



Lifeguarding

**BLENDED LEARNING
INSTRUCTOR'S MANUAL**

American Red Cross



American Red Cross Lifeguarding

**Blended Learning
Instructor's Manual**



American Red Cross

This instructor's manual is part of the American Red Cross Lifeguarding program. Visit redcross.org to learn more about this program.

The emergency care procedures outlined in this book reflect the standard of knowledge and accepted emergency practices in the United States at the time this book was published. It is the reader's responsibility to stay informed of changes in emergency care procedures.

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Updated in 2019 to reflect administrative changes for instructors and instructor trainers, including the launch of a new learning management system—the Red Cross Learning Center.

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Printed in the United States of America

ISBN: 978-0-9983745-2-9

Acknowledgments

The American Red Cross Lifeguarding Blended Learning Instructor's Manual was developed through the dedication of both employees and volunteers. Their commitment to excellence made this manual possible.

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The American Red Cross thanks:

Francesco (Frank) Pia, PhD, emeritus member of the Scientific Advisory Council, Alex Antoniou, PhD, Chief Marketing and Information Officer, National Swimming Pool Foundation and Jerome H. Modell, MD, emeritus Professor of Anesthesiology, Colleges of Medicine and Veterinary Medicine, University of Florida, for their contributions to this manual.

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Special Thanks

Special thanks to:

Lindsay O'Donnell, for her assistance in reviewing the *Instructor's Manual* and developing supplementary materials; Emma Reeners, Suzanne Ries and the lifeguarding staff at Florida Gulf Coast University; Mike Penzato, Pete Kekes and the lifeguarding staff from Adventure Island Waterpark and SeaWorld Parks and Entertainment; Kayla Carpentier, Jeremy Hall and the lifeguarding staff at Three Oaks Recreation Area, Crystal Lake; Octavio Carbajal and the lifeguards from Blue Island Park District, New York State Office of Parks, Recreation and Historic Preservation, the New York State Parks Water Safety Bureau and Parks Management, and lifeguards from Riverbank and Roberto Clemente state parks; Bill Kirkner, Mark Bonitabus, Sue Szembroth and the lifeguarding staff of the JCC of Greater Baltimore; Mike McGoun and the lifeguarding staff of the Coral Springs Aquatic Center; Angela Lorenzo-Clavell and the City of Chandler lifeguarding staff for opening their facilities to us for photography and video shoots. We would also like to express our appreciation to Simon Bruty, the Little Cabin Films crew, the Canadian Red Cross and the many volunteers who made the photos and videos a reality.

Table of Contents

Section A: Program Administration

INTRODUCTION

Chapter 1: Program Overview	2
Chapter 2: Becoming an American Red Cross Instructor	13
Chapter 3: Setting Up and Running Courses	16
Chapter 4: Teaching So That Every Participant Can Learn	22
Chapter 5: Conducting Effective Skill Sessions	27
Chapter 6: Course Completion	33

Section B: The Courses

LIFEGUARDING BLENDED LEARNING COURSE OUTLINES

Extended Outline	38
Intensive Outline	46

PRECOURSE SESSION

Precourse Session	52
Introduction to the Precourse Session	54
Verification of Age Prerequisite	56
Prerequisite Swimming Skills Evaluation ..	57
Wrap-Up	60
Skill Chart and Skill Assessment Tool	61

LESSON 1

The Professional Lifeguard	64
Introduction to the Course	65
Being Part of a Team	67

LESSON 2

Facility Safety and Patron Surveillance	70
Facility Safety and the Drowning Process ..	72
In-Water Skill Session: Entries and Approaches	72
Skill Charts and Assessment Tools	74

Section B: The Courses (cont.)

LESSON 3

Injury Prevention.....	76
Injury Prevention.....	78
In-Water Skill Session: Victim Recognition and Lifeguarding Rotations	78
Putting It All Together	80

LESSON 4

Water Rescue Skills.....	84
In-Water Skill Session—Rescue Skills Part 1.....	86
Putting It All Together: EAP Activity	89
In-Water Skill Session—Rescue Skills, Part 2.....	90
Putting It All Together	93
Skill Charts and Assessment Tools	95

LESSON 5

Before Providing Care, Victim Assessment and Breathing Emergencies.....	108
Standard Precautions	111
General Procedures for an Emergency on Land.....	111
Performing a Primary Assessment.....	112
Moving a Victim.....	115
Recognizing and Caring for Breathing Emergencies	116
Giving Ventilations	117
Giving Ventilations Using a Bag-Valve-Mask Resuscitator	119
Airway Obstruction.....	120
Skill Charts and Assessment Tools	122

Section B: The Courses (cont.)

LESSON 6

Cardiac Emergencies and Using an Automated External Defibrillator	130
Cardiac Arrest	133
CPR	134
Two-Rescuer CPR—Adult and Child	137
When the Heart Stops	138
Using an AED	138
CPR with Airway Obstruction	140
In-Water Skill Session:	
Putting It All Together	141
Putting It All Together: Multiple-Rescuer Response	143
Skill Charts and Assessment Tools	145

LESSON 7

First Aid	152
Secondary Assessment	154
Responding to Injuries	155
Putting It All Together:	
First Aid Scenarios	158
When Things Do Not Go as Practiced	164
In-Water Skill Session: Rescue Skills Review	165
Skill Charts and Assessment Tools	166

LESSON 8

Head, Neck and Spinal Injuries in the Water	172
Caring for Head, Neck and Spinal Injuries in the Water	174
In-Water Skill Session: Head, Neck and Spinal Injuries	175
Skill Charts and Assessment Tools	177

LESSON 9

Final Written Exam and Final In-Water Skill Scenarios	186
Final Written Exam: Section 2—Lifeguarding Skills	188
In-Water Skill Session:	
General Water Skills (Optional)	188
Final In-Water Skill Scenarios	189
Closing	191

Section C: Appendices

Appendix A: Sample Letters	194	Appendix F: About the Science	236
Appendix B: Activity Resources	200	Appendix G: Written Exam Answer Keys and Answer Sheets	240
Appendix C: Lifeguarding Video Segments	214	Appendix H: Participant's Manual Chapter Review Answer Keys	248
Appendix D: Common Participant Errors	218		
Appendix E: Participant Progress Log and Multiple-Rescuer Response Assessment Tools	224		

Section D: Aquatic Attraction Lifeguarding

Aquatic Attraction Lifeguarding (Water ≤ 3") Skill Charts and Assessment Tools	306
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SECTION A

PROGRAM
ADMINISTRATION

PROGRAM OVERVIEW

Program Purpose

The primary purpose of the American Red Cross Blended Lifeguarding course is to provide entry-level lifeguard participants with the knowledge and skills to prevent, recognize and respond to aquatic emergencies and to provide professional-level care for breathing and cardiac emergencies, injuries and sudden illnesses until emergency medical services (EMS) personnel take over. This program offers a choice of Lifeguarding/First Aid/CPR/AED courses to meet the various training needs of a diverse audience.

The care steps outlined within this manual are consistent with the 2015 International Liaison Committee on Resuscitation (ILCOR), Consensus on Science and Treatment Recommendations for CPR and Emergency Cardiovascular Care (ECC) and the 2015 American Heart Association and American Red Cross Guidelines for First Aid. This manual also reflects the *United States Lifeguarding Standards: A Review and Report of the United States Lifeguard Standards Coalition*, a collaborative effort of the American Red Cross, the United States Lifesaving Association and the YMCA of the USA.

