

Level 3 Award in Emergency Paediatric First Aid

Specification Pack



CONTENTS

About NQual	
Qualification Specification	2
Qualification Information	2
Overview	2
Entry Requirements	3
Progression Opportunities	3
Unit Guidance	3
Mandatory Units	3
Guided Learning Hours	3
Total Qualification Time	3
Delivery Options	3
Simulation	4
Grading and Assessment	4
Approved Centre	4
Support From NQual	5
Initial Assessment	5
Reasonable Adjustment	5
Responsibilities	5
Mandatory Units	7
Emergency Paediatric First Aid	7





ABOUT NQUAL

NQual provides high-quality vocational and occupational qualifications designed to meet the needs of learners and employers.

At NQual we are committed to certificating current and relevant qualifications that meet the demands of today's everchanging industries. Our dedication to staying at the forefront of knowledge ensures that our qualifications reflect the latest trends in your field of interest.

QUALIFICATION SPECIFICATION

Qualification Specifications are used to inform and guide centres to deliver the qualification set out within this document. Information within this specification includes a qualification overview, unit breakdowns, assessment guidance and learning outcomes.

Alongside the specification, you will also find a qualification 'Fact Sheet'. These are used as handy tools to provide an overview of the qualifications.

QUALIFICATION INFORMATION

The NQual Level 3 Award in Emergency Paediatric First Aid is regulated by Ofqual.

Qualification Number: 610/2956/7

Overview

This qualification is designed to provide learners who are working in, or who are intending to work in, a childcare setting and who administer emergency paediatric first aid (PFA) to an infant or child who requires attention. This qualification can also be used for learners already working or preparing to work in the industry.

This qualification is based on the Statutory Framework for the Early Years Foundation Stage, setting the standards for learning, development and care for children from birth to five (March 2017) and the Childcare Act 2006.

At least one person who has a current paediatric first aid (PFA) certificate must be on the premises and available at all times when children are present and must accompany children on outings. All newly qualified entrants to the early years workforce who have completed a Level 2 and/ or Level 3 qualification on or after 30th June 2016, must also have either a full PFA or an emergency PFA certificate within three months of starting work in order to be included in the required staff: child ratios at Level 2 or Level 3 in the early years setting.

This qualification is valid for three years from the date of certification.

For the purpose of this qualification:

- An infant is defined as being under 12 months of age
- A child is defined as being between one year and puberty





Entry Requirements

• Minimum age: 14

There are no further entry requirements for this qualification.

Progression Opportunities

Learners who achieve the NEPA Level 3 Award in Emergency Paediatric First Aid will be eligible to gain employment in childcare settings. This employment would then allow progression to an Early Years or Children and Young People qualification, such as:

- Level 2 Diploma in Early Years Practitioner
- Level 3 Diploma in Early Years Educator
- Level 3 Award in Paediatric First Aid

When transferring the achievement of this unit to NEPAs Level 3 Award in Paediatric First Aid to NEPAs, there must be no more than 6 weeks between the completion of the two units.

Unit Guidance

Learners must achieve all mandatory units. The total credit value for this qualification is 1.

Mandatory Units

Unit Reference	Title	Level	GLH	Credit Value
L/650/7087	Emergency Paediatric First Aid	3	6	1

Guided Learning Hours

These hours are made up of contact time, guidance or supervision from course tutors, trainers, or training providers. The Guided Learning Hours for this qualification is 6.

Total Qualification Time

This is an estimate of the total length of time it is expected that a learner will typically take to achieve and demonstrate the level of understanding required for the award of this qualification. This includes the Guided Learning Hours and time spent completing the independent study.

The Total Qualification Time for this qualification is 7.

Delivery Options

NQual allows qualifications to be delivered both online and face-to-face. Please check the additional requirements with your Centre EQA if delivering qualifications online.

To deliver this qualification, centres must not exceed the ratio of 1 qualified tutor to 12 learners.

It has been agreed with the First Aid Awarding Organisation Forum (FAAOF) that centres must deliver courses with a minimum contact time of 6 hours over a period of at least 1 day.





