.99 ..... 3 point deduction
- Faster than 1:50.00 ..... 4 point deduction

**Note: Immediately at the conclusion of the 1 person C.P.R. (5 cycles) – 2 person C.P.R. shall commence without a break**

- Failure of No.2 to inform No.1 of rotation from one to 2 person C.P.R. ....
- Failure of team to maintain timing and rhythm when transferring from 1 person to 2 person C.P.R. ....
- Failure of No.2 to consistently achieve correct hand position for E.C.C. ....
- Failure to consistently achieve sufficient chest depth during E.C.C. ....
- Failure to begin C.P.R. cycle commencing with E.C.C. ....
- Not attempting rescue breathing.....
- Failure of No.1 to maintain backward head tilt .....
- Not attempting to seal the nose during inflations by No. 1 .....
- Consistent failure by No.1 to achieve correct chest inflation during rescue breathing .....
- Failure by No.4 to prepare oxygen equipment while 2 person C.P.R. is being performed .....

- Failure of No.4 to introduce the mask at some point while 2 person C.P.R. is being performed ...
- No.2 Occasional incorrect hand position for E.C.C. ....
- No.2 Occasional incorrect pressure during E.C.C. ....
- Not maintaining a consistent rate during C.P.R. ....
- Not counting E.C.C compressions aloud (The ECC count shall be given aloud commencing with "1" then "5, 10, 15, 20, 25, 26, 27, 28, 29, 30", or "1 to 30" or any other variation starting with "1 and ending with 30".).....
- Incorrect rescue breathing technique by No. 1 .....
- Incorrect jaw thrust position for rescue breathing by No. 1 .....
- Occasional incorrect mouth seal during rescue breathing by No. 1 .....
- Occasional over/under inflation of lungs by No. 1 .....
- No.1 not watching for rise and fall of chest during rescue breathing .....
- The Automated external Defibrillator (AED) unit shall be introduced without a break to the 2 person C.P.R. The pads to be applied before the completion of the 5th cycle**
- Note: AED Training Unit will remain TURNED OFF throughout these sections.**
- Failure of Nos. 1 and 2 to continue the 2 person CPR while the AED unit is introduced.....
- Failure of No.3 to announce qualifications and that the AED unit is on the beach.....
- Failure of No.3 to check AED unit correctly ..... 
  - Simulate turning on AED unit
  - Apply Pads one at a time
  - Check Pads are connected to AED unit
- Failure of No. 3 to apply Electrode Pads to patient correctly by end of 5th cycle .....
- Failure by No.4 to perform the following:
- Switch on oxygen correctly.....
- Check contents gauge.....
- Check air bag recoil .....
- Check patient valve working .....
- Check leaks in air reservoir bag .....
- Check patient expired air valve working .....
- Assemble correctly to compress air bag after reservoir bag filled first time with oxygen (to 'purge') .....
- Rough handling of patient.....

**Record of timing for 5 complete cycles – 2 person C.P.R.**

**Note: timing to start on first compression and timing to stop at the completion of the 2<sup>nd</sup> rescue breath on the 5<sup>th</sup> cycle**

5 cycles completed in: .....

**Timing (B) Assessor to tick the appropriate timing deduction**

Slower than 2:05.00 .....	4 point deduction	<input type="checkbox"/>
2:03.00 – 2:04.99 .....	2 point deduction	<input type="checkbox"/>
2:01.00 – 2:02.99 .....	1 point deduction	<input type="checkbox"/>
1:55.00 – 2:00.99 .....	Nil deduction	<input type="checkbox"/>
1:53.00 – 1:54.99 .....	1 point deduction	<input type="checkbox"/>
1:51.00 – 1:52.99 .....	2 point deduction	<input type="checkbox"/>
1:50.00 – 1:50.99 .....	3 point deduction	<input type="checkbox"/>
Faster than 1:50.00 .....	4 point deduction	<input type="checkbox"/>

**Note: Immediately at the conclusion of the 2 person C.P.R. (5 cycles) – 2 person C.P.R. using the AED and oxygen equipment shall commence without a break**

Failure by No.4 to have oxygen equipment ready prior to first cycle of 2 person C.P.R. using oxygen equipment .....

Failure by No.4 to fully inform No.2 and No.1 of qualifications to operate oxygen equipment, that the equipment is ready for the rotation to 2 person C.P.R. with oxygen .....

Failure of team to reasonably maintain timing and rhythm when transferring positions for 2 person C.P.R. with oxygen equipment.....

**Note: The AED unit will analyse the patient on the commencement of the 1st cycle after rotation between 2 person CPR and 4 person CPR. It is to be assumed that the analysis results in defibrillation being required.**

Failure of No. 3 to announce: “Analysing, Stand Clear” .....

Failure of No. 3 to announce: “Shock Required” .....

**Note: After No.3 announces that a shock is required, Nos. 1, 2 and 4 are to remove the oxygen equipment and stand clear while the patient is defibrillated.**

Failure of Nos. 1, 2 and 4 to remove oxygen equipment and stand clear while the patient is defibrillated.....

Failure of No.3 to check that conditions are safe for a defibrillation procedure .....

Failure of No. 3 to deliver shock.....

Failure of No. 3 to declare it is safe to touch patient and continue CPR with Oxygen .....