Program Objectives

It is your responsibility as an instructor to make sure participants meet the learning objectives listed at the beginning of each lesson in this manual, and achieve the American Red Cross Lifeguarding program benchmarks. The following are program objectives:

- Meet the age requirement.
- Demonstrate proficiency in all of the prerequisite skills.
- Describe the characteristics and responsibilities of a professional lifeguard.
- Explain how to fulfill the responsibilities of a professional lifeguard.
- Define certain legal considerations and apply them to situations that might be encountered in lifeguarding.
- Describe ongoing training for lifeguards.
- Describe what it means to work as part of a lifeguard and safety team.
- Describe the role lifeguards play in ensuring facility safety.
- Identify how to ensure the safety of patrons when weather conditions create safety concerns.
- Describe the role that facility management plays in facility safety.
- Describe the drowning process.
- Identify the behaviors of a swimmer, distressed swimmer, and an active and a passive victim.
- Identify and define elements of effective surveillance.
- Explain proper scanning techniques and identify tactics to overcome scanning challenges.
- Identify various types of zones of surveillance.
- Explain how communication with patrons plays a role in preventing injuries.
- Explain patron surveillance techniques for various activities.
- Explain patron surveillance techniques for facilities with special attractions.
- Explain and demonstrate lifeguard rotations.

- Demonstrate how to perform effective surveillance including scanning, victim recognition and lifeguard rotations.
- Explain various types of drills that test lifeguard zones, recognition and response.
- Explain patron surveillance techniques for organized groups.
- Explain the purpose and general procedures of an emergency action plan (EAP).
- Demonstrate how to safely and effectively assist a distressed swimmer, rescue an active and a passive victim and rescue multiple victims.
- Demonstrate the ability to implement an EAP and perform a rescue.
- Demonstrate how to safely and effectively rescue a submerged victim in shallow or deep water.
- Demonstrate how to safely and effectively perform feet-first and head-first surface dives (Lifeguarding course only).
- Demonstrate how to safely and effectively extricate an unresponsive victim from the water using a backboard.
- Demonstrate how to put on gloves in a wet environment.
- Describe what standard precautions to take to prevent disease transmission when providing care.
- Demonstrate proper removal of disposable gloves.
- Describe the general procedures for injury or sudden illness on land.
- Identify items of concern when performing a scene size-up and forming an initial impression.
- Demonstrate how to perform a primary assessment for adults, children and infants and place a victim in a recovery position.
- Identify victim conditions that indicate the need to summon emergency medical services (EMS) personnel.
- Understand how to safely and effectively move a victim on land.
- Demonstrate how to use a resuscitation mask.
- Recognize and care for a breathing emergency.
- Demonstrate how to safely and effectively give ventilations.
- Demonstrate how to safely and effectively use a bag-valve-mask (BVM) resuscitation with two rescuers.
- Demonstrate how to safely and effectively care for an obstructed airway for a responsive and an unresponsive victim.
- Demonstrate the ability to work as a team to implement an EAP, perform a rescue and perform emergency care.
- Identify the five links in the Adult and Pediatric Cardiac Chain of Survival and identify the importance of each.
- Recognize the signs of a heart attack.
- Identify the steps for caring for a victim of a heart attack.
- Identify signs and symptoms of cardiac arrest.
- Demonstrate how to safely and effectively perform one-rescuer CPR and two-rescuer CPR.
- Demonstrate how to use an automated external defibrillator (AED).
- Identify precautions for using an AED.
- Demonstrate how to perform a secondary assessment.
- Identify how to recognize and care for a victim of sudden illness, injuries and shock.
- Demonstrate how to control external bleeding.
- Identify how to recognize and care for a victim of poisoning, heat-related illnesses and cold-related emergencies.
- Demonstrate the ability to work as a team to implement an EAP, perform a secondary assessment and provide first aid care.
- Identify possible causes of head, neck or spinal injuries on land.
- Identify signs and symptoms of head, neck or spinal injuries.
- Demonstrate how to care for victims with head, neck or spinal injuries on land.
- Demonstrate how to perform front and rear head-hold escapes.
- Demonstrate how to give in-water ventilations.
- Demonstrate how to perform a quick extrication of a victim from the water.
- Demonstrate how to care for victims with head, neck or spinal injuries in shallow and deep water.

- Demonstrate how to care for victims with head, neck or spinal injuries in shallow water only (Shallow Water Lifeguarding and Aquatic Attraction Lifeguarding).
- Demonstrate how to care for a victim with a head, neck or spinal injury in shallow water.
- Demonstrate how to rescue an active victim in deep water.
- Demonstrate how to rescue a submerged passive victim in deep water and provide care.
- Demonstrate how to rescue an active victim in shallow water (Shallow Water Lifeguarding only).
- Demonstrate how to rescue a submerged passive victim in shallow water and provide care (Shallow Water Lifeguarding only).

PROGRAM PARTICIPANTS

The intended audience for the courses in this program includes individuals who will work as lifeguards. The participants may be taking this training outside the traditional academic environment of a high school, college or university. Successful instructors understand participants' background and motivation and may modify their teaching style (not the course) accordingly.

- Participants could represent a broad range of backgrounds.
- They may differ in age or levels of maturity.
- They may differ in levels of education or experience.
- They are likely taking these courses to fulfill employment requirements.
- They may be taking these courses to provide for the safety and well-being of their friends, family and community or for personal satisfaction.

PROGRAM PREREQUISITES

- Entry into the American Red Cross Lifeguarding course is strictly limited to those who meet the minimum age requirement and have successfully completed the prerequisite skills evaluation. Failure to have attained the appropriate skill level could pose a safety threat to themselves and to others in the class.
- Participants in the Lifeguarding program must be 15 years of age on or before the last scheduled session of the course. Individuals who do not meet the age requirements for this course should be directed to another course that is appropriate for their age range (for example, Junior Lifeguarding). Please visit redcross.org for additional course information.
- If a candidate is not successful on the first attempt at the prerequisite skills, they only have one more opportunity to meet the prerequisites after sufficient rest, prior to the first scheduled class session.
- If the candidate does not successfully perform any of the prerequisite skills, suggest appropriate developmental training opportunities and explain the specific skills that the individual needs to improve to be eligible to participate in the Lifeguarding course in the future.

Program Prerequisite Skills			
	Swimming	Treading Water	Timed Event
Lifeguarding and Waterpark Skills Module	Swim 300 yards, continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both, but swimming on the back or side is not allowed. Swim goggles may be used.	Tread water for 2 minutes, using only the legs. Candidates should place their hands under their armpits.	<p>Complete a timed event within 1 minute and 40 seconds:</p> <ul style="list-style-type: none"> ■ Starting in the water, swim 20 yards. Swim goggles are not allowed. ■ Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object. ■ Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface to breathe (or to get a breath). ■ Exit the water without using a ladder or steps.
Shallow Water Lifeguarding	Swim 100 yards continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both but swimming on the back or side is not allowed. Swim goggles may be used.	Tread water for 2 minutes, using only the legs. Candidates should place their hands under their armpits.	<p>Complete a timed event within 50 seconds.</p> <ul style="list-style-type: none"> ■ Starting in the water, swim 20 yards using the front crawl or breaststroke. The face may be in or out of the water. Swim goggles are not allowed. ■ Submerge to a depth of 4 to 5 feet to retrieve a 10-pound object. Return to the surface and walk or swim 20 yards to return to the starting point with both hands holding the object at the surface of the water. ■ Exit the water without using a ladder or steps.

Program Prerequisite Skills, Continued			
	Swimming	Treading Water	Timed Event
Waterfront Lifeguarding	<ul style="list-style-type: none"> Swim 550 yards, continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both, but swimming on the back or side is not allowed. Swim goggles may be used. Additional Prerequisite: Swim 5 yards, submerge and retrieve three dive rings placed 5 yards apart in 4 to 7 feet of water, resurface and continue to swim another 5 yards to complete the skill sequence. 	Tread water for 2 minutes, using only the legs. Candidates should place their hands under their armpits.	<p>Complete a timed event within 1 minute and 40 seconds.</p> <ul style="list-style-type: none"> Starting in the water, swim 20 yards. The face may be in or out of the water. Swim goggles are not allowed. Surface dive, feet-first or headfirst, to a depth of 7 to 10 feet to retrieve a 10-pound object. Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface in order to breathe (or to get a breath).
Aquatic Attraction Lifeguarding	<p>Complete the water competency sequence without stopping.</p> <ul style="list-style-type: none"> Step into water from the side and totally submerge. Maintain position for 1 minute by treading water or floating (or a combination of the two). Rotate one full turn and orient to the exit. Level off and swim on the front or back 25 yards. Exit without using a ladder or steps. 	n/a	<p>Complete a timed event within 50 seconds without stopping.</p> <ul style="list-style-type: none"> Starting in the water, walk or swim 20 yards. Submerge to a depth of 3 feet to retrieve a 10-pound object. Return to the surface and walk or swim 20 yards on the back to return to the starting point with both hands holding the object at the surface of the water. Exit the water without using steps or a ladder.