The qualification has been developed with guidance from 'Delivery Standards for Regulated First Aid Qualification'. Centres should familiarise themselves with this documentation before delivery for more information about lesson plans, IQA, and equipment and venue requirements.

Simulation

Simulation is permitted.

The practical assessment is completed throughout the delivery of the course. Learners are required to demonstrate first-aid skills.

Grading and Assessment

Assessment is used to measure a learner's skill or knowledge against the standards set in this qualification. The assessment should determine a learner's ability to act safely, promptly, and effectively if an emergency was to occur and a casualty is involved. This qualification is internally assessed and externally quality assured.

All assessment criteria within the units must be assessed. Assessment may take place at any time during the delivery of the qualification and does not need to be done as a final assessment.

The assessment for this qualification consists of:

- Practical Assessment
- Completion of a workbook

The Practical Assessment must be documented for each learner and all practical skills-based criteria must be met to achieve a pass. The learner should meet all of the assessment criteria through the completion of a workbook and participating in the practical assessment.

If the assessment criterion uses the verb 'demonstrate' the learner must demonstrate the skill.

If a demonstration of a skill requires a complex sequence of actions (e.g. CPR, unresponsive casualty, choking and wounds and bleeding) each step in the sequence should be assessed.

NQual have a workbook for this qualification that providers can use to support delivery if required.

Approved Centre

To deliver any NQual qualification, each centre must be approved by NQual and meet the qualification approval criteria. The recognition process requires centres to implement policies and procedures to protect learners when undergoing NQual qualifications.

Approved centres must seek approval for each qualification they wish to offer.

The approval process requires centres to demonstrate that they have the resources, including staff, and processes in place to deliver and assess the qualification.

Once approved to offer this qualification, centres must register learners before any assessment takes place. Centres must follow NQual procedures for registering learners.





Support From NQual

NQual support all new and existing approved centres. We respond to all communication within 48 hours and hold regular information webinars. If you would like to book our next webinar, please visit the 'News & Events' section on our website.

Initial Assessment

It is part of the enrolment process by the approved centre to complete an initial assessment. Approved centres must ensure everyone undertaking an NQual qualification complete some form of initial assessment. This will be used to inform the tutor/trainer of current knowledge and understanding.

Reasonable Adjustment

NQual is committed to providing fair and reasonable adjustments for learners to help reduce the effect of a disability or difficulty that places the learners at a disadvantage during an assessment. For more information on Reasonable Adjustments, please see our Reasonable Adjustments and Fair Access Policy.

Responsibilities

Tutor/Trainer

Tutors/ Trainers who deliver NQual qualifications must possess a teaching qualification appropriate for the level they are delivering. Examples of these can include at least one of the following:

- Further and Adult Education Teachers Certificate
- Cert Ed/PGCE/B Ed/M Ed
- PTLLS/CTLLS/DTLLS
- Level 3 Award/4 Certificate/5 Diploma in Education and Training

Examples of evidence for subject knowledge can include:

- Qualification at the same level or above, the qualification you are delivering
- Extensive experience at the same level or above, the qualification you are delivering

In addition, those involved in the training of this qualification must have knowledge and competency in first aid, and must:

• Hold a relevant Level 3 First Aid at Work qualification or Level 3 Award in Paediatric First aid

or

- Have medical registration as a Doctor, Nurse or Paramedic
- Provide an acceptable training log of teaching first aid within the last 3 years
- Evidence a minimum of 3 hours of Continual Professional Development relevant to the Paediatric first aid subject specific.

Internal Quality Assurer

Centre staff who complete Internal Quality Assurance for NQual qualification must possess or be working towards a relevant qualification. Examples of these can include at least one of the following:

- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice
- V1 Conduct internal quality assurance of the assessment process





• D34 Internally verify the assessment process

Examples of evidence for subject knowledge must include at least one of the following:

- Qualification at the same level or above, the qualification you are quality assuring
- Extensive experience at the same level or above, the qualification you are quality assuring

In addition, those involved in the verification of this qualification must have knowledge and competency in first aid, and must:

• Hold a relevant Level 3 First Aid at Work qualification or Level 3 Award in Paediatric First aid

or

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- Have medical registration as a Doctor, Nurse or Paramedic
- Provide an acceptable training log of teaching first aid within the last 3 years
- Evidence a minimum of 3 hours Continual Professional Development relevant to the Paediatric first aid subject specific.