**Command given: “Operator ready”**

Failure of No. 4 to immediately attempt to take up hand position for E.C.C. ....

Totally incorrect position of No. 4 compressing hand on the sternum for E.C.C. ....

**Note: Upon hand position being located for E.C.C. by No. 4**

**Command given: “Operator commence”**

**Note: timing for 5 complete cycles, beginning with E.C.C., to commence on this command**

- Failure to begin C.P.R. commencing with E.C.C.....
- Failure No.4 to consistently achieve correct hand position for E.C.C.....
- Failure to consistently achieve sufficient chest depth during E.C.C. ....
- Failure to attempt rescue breathing using oxygen equipment .....
- Failure of No.1 to maintain backwards head tilt.....
- Failure of No.1 to achieve jaw thrust to perform efficient mouth to mask resuscitation. ....
- Consistent failure by team to achieve correct chest inflation during rescue breathing using oxygen equipment. ....
- No.4 Occasional incorrect hand positions for E.C.C. ....
- No.4 Occasional incorrect pressure during E.C.C. ....
- Not maintaining a consistent rate during C.P.R. ....
- Not counting E.C.C compressions aloud (The ECC count shall be given aloud commencing with “1” then “5, 10, 15, 20, 25, 26, 27, 28, 29, 30”, or “1 to 30” or any other variation starting with “1 and ending with 30”). ....
- Incorrect rescue breathing technique by No.2 using oxygen equipment .....
- Incorrect jaw thrust grip for rescue breathing using oxygen equipment by No.1 .....
- Occasional incorrect airbag/mask seal during rescue breathing by No.1 .....
- Occasional over/under inflation of lungs by No.2.....
- No.2 Not observing the rise and fall of chest during rescue breathing .....
- Rough handling of patient.....
- Other deductions (specify).....

**Command given After 5 cycles: “Operators Halt, the patient is now breathing normally”**

- No.4 not declaring assessment that “Patient is now breathing normally” .....

**Record of timing for 5 complete cycles – 2 person C.P.R.**

**Note: timing to start on first compression and timing to stop at the completion of the 2<sup>nd</sup> rescue breath on the 5<sup>th</sup> cycle**

5 cycles completed in: .....

**Deductions:**

**Timing (B) Assessor to tick the appropriate timing deduction**

Section 3 – Lifesaving Events

Slower than 2:05.00 .....	4 point deduction	<input type="checkbox"/>
2:03.00 – 2:04.99 .....	2 point deduction	<input type="checkbox"/>
2:01.00 – 2:02.99 .....	1 point deduction	<input type="checkbox"/>
1:55.00 – 2:00.99 .....	Nil deduction	<input type="checkbox"/>
1:53.00 – 1:54.99 .....	1 point deduction	<input type="checkbox"/>
1:51.00 – 1:52.99 .....	2 point deduction	<input type="checkbox"/>
1:50.00 – 1:50.99 .....	3 point deduction	<input type="checkbox"/>
Faster than 1:50.00 .....	4 point deduction	<input type="checkbox"/>

**Note: Judges to finalise total deductions for the resuscitation practical**

**Note 2: Judges are not to confer on any observed faults. All judges need to have independently recorded the same major deduction for it to be accepted.**

<b>Number Major Faults</b>		<b>Number Minor Faults</b>	
<b>Timing Deductions</b>	(A)=	(B)=	(C)=
<b>Signature of Assessor</b>			

**APPENDIX D****Contents First Aid Kit**

The first aid kit shall contain as a maximum:

Item No	Maximum Size	Maximum Quantity	Item Description
1	n/a	10	Antiseptic wipes (not alcohol)
2	n/a	2	Disposable dressing trays
3	30ml	4	Sachets/steri-tubes antiseptic solution
4	15ml	6	Sachets/steri-tubes normal saline
5	n/a	50	Band-Aids
6	2.5cm	2	Conforming bandages
7	5cm	2	Conforming bandages
8	7.5cm	2	Conforming bandages
9	10cm	6	Crepe bandages
10	20cm x 20cm	6	Combine dressings
11	10cm x 10cm	8	Non-adherent sterile dressings
12	Standard	2	Cold packs
13	110cm	8	Triangular bandages
14	500mm	12	Safety pins
15	n/a	2	Padded splints (1 x arm and 1 x leg)
16	Single bed	1	Emergency rescue/space blanket
17	Single bed	1	Woollen/material type blanket
18	30cm x 40cm	6	Plastic bags
19	n/a	1 litre	Bags or plastic bottles of saline
20	20cm	1	Kidney dish
21	10cm	20	Gauze squares
22	7.5cm	1 roll	Adhesive tape/sticking plaster
23	2.5cm	1 roll	Paper/micro porous tape
24	Standard	2	Notebooks
25	n/a	3	Pens or pencils
26	n/a	10 pairs	Rubber gloves
27	18cm	2 pairs	Scissors – stainless steel
28	n/a	2	Pocket resuscitation masks
29	Standard	2	Bum bags
30	Standard	1	First aid kit/container clearly identified as a first aid kit

**Note 1:** Items with expiry dates prior to competition date may be used, but they must be clearly marked – “For Competition Use Only”. **Note 2:** “Size” and “Quantity” are estimated as the maximum allowable. **Note 3:** All items to be presented for scrutineering.