- Current certification or a certification expired by no more than 30 days for the course being reviewed is a requirement for participation in the following review courses:
 - Lifeguarding review course
 - Aquatic Attraction Lifeguarding review course
 - Shallow Water Lifeguarding review course
 - Waterfront Skills review course
 - Waterpark Skills review course

PROGRAM COURSES AND MODULES

- The Lifeguarding core course includes Lifeguarding or Shallow Water Lifeguarding or Aquatic Attraction Lifeguarding and First Aid/CPR/AED. The following modules can be added to form a course. Lifeguarding add-on module courses may be combined with the core lifeguarding course.
 - Waterfront Skills module
 - Waterpark Skills module
- Waterpark Skills may also be combined with the Shallow Water Lifeguarding course.

The following optional modules can be taught separately or added to any course and do not require participants to gain a Lifeguarding certification:

- Asthma Inhaler Training
- Epinephrine Auto-Injector Training
- Tourniquet Application Training
- Bloodborne Pathogens Training
- Administering Emergency Oxygen

PROGRAM DELIVERY METHODS

There are two delivery methods available for the courses in the American Red Cross Lifeguarding program—classroom and blended learning. The blended learning option combines online learning with in-person skill sessions conducted by a Red Cross-certified instructor. Participants in blended learning courses acquire the same knowledge and skills as those in traditional classroom training courses.

PROGRAM INSTRUCTIONAL DESIGN

Blended Learning Course Design

The lesson plans employ a variety of methods to meet participants' needs for consistent, high-quality instruction and accurate information. To help participants acquire new information, build correct psychomotor skills, and develop decision-making and problem-solving skills, a variety of interactive activities are integrated into the lessons along with videos and skill demonstrations, skill sessions, traditional lectures and guided discussions.

The lecture points included in the lesson plans represent the fundamental concepts and specific content that instructors must communicate for participants to meet the associated learning objectives and successfully complete the skill sessions. The lecture points are written so they can be read aloud. The instructor can also rephrase the lecture points to fit their natural speaking style. The course presentation (similar to a PowerPoint presentation) includes the lecture points and visual aids to support participants' acquisition of the material.

Guided discussions and activities are designed to correspond with the lesson objectives and reinforce essential information that participants need to know. Guided discussions and activities allow the instructor the opportunity to assess participants' understanding of the material. The activities are to be conducted as designed and may not be changed or omitted. However, modifications can be made to accommodate participants with disabilities. For more information, see the *American Red Cross Inclusion Resource Guide*, located in the Resources section of the Red Cross Learning Center.

Video segments are shown both in the eLearning modules and in-person skill sessions and are designed to enliven the program by conveying key concepts and providing uniformly consistent explanations and demonstrations of skills. During the skill sessions, participants may use skill sheets (available in the participant's manual) as a guide. Skill charts and skill assessment tools for the instructor's use during the skill sessions are located in the instructor's manual at the end of all lessons that include skill sessions.

Aquatics courses include in-water skill sessions. Teaching progressions are used to provide the opportunity for participants to practice and gain experience in the water performing swimming and water rescue skills. The lifeguarding courses include:

- Skill sessions to learn new skills by guided practice and corrective feedback.
- Skill drills to allow practice of these newly learned skills. The drills are used to help reinforce the skills learned up to that point. Repetition is important as participants learn throughout the course.
- Putting It All Together activities and scenarios are used to apply information and skills learned by combining skills with critical thinking, decision-making and problem-solving in various situations. In order to successfully complete the course, participants must complete the final skills scenarios.
- Team (multiple-rescuer) skill practice focuses on team dynamics and communication emphasizing team coordination and management.

Skills can be quickly forgotten. The more participants have the opportunity to practice, the better their skill performance and retention will be.

When following the extended outline of the Blended Learning Lifeguarding course, homework is assigned between sessions. Examples include:

- Online assignments
- End of chapter review questions
- Reading assignments



Instructor's Note: *For reasons of educational quality and participant safety, the following skills taught in many American Red Cross courses are practiced only on a manikin and never on a real person: ventilations, chest compressions and AED pad placement.*

Participants demonstrate competency throughout the courses in the Lifeguarding program by actively participating in activities, guided discussions, skill sessions, skill drills and Putting It All Together scenarios that conclude most lessons in the program. In the courses that comprise the Lifeguarding program, written exams are required.

PROGRAM MATERIALS

Participant Resources

The *Lifeguarding Manual* has been designed to simplify learning and understanding of the material. The manual reinforces key points from the lecture portions of the course and contains skill sheets. It serves as an in-class tool and as a reference tool after the course is completed.

All participant resources are available for purchase at the Red Cross Store; the store is accessible via a link provided in the Red Cross Learning Center.

Digital course manuals are available for download upon launching the class. Go to the Red Cross Learning Center—Instructor Portal.

American Red Cross Lifeguarding Manual

The *Lifeguarding Manual* has been designed to simplify learning and understanding of the material. The manual reinforces key points from the lecture portions of the course and contains skill sheets. It serves as the required in-class text and is used as a reference tool after the course is complete. Participants should have access to their own manual throughout the course in either digital or print format. When using a digital manual, a tablet or laptop should be used to ensure proper viewing (the manual should not be displayed on a cell phone.)

Online Content for Lifeguarding Blended Learning Course

In the blended learning courses, the online component has been designed to instruct participants in the knowledge-based aspects of the Lifeguarding program, as well as to introduce them to the skills they will practice and master during the instructor-led portion of the training. Instructors should conduct brief, guided discussions on key online learning topics to ensure participants' questions are answered.

Instructor Resources

American Red Cross Lifeguarding Blended Learning Instructor's Manual

The Blended Learning Lifeguarding Instructor's Manual is available exclusively in digital format on the Red Cross Learning Center.

- **Section A: Program Administration** contains information needed to conduct the course and provides a course overview, explains how to set up and teach the course, gives requirements for successful course completion and describes what to do when the course is completed.
- **Section B: The Blended Learning Lifeguarding and Shallow Water Lifeguarding courses** include the course outlines and the lesson plans to teach the Blended Learning Lifeguarding and Shallow Water Lifeguarding courses. The lesson plans provide the instructor with the primary points to be covered in each lesson and with guidelines for classroom activities.
 - When following the intensive outline, participants are expected to complete all eLearning modules before attending the first in-person skill session.
 - When following the extended outline, at the end of each in-person session, remind participants to read the necessary chapters in the *Lifeguarding Manual* and to complete the required lessons in the Lifeguarding Blended eLearning component. These homework assignments must be completed before attending the facility-based sessions covering the same topics.
 - Before attending the in-person skill session, instructors should monitor the course completion status of each participant in the Red Cross Learning Center. The instructor can send out a reminder to any participants that they must complete the online content prior to the class.