MANDATORY UNITS

Unit Breakdown: Level 3 Award in Emergency Paediatric First Aid

Learners must complete all mandatory units for this qualification.

Unit 1: Emergency Paediatric First Aid

Unit Code: L/650/7087

RQF Level: 3

	Learning Outcomes To achieve this unit a learner must be able to:	Assessment Criteria Assessment of these outcomes demonstrates a learner can:
1.	Understand the role and responsibilities of the paediatric first aider	 Identify the role and responsibilities of a paediatric first- aider
		 Identify how to minimise the risk of infection to self and others
		1.3 Differentiate between an infant and a child for the purposes of first aid
2.	Be able to assess an emergency	2.1 Conduct a scene survey
		2.2 Conduct a primary survey on an infant and a child
		2.3 Summon appropriate assistance when necessary
3.	Be able to provide first aid for an infant and a child who is unresponsive	3.1 Identify when to administer Cardiopulmonary Resuscitation (CPR)
		3.2 Demonstrate CPR using an infant and a child manikin
		3.3 Identify when to place an infant or a child into the recovery position
		3.4 Demonstrate how to place an infant and a child into the recovery position
		3.5 Demonstrate continual monitoring of breathing for an infant and a child whilst they are in the recovery position
		3.6 Identify how to administer first aid to an infant or a child who is experiencing a seizure
4.	child who is choking	4.1 Identify when an infant or a child is choking
child u		4.2 Demonstrate how to administer first aid to:
		an infant who is chokinga child who is choking
5.	child with external bleeding	5.1 Identify whether external bleeding is life-threatening
		5.2 Demonstrate how to administer first aid to an infant or a child with external bleeding
6.	Know how to provide first aid to an infant or child who is suffering from shock	6.1 Recognise when an infant or a child is suffering from shock

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Level 3 Award in Emergency Paediatric First Aid

	6.2 Identify how to administer first aid to an infant or a child who is suffering from shock
7. Know how to provide first aid to an infant or a child with bites, stings and minor injuries	 7.1 Identify how to administer first aid for: Bites Stings Small cuts Grazes Bumps and bruises Small splinters Nosebleeds

Indicative Content

1.1 Identification of the roles and responsibilities of a paediatric first aider may include:

- Preventing cross infection
- Recording incidents and actions
- Safe use of available equipment
- Knowledge of paediatric first aid contents
- Assessing an incident
- Summoning appropriate assistance
- Prioritising treatment
- Dealing with post-incident stress

1.2 Minimising the risk of infection may include:

- Personal Protective Equipment (PPE)
- Hand hygiene
- Disposal of contaminated waste
- Using appropriate dressings
- Barrier devices during rescue breaths
- Covering own cuts

Others may include: the infant or child receiving first aid; work colleagues; parents; carers; other people within the infant or child's environment.

1.3 Differentiating age ranges for first aid treatment may include:

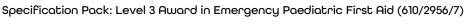
- Infants: under 1 year old
- Children: 1 to 18 years old

2.1 Conducting a scene survey may include:

- Checking for further danger
- Identifying the number of casualties
- Evaluating what happened
- Prioritising treatment
- Delegating tasks

2.2 The primary survey sequence may include:

- Danger
- Response
- Airway
- Breathing



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Circulation

2.3 Summoning appropriate assistance may include:

- Shouting for help
- Calling 999/112 via speakerphone or bystander
- Leaving the casualty to call 999/112
- Calling an NHS emergency helpline such as 111

3.1 Identifying when to administer CPR must include:

When the casualty is unresponsive and:

- Not breathing
- Not breathing normally/agonal breathing

3.2 Demonstrating CPR must include:

- 5 initial rescue breaths
- 30 chest compressions
 - Correct hand positioning
 - Correct compression depth for infant and child o 100-120 per minute
- 2 rescue breaths
 - Correct rescue breath positioning
 - Blowing steadily into the mouth (about 1 sec to make the chest rise)
 - Taking no longer than 10 seconds to deliver 2 breaths
- AED (Defibrillator)
 - Correct placement of AED pads
 - Following AED instructions CPR minimum demonstration time of 2 minutes (at floor level For child manikin).
- **3.3** Identifying when to place the casualty into the recovery position should include when the casualty has lowered levels of response and:
 - Does not need CPR
 - Is breathing normally
 - Is uninjured

An injured casualty may be placed in the recovery position if the airway is at risk (e.g. fluids in the airway or you need to leave the casualty to get help).

3.4 Placing a casualty into the recovery position may include:

- Placing in a position that maintains a stable, open, draining airway at floor level (or holding in position for infants)
- Continually monitoring the airway and breathing
- Turning the casualty onto the opposite side every 30 minutes
- 3.5 Continually monitoring airway and breathing includes:
 - Continual checking for normal breathing to ensure that cardiac arrest can be identified immediately

3.6 Administering first aid to a casualty having a generalised seizure may include:

- Keeping the casualty safe (removing dangers)
- Noting the time and duration of the seizure
- Opening the airway and checking breathing post seizure
- Determining when to call 999/112





4.1 Identifying mild choking may include recognising the casualty is able to:

- Speak
- Cough
- Cry
- Breathe

Identifying severe choking may include recognising the casualty is:

- Unable to cough effectively
- Unable to speak or cry
- Unable or struggling to breathe
- In visible distress
- Unconscious

4.2 Administering first aid for choking should include the following:

- Encouraging to cough
- Up to 5 back blows
- Up to 5 abdominal thrusts (chest thrusts for infants)
- Calling 999/112 when required
- CPR if unconscious Demonstration must be simulated using a training device not another learner.

5.1 Identifying the severity of arterial bleeding may include recognising the blood:

- Is under pressure
- Spurts in time with the heartbeat Recognition that arterial bleeding is a life-threatening emergency

Identifying the severity of venous bleeding may include recognising the blood:

- Volume in veins is comparable to arteries
- Flows profusely from the wound

Recognition that venous bleeding is a life-threatening emergency

For context - identifying capillary bleeding may include recognising that blood trickles from the wound. Capillary bleeding is not a life-threatening emergency.

5.2 Administering first aid for external bleeding may include:

- Maintaining aseptic technique
- Sitting or laying the casualty
- Examining the wound
- Applying direct pressure onto (or into) the wound
- Dressing the wound

Catastrophic bleeding treatment may include:

- Wound packing
- Tourniquet application
- Improvised tourniquet application
- 6.1 Hypovolaemic shock recognition may include:
- Pale, clammy skin
- Fast, shallow breathing
- Rise in pulse rate
- Cyanosis
- Dizziness/passing out when sitting or standing upright



6.2 Administering first aid for hypovolaemic shock may include:

- Treating the cause
- Casualty positioning
- Keeping the casualty warm
- Calling 999/112

7.1 Administering first aid for bites may include:

- Irrigation
- Dressing
- Seeking medical advice

Administering first aid for stings may include:

- Scraping off the sting
- Applying an ice pack
- Giving sips of cold water (if the sting is in the mouth)
- Monitoring for allergic reaction

Administering first aid for small cuts and grazes may include:

- Irrigation
- Dressing

Administering first aid for bumps and bruises may include:

• Cold compress for 10 minutes

Small splinter removal may include the following steps:

- Cleaning of area
- Remove with tweezers
- Dress

Administering first aid for a nosebleed may include:

- Sitting the casualty down, head tipped forwards
- Pinching the soft part of the nose
- Telling the casualty to breathe through their mouth

Unit Notes:

Stimulation is permitted in this unit.

Infant or a child: the learner may apply their skills or knowledge to either an infant (baby) or a child's first aid situation because the treatment would be the same.



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