- Two outlines are available in Section B to teach the Blended Learning Lifeguarding course:
 - The **Intensive Outline** is recommended for intensive class sessions held back-to-back, such as a long weekend class. The intensive outline is designed to allow participants to complete all eLearning content prior to the first in-person sessions. It is recommended that instructors who wish to follow the intensive outline conduct the precourse skills session before participants take the eLearning content. When following the intensive outline, instructors should check participant progress reports before beginning Lesson 1 to ensure that participants have completed all required eLearning content. Participants are required to complete all eLearning content prior to the first in-person session of the course. Participants must be given sufficient time to complete the approximately 7 hours of eLearning content.
 - The **Extended Outline** is recommended for classes held over a longer period of time (e.g., alternating days, several weeks or a semester). The extended outline is designed to allow participants to alternate between eLearning and classroom sessions with days or weeks between. When following the extended outline, instructors will check participant progress reports at the beginning of each lesson and assign eLearning content and reading as homework assignments at the end of each lesson.
- **Section C: Appendices** includes supplemental materials to support the courses in the Lifeguarding program, including the Final Written Exams, Answer Sheets and Answer Keys.
- The CPR/AED for Professional Rescuers and First Aid final written exam is taken online for the blended learning Lifeguarding and Shallow Water Lifeguarding courses. It is located in the conclusion module and must be successfully passed before the participant attends the final facility session. This must be confirmed by the participants' completion record. If the conclusion lesson is complete, the participant successfully passed the CPR/AED for Professional Rescuers and First Aid exam.

Video Segments

The video segments are an integral part of the course. Instructors are required to use the video segments where indicated in the *Blended Learning Lifeguarding Instructor's Manual* because they contain important information about key concepts and skills to help ensure the course objectives are met. Participants view most of the lifeguarding video segments in the eLearning section of the blended learning course. See Appendix D for a complete list of video segments included in this course. The courses in the Lifeguarding program cannot be conducted if the video segments are not available. They are included on the Lifeguarding program DVD, which is available for purchase on the Red Cross Store. The video segments are also available for streaming from the Red Cross Learning Center and embedded in the course presentations.

Course Presentations

The following course presentations to support the Lifeguarding program are available:

- Lifeguarding course presentation (for use with the Lifeguarding and Shallow Water Lifeguarding course)
- Lifeguarding course presentation for Blended Learning
- Aquatic Attraction Lifeguarding
- Waterfront Lifeguarding
- Waterpark Lifeguarding
- CPR/AED for Professional Rescuers (for the stand-alone CPRO course)

Similar to a PowerPoint presentation, each course presentation is an in-class visual aid that is projected onto a screen or viewing area. Instructors click through the presentation slides as they progress through the lessons.

The course presentations include lecture points, imagery and the required course video segments. To assist in teaching, slide references are included in the lesson plan along with the course presentation. The course presentation:

- Provides visual reinforcement of key points made during lectures and guided discussions.
- Provides visual aids that support activities and scenarios.
- Provides an alternate method of showing the video segments that support the course.
- Helps you deliver information in a more dynamic way by reducing dependence on the instructor's manual and allowing you the freedom to stand up and move around during the lesson.

Before conducting the course, become familiar with the presentation software and test the display of the system to be used. It is recommended that you have backup copies of the presentation in case technical difficulties occur.

The course presentations are available to download from the Red Cross Learning Center. The presentation is saved in PDF format. To view the presentation, save the file to your computer and double-click on the PDF icon to open it. Additional directions for using the course presentation are available on the Red Cross Learning Center. For online viewing (i.e., streaming from the Red Cross Learning Center) a high-speed Internet connection is required.

The course presentations that support the Lifeguarding program are also available on the Lifeguarding program DVD, which is available for purchase on the Red Cross Store.

THE RED CROSS LEARNING CENTER

The Red Cross Learning Center (redcrosslearningcenter.org) provides functionality for American Red Cross Training Services users to administer, track, report and deliver training as well as maintain certification data. The Red Cross Learning Center includes all the content used by students, instructors and training provider partner administrators in one place. Users will be able to access different resources and functionality based on user profile roles (as a student, as an instructor or as a partner administrator).

Students

Students (non-instructors) taking online only or blended learning courses will use the Red Cross Learning Center—Student Portal to:

- Access and launch online courses.
- Access relevant digital course materials.
- View their certifications.
- Link to the Red Cross Store to purchase course materials and supplies.
- Learn more about the science behind the course content.
- Learn about other opportunities, such as becoming an instructor.
- Get help from the Training Support Center.

Instructors

Red Cross instructors must be affiliated with an organization with a Red Cross Training Provider Agreement, or be a Red Cross Training Services employee or volunteer, to access the password-protected instructor portal view of the Red Cross Learning Center.

As a Red Cross instructor, you will use the Red Cross Learning Center—Instructor Portal to:

- Access and launch any online or blended courses you are taking.
- Access all instructor resources for teaching and administering courses such as:
 - Program and course materials – digital versions of participant manuals, instructor manuals, written final exams and instructor bulletins.
 - Teaching resources – streaming video segments and course presentations.
 - How-to information and videos.
 - About the Science sections, including expert answers to technical questions and research topics.
- Manage classes you are teaching by being able to:
 - Set up blended learning classes in advance.
 - Monitor student online course completion status.
 - Report and close out courses.
 - Provide digital certificates to students immediately.
- View class history details on all the courses you have taught.
- Manage your instructor certifications, with the ability to:
 - View your certifications.
 - Launch online instructor recertification and program update courses.
 - Learn about bridging to become an instructor in other program areas or becoming an instructor trainer.
- Stay abreast of the latest information.
 - Network with other instructors through the forum.
 - Read the latest news and iConnection newsletter from the Red Cross.

Partner Administrators

Training provider organizations can designate one or more individuals to the role of “partner administrator” to allow them to manage Red Cross-certified instructors affiliated with their organization. The partner view provides access to all resources and functions of the instructor view, plus additional functionality to manage instructors. The administrator role does not require an instructor certification.

Partner administrators use the Red Cross Learning Center—Partner Portal to:

- Manage Instructors.
 - Request to affiliate (add) and unaffiliate (remove) certified instructors to their organizations' Red Cross Training Provider Agreement.
 - View instructor list and reports on certification and expiration dates.
- Manage classes.
 - Utilize the Class Posting Service to list classes being offered by the partner on the Red Cross website.
 - Set up blended learning classes and assign instructors.
 - View online course completion status for all blended learning classes.
 - Close out and report classes on behalf of instructors.
 - View class history details for all classes.

BECOMING AN AMERICAN RED CROSS INSTRUCTOR

INSTRUCTOR REQUIREMENTS

Eligibility to Teach the Courses in the Lifeguarding Program

Lifeguarding instructors are eligible to teach the following Red Cross Lifeguarding courses and modules:

- Lifeguarding course
- Shallow Water Lifeguarding course
- Aquatic Attraction Lifeguarding course
- Waterpark Skills module
- Waterfront Skills module*
- CPR/AED for Professional Rescuers
- Basic Water Rescue
- Safety Training for Swim Coaches (after completing online orientation)
- Review courses (for the courses listed above)
- Water safety presentations
- Longfellow's WHALE Tales
- Junior Lifeguarding
- Asthma Inhaler Training
- Epinephrine Auto-Injector Training
- Tourniquet Application Training
- Bloodborne Pathogens Training
- Administering Emergency Oxygen (Lifeguarding instructors trained after January 3, 2017, are required to have a basic-level certification to teach this module)

**To become a Waterfront Lifeguarding instructor, current basic-level certification in the Waterfront Skills module is required. However, an instructor or instructor trainer is not required to maintain a Waterfront Skills basic-level certificate in order to maintain the instructor-level certificate.*

Maintaining Your Instructor Certification

Your certification as an instructor is valid for 2 years. To maintain certification as an instructor, you must:

- Teach or co-teach at least one of the following core courses of record during your 2-year certification period:
 - Lifeguarding
 - Shallow Water Lifeguarding
 - Aquatic Attraction Lifeguarding
- Successfully complete the Lifeguarding Instructor/Instructor Trainer Review course prior to your instructor certification expiration date.
 - Participation in the Lifeguarding Instructor/Instructor Trainer Review course meets basic-level skill competency requirements, but not basic-level certification. Instructors will have the option to achieve basic-level certification to work as a lifeguard at the conclusion of the Lifeguarding Instructor/Instructor Trainer Review course.
- Complete all applicable course updates prior to the update deadline.



Instructor's Note: As an instructor, you have a responsibility to monitor and maintain your Red Cross Learning Center profile. You must periodically verify that your contact information is accurate in the Red Cross Learning Center, including a current email address, phone number and mailing address. The Red Cross Learning Center will automatically track the expiration date of your instructor certification. Monitoring your profile and certifications within the system allows you to take appropriate actions to stay current in your certification.

Eligibility to Teach Other American Red Cross Programs

American Red Cross Lifeguarding instructors may qualify to teach additional Red Cross basic-level courses after successful completion of an instructor bridge course.

Available instructor bridge course options (depending on program):

1. Online bridge course
2. In-person or blended learning bridge course

Additional basic-level certifications may be necessary in addition to completing an instructor bridge course. The Instructor Bulletin for the specific program area lists the bridging options available as well as qualification requirements. Please check the specific program area of the Red Cross Learning Center for more information on any requirements needed to complete an instructor bridge.

INSTRUCTOR RESPONSIBILITIES

Your responsibilities as a certified Red Cross instructor include:

- Providing for the health and safety of participants by always ensuring:
 - Manikins have been properly cleaned according to "Recommendations on Manikin Decontamination," which is available on the Red Cross Learning Center.
 - Course equipment is clean and in good working order.
 - Participants are aware of health precautions and guidelines concerning the transmission of infectious diseases.
 - All participants have the physical ability to perform the skills and know they can consult you if they have concerns about their physical ability to do so.
 - The classroom, aquatic facility and all practice areas are free of hazards.
- Being familiar with and knowing how to effectively use program materials and training equipment.
- Informing participants about knowledge and skills evaluation procedures and course completion requirements.
- Creating a non-threatening environment that is conducive to achieving the learning objectives.
- Preparing participants to meet the course objectives.
- Conducting the precourse session to determine if participants have the prerequisite knowledge and skills to take the course.
- Providing participants an opportunity to evaluate the course.
- Adapting your teaching approach to match the experience and abilities of the participants, identifying participants who are having difficulty and developing effective strategies to help them meet course objectives.
- Supervising participants while they are practicing course skills and providing timely, positive and corrective feedback as they learn.
- Evaluating participants as they perform skills, focusing on critical performance steps as described in the skill charts.
- Being prepared to answer participants' questions or knowing where to find the answers.
- Administering and scoring the final written exams.
- Conducting courses in a manner consistent with course design.
- Teaching courses as designed—following all course outlines, policies and procedures as noted in the instructor course documents.

- Maintaining a current personal profile in the Red Cross Learning Center.
- You must close the course in the Red Cross Learning Center within the specified time frame (10 days).
- Being familiar with and informing participants of other Red Cross courses and programs.
- Representing the Red Cross in a positive manner and providing a positive example by being neat in appearance and not practicing unhealthy behaviors while conducting American Red Cross courses.
- Abiding by the obligations in the Instructor Handbook, *Instructor Agreement and Code of Conduct* and, if applicable, the *Red Cross Training Provider Agreement*.
- Promoting volunteer opportunities available through the Red Cross.

MAINTAINING CONSISTENT TRAINING STANDARDS

Quality, consistency and standardized delivery of courses are priorities of the American Red Cross. Red Cross courses are designed with standardized instructor outlines and lesson plans based on well-defined objectives to provide an optimal learning experience for the variety of participants who participate in the programs. To meet the objectives of the course and ensure standardized course delivery, the course outline and lesson plans must be followed.

Facility availability or constraints, specific instructor-to-participant ratios, equipment-to-participant ratios or participant needs may necessitate adapting the outline while still maintaining the educational progression of the course. Adapting the training does not mean that you can add to, delete or change the content. The course is laid out in a progressive way to allow the participants to learn in a predictable order as well as have sufficient time to practice.

Courses in the Lifeguarding program are designed to meet the training requirements of various aquatic facility settings, including pools, waterparks and waterfronts. Both the course participants and the organizations that hire lifeguards expect and depend on the quality training as outlined in the program.

The following course outlines in Section B are included to use when teaching the course. These outlines allow instructors to adapt the course schedule to meet their organizational and scheduling needs without sacrificing course content:

- Intensive Outline—All eLearning content must be completed prior to the first in-person skill session.
- Intensive Format—Participants must complete the assigned eLearning module(s) prior to attending the corresponding in-person skills session. eLearning content is assigned as “homework” after each in-person skill session.

SETTING UP AND RUNNING COURSES

SETTING UP AND CLOSING OUT A BLENDED LEARNING COURSE

All blended learning courses must be set up in the Red Cross Learning Center and include an online portion to be completed by the participant prior to the first class meeting. All courses should be set up at least 2 weeks prior to the first in-person session. This is to allow participants time to receive registration information and complete the required online content before attending the first in-person session.

The instructor can view the online completion status for each participant in the Classes I'm Teaching section of the Red Cross Learning Center. The instructor can send out a reminder to any participant that they must complete the online content prior to the class.

Once the blended course is set up and participants are enrolled, they will have immediate access to the online course and digital course materials in the Red Cross Learning Center. Once the instructor closes the course in the system, a system-generated email will send the certificate. For details on how to request to set up and close out a blended learning class, refer to the Resources section of the Red Cross Learning Center.

COURSE LENGTHS AND SCHEDULES

Classroom

The course outlines (see Section B) include course lengths. The times allotted in the course outlines include the minimum time required for covering the content and class activities and do not include breaks.

Lessons	In-Person Time	eLearning Time	eLearning Modules to be completed before attending In-Person Skill Session
Precourse	1 hr	n/a	n/a
1	15 minutes	20 minutes	<ul style="list-style-type: none"> Introduction The Professional Lifeguard
2	45 minutes	2 hours, 10 minutes	<ul style="list-style-type: none"> Facility Safety and Patron Surveillance
3	1 hour, 15 minutes	40 minutes	<ul style="list-style-type: none"> Injury Prevention
4	4 hours, 10 minutes	1 hour	<ul style="list-style-type: none"> Water Rescue Skills
5	1 hour, 40 minutes	40 minutes	<ul style="list-style-type: none"> Before Providing Care and Breathing Emergencies
6	3 hours, 15 minutes	45 minutes	<ul style="list-style-type: none"> Cardiac Emergencies and Using an AED
7	2 hours, 5 minutes	55 minutes	<ul style="list-style-type: none"> First Aid
8	2 hours, 25 minutes	30 minutes	<ul style="list-style-type: none"> Head, Neck and Spinal Injuries
9	3 hours, 5 minutes	Varies	<ul style="list-style-type: none"> Conclusion (includes CPR/AED for Professional Rescuers and First Aid final written exam)
Total	19 hours, 55 minutes	7 hours	

Course lengths are based on:

- A ratio of 10 participants to 1 instructor
- A minimum of 1 manikin and 1 AED training device for every 2 participants
- A minimum of 1 rescue tube for every 2 participants
- A minimum of 1 backboard for every 3 participants

Increasing one or more of these ratios may increase the pace of the skills practice sections of the course but will not reduce overall course time significantly. Therefore, courses are to be scheduled and expected to run for the designated course length, at a minimum.

The lesson plans in this manual must be followed as closely as possible, but facility constraints, specific instructor-to-participant ratios, equipment-to-participant ratios and participant needs (e.g., breaks) may increase course length. Other factors that may influence lesson planning include the following:

- Classroom availability and layout
- Pool availability and layout (depth, activities, lifeguard availability, etc.)
- Equipment availability
- Number of participants
- Skill level of participants
- Number of instructors

CLASS SIZE AND INSTRUCTOR-TO-PARTICIPANT RATIOS

The courses in the Lifeguarding blended program are designed for a ratio of 10 participants to one instructor. If your class is larger, you may not be able to properly supervise the course activities and skill sessions in the allotted time. Likewise, if there is fewer than the minimum number of participants, you may not be able to conduct course activities and skill sessions properly to meet course objectives.

If there are fewer than five participants, additional people certified in the program specialty area (lifeguarding/first aid/CPR/AED) must be added throughout the course to achieve the course objectives through practicing skills, scenarios, testing and other course activities. The instructor cannot act in the role of the assisting responder or victim in the skill practices and scenarios. At no time should a single instructor teach a course with fewer than five qualified participants.

If the course has more than 10 participants, another instructor should co-teach and the course may need to be extended. At no time should a single instructor attempt to manage a course with more than 10 participants.

CLASSROOM SPACE

The courses in the Lifeguarding Blended Learning program require a classroom space suitable for lecture, small group activities, role-playing activities, video presentations and skill sessions. The classroom should provide a safe, comfortable and appropriate learning environment. The room should be well lit, be well ventilated and have a comfortable temperature.



Instructor's Note: *If the area where skill sessions will be conducted is not carpeted, provide knee protection (such as folded blankets or mats) for use by participants or request that they bring their own padding materials.*

SWIMMING AREA

A pool is recommended for skill practice, practice teaching and skill evaluations. The pool must meet the requirements needed to conduct the following:

- A 300-yard swim that continuously demonstrates breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both, but swimming on the back or side is not allowed. Swim goggles may be used.
- Treading water using only the legs for 2 minutes.
- A timed event performed within 1 minute, 40 seconds. Starting in the water, swim 20 yards. The face may be in or out of the water. Swim goggles are not allowed. Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object. Return to the surface and swim 20 yards on the back to return to the starting point, with both hands holding the object and keeping the face at or near the surface in order to breathe (or get a breath). Candidates should not swim the distance under water. Exit the water without using a ladder or steps.
- A submerged victim rescue.
- A demonstration of how to care for a head, neck or spinal injury in deep water.

If a waterfront or waterpark facility is used, select a swimming area that has no surf, is free from obstructions, and has sufficient space and depth for skills practice, in-water activities, practice teaching and skills evaluations.

To ensure consistency in course delivery, facilities must be used that meet the guidelines for conducting the course activities. More than one facility can be used to accommodate the lesson plan activities.

An adequate number of certified lifeguards, sufficient to respond to an emergency per the facility emergency action plan, must be on duty during all in-water sessions. Lifeguard(s) with no duties beyond those of patron/participant surveillance must be present during all in-water activities. Course participants and/or instructor(s) may NOT act as the lifeguard on duty.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

The specific materials, equipment and supplies needed for each lesson are included at the beginning of the lesson. Instructors should have the specific equipment needed for the lesson ready prior to the start of the lesson. Supplies that instructors should have available include the following:

Equipment:

- CPR manikins
 - Adult and infant manikin (one for every two participants)
 - Child manikin (optional; one for every two participants)
- Resuscitation masks
 - Adult and pediatric pocket masks with a compatible one-way valve OR a combination mask (one for the instructor and one for each participant)
- Bag-valve-mask (BVM resuscitators)
 - Adult BVM (one for each adult manikin)
 - Infant BVM (one for each infant manikin)
 - Child BVM (optional; one for each child manikin)
- AED Training Devices with adult and pediatric AED pads (one for each set of adult and infant manikins)
- Rescue tubes (one for every two participants)
- Backboards with at least one strap and head immobilizer (one for every three participants).
- Timing device, such as a stopwatch or smartphone with a stopwatch feature (one per instructor)
- 10-pound object (a diving brick or weight—one for every five participants)

Supplies:

- Latex-free nitrile gloves
- Hip packs (one for each participant)
- Manikin decontamination supplies (decontaminating solution, 4" × 4" gauze pads, soap and water, brush, basins or buckets, latex-free nitrile gloves and any accessories that may be recommended by the manufacturer of the manikin)
- Blankets and/or mats (optional)
- Name tags (optional; one for each participant)
- Pens, pencils (one for each participant)

Technology:

- Desktop/laptop computer or tablet with power source and speakers, projector and projection screen/area or large monitor, **OR**
- Television with a DVD player (optional)
- Extension cord and grounded plug adapter, if needed

Course Materials:

- *Lifeguarding Instructor's Manual*
- *Lifeguarding DVD* set or *Lifeguarding* course presentation
- *Lifeguarding Manual*
- American Red Cross instructor identification

- Participant Skill Sheets (in each participant's *Lifeguarding Manual*)
- Final Written Exams A and B (one for each participant; available on the Red Cross Learning Center)
- Final Written Exam Answer Sheets (two for each participant; see Appendix G)
- Extra copies of Final Written Exam (Exams A and B) and Answer Sheets
- Skill Charts and Skill Assessment Tools (at the end of each lesson in the instructor's manual)
- Participant Progress Log (see Appendix F)

Waterfront Skills—Additional Materials, Equipments and Supplies:

In addition to the equipment, materials and supplies listed above, additional supplies are required for the Waterfront Skills course:

- Rescue board
- Three diving rings
- Mask, assorted sizes (one per participant)
- Fins, assorted sizes (one pair per participant)
- Waterfront course presentation or Lifeguarding course DVD
- Course-specific materials (written exams, answer sheets, answer keys)



Instructor's Note: *Equipment used during the course, including American Red Cross hip packs and a wide range of Red Cross retail products, is available on the Red Cross Store (redcrossstore.org). Hip packs are available with resuscitation masks, gloves and a whistle.*

CLASS SAFETY AND SUPERVISION

As a Red Cross instructor, it is important for you to make the teaching environment as safe as possible and to protect participants from health risks. The materials and procedures for teaching American Red Cross courses are designed to:

- Limit the risk of disease transmission.
- Limit the risk of one participant injuring another when practicing skills with a partner.
- Limit the risk that the activity involved in skill practice could cause injury or illness. Establish a “safe signal” for participants to communicate when practicing underwater skills or skills with physical contact (e.g., a pinch or tap indicating the rescue should be immediately stopped and participants should return to the surface).

Participants who feel they are at risk for injury or illness may become distracted. These same feelings may also affect your ability to teach. It is important to talk with participants who feel they are at risk and inform them of the precautions that are taken to limit and reduce the risk for injury or illness. There are several steps you can take to help increase class safety:

- **Prepare.** Consider possible hazards and manage safety concerns before a course starts. Often, you can foresee hazards and take steps to eliminate or control them long before participants arrive.
- **Arrange for assisting instructors, co-instructors or both.** Assisting instructors and co-instructors can help decrease risks by giving more supervision and reducing the instructor-to-participant ratio. They also increase participation and learning by providing more one-on-one attention to participants. When using assisting instructors or co-instructors, clearly define their roles and responsibilities. Doing so will help eliminate confusion and lapses in supervision. Remember that you are ultimately responsible for your participants' safety. To determine your staffing needs, consider the different ages and the individual abilities of participants. If your course has a large number of participants, you will need additional help.

Health Precautions for Course Participants and Considerations for Participants with Disabilities

Provide participants and, if necessary, their parents or guardians information about health requirements and safety before the course begins.

People with physical disabilities or certain health conditions may hesitate to take part in skill sessions. You should suggest that these participants (or, if the participant is a minor, the participant's parent or guardian) discuss their participation with a healthcare provider. Ask participants to tell you in advance if they are concerned about their ability to perform a specific skill.

Inform participants who cannot demonstrate the skills required for certification for the course that they would not receive a Red Cross course certificate. Encourage them to participate to the extent possible. The Red Cross advocates that instructors adjust activity levels to facilitate learning and to help meet course objectives when possible.

Guidance for course modification for a participant with a disability is provided in the *American Red Cross Inclusion Resource Guide*, located in the Resources section of the Red Cross Learning Center.

Additional Adult Supervision—Teaching Youth

The safety of all Red Cross course participants is paramount. For courses with participants younger than 18 years, ensuring participant safety includes providing adequate adult supervision. (Some states may define an adult as a person older or younger than 18 years. Follow local regulations.)

It is recommended that whenever a Red Cross course, activity or event is conducted involving youth participants, two adults should always be present at the facility to ensure participant safety. For Red Cross courses, the first adult would be the course instructor. The second adult might be a co-instructor, another participant or—in the event that the course audience is entirely comprised of youth—an instructor teaching another course in the facility or other responsible facility staff. Facilities should consider safety plans for youth participants that include the time before and after class.

TEACHING SO THAT EVERY PARTICIPANT CAN LEARN

PREPARING TO TEACH

Before you teach a lesson, you should read the lesson plan; review appropriate reference materials (such as skill sheets, skill assessment tools, eLearning content and the participant's manual); and gather necessary materials, equipment and supplies. The lesson plan contains the following:

- Lesson name
- Lesson length (the estimated amount of time needed to conduct the lesson)
- Guidance for the Instructor (objectives the instructor must meet in order to complete the lesson and meet the course requirements)
- Lesson Objectives (statements describing what participants will know or be able to do after successfully completing the lesson)
- Additional Materials, Equipment and Supplies (a list of the materials, equipment and supplies needed to teach the lesson)
- Session Preparation (tips on how to prepare for the lesson)
- Teaching Tips (teaching tips to remember)
- Topics (the major concepts to be covered in the lesson)
- Instructor's Notes (instructions and information related to conducting the lesson effectively)
- About the Science Notes (more in-depth information about the scientific basis for the information and skills taught in the lesson)
- Lesson Wrap-Up (assignments and end of chapter questions to provide participants with the opportunity to review what they have learned)

WORKING WITH YOUR AUDIENCE

Understanding your audience will help you engage your participants. If you can relate to your audience, you will be better able to provide a positive learning environment and maintain participants' self-esteem. In addition, understanding your audience allows you to help participants associate classroom information with personal experiences, which in turn can make guided discussions and activities more meaningful. Being aware that participants may come to the class with different levels of understanding and skill can help you better meet each participant's needs.

USING FACILITATION TECHNIQUES

As an instructor, you will use facilitation techniques to help participants acquire necessary information. Facilitation is based on the concept of pushing, pulling and balancing the flow of information. *Push skills* have to do with information flowing mostly from instructor to participants. *Pull skills* are used when the instructor engages participants using approaches that actively involve the participants in their own learning, such as by asking questions or facilitating interactive activities and guided discussions. *Balance skills* involve managing the push and pull of information to keep the learning process moving and to maximize learning.

When using facilitation techniques, keep in mind the following points:

- Maximize class interaction.
- Use pull skills to engage participants in classroom discussions and to keep discussions on topic or to provide necessary information. Pull skills are also useful for soliciting responses from different participants to prevent one participant from dominating the discussion.
- Promote an open exchange of information and ideas by asking open-ended questions (i.e., questions that begin with “who,” “what,” “when,” “where,” “why” or “how”), waiting for responses, listening, managing silence and referring participants’ questions back to the group for discussion and resolution.
- Ensure effective discussion sessions by giving and receiving feedback, maintaining an open perspective, creating a positive environment conducive to learning, staying on topic and managing time effectively.

Facilitation techniques allow you to evaluate participants’ knowledge and understanding throughout the course. In addition, facilitation:

- Gives you the opportunity to evaluate participants’ needs and focus the activities on those needs.
- Allows you to build on participants’ previous knowledge and skills.
- Allows participants to associate previous knowledge and skills with new information.
- Allows participants to learn from one another.
- Keeps participants engaged and interested throughout the course.

TEACHING PARTICIPANTS WITH DISABILITIES

You may have participants in your course who have disabilities or other health conditions. You may need to increase the amount of time that you spend with the participant or allow frequent rest periods, if necessary. When a participant with a disability can successfully meet course objectives, they should receive a course completion certificate. If a participant cannot meet the course objectives because of a disability, this should be communicated to the participant as early as possible.

Physical Disabilities

When helping a participant with physical disabilities to acquire the skills necessary for successful course completion, focus on the critical components of the skill that are needed to successfully meet the objective. Always teach to the standards set forth, but be aware that participants may modify how a skill is accomplished and still meet the objective, which allows them to successfully complete the course. See the *American Red Cross Inclusion Resource Guide*, located in the Resources section of the Red Cross Learning Center, for more information.

Learning Disabilities

A person who has a learning disability may tell you that they have not done well in educational settings or testing situations in the past. If you believe that a participant has a learning disability, discuss this with the participant privately without attracting the attention of the rest of the class.

Many learning disabilities affect a person's ability to acquire information through reading. Participants with limited English proficiency may also struggle with reading. You may also observe behaviors that suggest that a participant has difficulty with reading. For example, you may notice that a participant is not able to follow along with written material. The participant may offer an excuse, such as saying that they forgot their glasses. Modifications (such as reading material to participants, rather than having participants read the material to themselves) will allow the participant to participate fully in class. When administering the written examination, you may administer an oral exam instead. Please see the Red Cross Learning Center for guidance on giving oral exams.

STRATEGIES FOR HELPING PARTICIPANTS TO ACQUIRE INFORMATION



Delivering Information Through Lecture

Instructor presentation, or lecture, is sometimes the most effective way to deliver information. However, because lecturing is a passive way for participants to learn, it should be used sparingly. Too much lecturing causes participants to become disengaged, resulting in less effective learning.

In this instructor's manual, content that is to be delivered through lecture is designated with the lecture icon. Lecture points contain information that must be communicated to participants and are written so that they can be read aloud from this manual. You may rephrase lecture points to fit your own natural speaking style; however, if you choose to rephrase lecture points in your own words, it is important that you fully understand the course content so that you can rephrase without changing the meaning of the lecture point. Participants who are visual learners often benefit from seeing the lecture points in written form. If you are using the course presentation, the main points for the lecture are included on the accompanying slide. If you are not using the course presentation, it is often helpful to write bullet points on a whiteboard or easel pad before the class to facilitate the learning process.

When delivering a lecture, it is important to be dynamic and engaging. One way to accomplish this is to prepare for interactive lectures. An interactive lecture will have opportunities for two-way communication between participants and the instructor as well as among the participants themselves. To prepare an interactive lecture, keep the following suggestions in mind:

- Ensure that you understand the purpose of the lecture and plan accordingly.
- Feel free to rephrase the lecture points to fit your natural speaking style.
- Prepare lecture notes so that you can avoid reading from the instructor's manual while lecturing.
- Maintain a learner-centered focus.
- Use analogies to help create a bridge between lecture material and participants' experiences.
- Strive for interaction with participants during lectures.
- Encourage participants to add to the lecture.
- Keep the lecture moving—avoid long stories of personal experiences.



Using Guided Discussion

Guided discussions are another way of conveying and reinforcing course content. In this instructor's manual, content that is to be delivered through guided discussion is designated with the guided discussion icon. Guided discussions serve to:

- Monitor and evaluate participants' level of understanding.
- Increase comprehension (i.e., when one or more participants do not understand something, the discussion may offer an alternative explanation that clarifies the information).
- Allow participants to use existing knowledge and experience as a springboard for acquiring new information.
- Focus participants' attention on the topic.
- Ensure that all required content for the topic is covered.

The ability to introduce questions that prompt discussion is an important aspect of facilitating good discussions. As you lead question-and-answer sessions during the lesson, ask for volunteers to provide answers. Waiting up to 10 seconds for an answer can help encourage hesitant participants to answer. Call on participants by name if you are having a hard time finding volunteers. However, do not insist that all participants provide answers. Participants can still benefit from this approach to learning, even if they appear reluctant to answer questions themselves.

Ideal responses are provided for each question. Answers labeled "Responses could include" are examples of one or more possible correct answers. For these questions, an example of a correct answer is provided in case participants are unable to come up with the correct answer(s) on their own. Answers labeled "Responses should include" are the correct answer(s) that must be covered. In this case, the instructor must provide any or all of the answers if participants are unable to come up with the correct answer(s) on their own.



Using Video Segments

Video presentations, designated with the icon in this instructor's manual, are used to demonstrate skills, convey key concepts or support activities.



Conducting Activities

Activities are included throughout the course to give participants the opportunity to apply knowledge and solve problems. Many activities allow participants to associate course concepts with their own personal experience. In this instructor's manual, activities are designated with the activity icon.

Activities done as a group promote interaction among participants. *Small-group activities* require two to four participants to work together to solve a problem or complete an activity. Small-group activities allow participants to use one another's knowledge to solve problems and learn from others' experiences. *Large-group activities* involve a larger group or the entire class. *Large-group activities* provide the opportunity to exchange ideas, discuss problems and think about the many ways to solve a problem.

When conducting group activities, you should specify both the size and makeup of the groups. Form groups using the fewest number of participants necessary to conduct the activity. Form new groups for each activity. Changing group members for each activity promotes class cohesion, avoids situations in which one or more participants feels left out and keeps friendships from taking precedence over learning. Using an arbitrary selection criterion each time you form groups will help you vary group makeup and give participants the chance to interact with many different classmates. For example, you could form groups by asking participants to:

- Find the person whose birthday is closest to their own and form a pair.
- Find the person who lives the farthest from them and form a pair.
- Find the other people in class whose birthdays are in the same season (winter, spring, summer or fall) as their own and form a group.

Conducting Scenarios

Many activities in American Red Cross courses are scenario-based. Scenario-based activities focus on developing critical thinking, problem-solving and communication skills and give participants an opportunity to apply recently acquired knowledge and skills. The scenario typically begins with a description of the situation and scene, and prompting is used to facilitate participants' progression through the scenario. Once the scenario is complete, a debriefing or review session may be held to reinforce key points, evaluate performance or both.

To conduct scenario-based activities, have participants form groups, distribute any supporting materials to each group and then communicate the set-up for the scenario used. Participants will then take on various roles (e.g., lifeguard, victim, additional responder) and work together to complete the scenario. (Ensure that participants switch roles between scenarios so that every participant has the opportunity to play each role at least once.) The groups complete the scenario at the same time. During the scenarios, your focus should be on helping participants apply the knowledge and skills covered in the course to the simulated emergency situation. Step in and provide guidance only if absolutely necessary.

Although participants are expected to act on the basis of their training, they should be encouraged to work together and use reference materials (such as skill sheets or the *Lifeguarding Manual*) as needed. Because the purpose of the scenario is to simulate responding to a real emergency situation, the instructor should give prompts according to the scenario. These prompts provide only the information necessary for the lifeguard and/or assisting responder(s) to make decisions and provide care. If the lifeguard and/or assisting responder(s) have difficulty determining the correct next step, the instructor should provide corrective feedback. Because the skills may still be relatively new, it is OK if participants hesitate, start and stop, self-correct or otherwise momentarily interrupt the skill during scenarios.

To achieve certification, participants must successfully participate in all Putting It All Together scenarios. Successful participation means that a participant went through each scenario (as the lifeguard and assisting responder) with minimal guidance from the instructor.

CONDUCTING EFFECTIVE SKILL SESSIONS

INSTRUCTOR RESPONSIBILITIES DURING SKILL SESSIONS

Skill sessions are a critical component of most American Red Cross courses. During the skill sessions, participants are learning and perfecting skills. For maximum efficiency and the best learning outcomes, skill sessions should be well organized and well managed. For a successful skill session, instructors must provide direction and instruction, ample practice time, encouragement and positive reinforcement, and corrective feedback. During skill sessions, instructors are responsible for:

- Demonstrating the skill or skill components and guiding participants through the skill.
- Keeping the session running smoothly.
- Providing sufficient time for all participants to practice the skill.
- Ensuring that participants can see the video monitor when appropriate.
- Helping participants form pairs, if necessary, and making sure that participants have the necessary equipment for skill practice.
- Closely supervising participants as they practice.
- Identifying errors promptly and providing appropriate feedback to help participants improve.
- Checking each participant for skill competency.
- Maintaining a safe, positive learning environment.
- Encouraging participants to improve and maintain their skills.
- Providing global and individual feedback to course participants.

During every skill session, circulate to monitor participants' progress and provide assistance and corrective global and individual feedback as necessary.

HOW PARTICIPANTS LEARN SKILLS

When teaching skills, keep the following points in mind:

- Course skills are complex. Participants often have some difficulties when they first begin.
- The skills taught will likely be new to most participants; therefore, participants may require frequent one-on-one attention.
- Skills are learned by hands-on practice. Immediate success in demonstrating the skill is unlikely. Refinements in technique take time and practice. Allow participants multiple opportunities to practice skills.
- Skills require a defined sequence of movements. Participants should consistently follow this sequence when learning skills.
- Learning times for each skill differ, because some skills are easier than others.
- Participants have different learning rates. Take individual differences into account.
- Skills, especially the individual components, are quickly forgotten. Frequent practice improves skill retention.



Instructor's Note: Allow participants sufficient time to practice the skill until they are able to meet performance criteria. The length of the skill session will vary based on the complexity of the skill, the instructor-participant ratio and whether or not participants need to take turns using equipment (e.g., manikins).

APPROACHES TO PRACTICING SKILLS

Orienting participants to the skill session will help them get started quickly and practice more efficiently.

Instructor-Led Practice

In the instructor-led practice approach, the instructor guides participants through each step of the skill while checking on participants to ensure that all in the group complete the steps properly as the instructor calls them out. Instructor-led practice can be used to focus on a skill or part of a skill. This approach is particularly useful for introducing new skills that build on previously learned skills, or when participant safety is a concern.

When you lead the practice, position yourself so that you can see everyone. It may help to have participants' heads pointing in the same direction and their partners in the same relative position next to them. Being able to see everyone allows you to monitor skill performance as well as ensure participant safety.

Partner-Based Practice

A partner-based practice approach is useful for providing participants with experience in giving care to a real person. One participant acts as the injured or ill person while the other gives care. When using a partner-based practice approach:

- Allow participants to choose their partners. Some participants may be reluctant to practice with participants of the opposite gender. Instructors should accommodate participants' preferences.
- Ensure that participants exchange roles so that each participant has a chance to practice the skill.
- Do not allow participants to engage in horseplay, which can lead to injury.



Instructor's Note: For reasons of educational quality and participant safety, the following skills taught in many American Red Cross courses are practiced only on a manikin and never on a real person: ventilations, chest compressions and automated external defibrillator (AED) pad placement.

Reciprocal Practice

In a reciprocal practice approach, participants working in pairs or groups observe each other's performance and provide guidance and feedback. The goal is for the participant doing the skill to demonstrate the skill correctly without any assistance from their partner. For this approach to be effective, the instructor must clearly identify the performance criteria. During reciprocal practice, move among participants and observe to ensure that they are practicing the skills correctly and are receiving appropriate feedback from their partners. Provide feedback as appropriate and assistance as needed.



Instructor's Note: When using the reciprocal practice approach to skill practice, if you observe that a participant correctly demonstrates the skill from start to finish without assistance and at the level of proficiency indicated on the skill assessment tool, you may check off that person's skill on the Participant Progress Log and let the participant know that no further demonstration of that skill is required.

Video Segments

In American Red Cross courses, video may be used in different ways to support the skill sessions.

Watch-Then-Practice

In the watch-then-practice approach to skill practice, participants watch a video segment demonstrating the skill, and then they practice the skill. After showing the video, guide participants through the steps of the skill (referring participants to the skill sheet as needed), and then encourage them to practice independently without assistance. Intervene and provide positive and corrective feedback as needed.

Practice-While-You-Watch

In the practice-while-you-watch approach to skill practice, participants practice the skill along with a video, which provides audiovisual cues. The practice-while-you-watch approach has the following benefits:

- It provides a consistent model demonstration of the skill using a methodical instructional approach.
- It allows the instructor to focus on evaluating skill performance as the participant learns, which in turn allows the instructor to identify and correct errors in technique earlier in the learning process.
- It maximizes the effectiveness of training and increases the time allotted for skill practice.

Skill Drills

Skill drills are used to help reinforce the skills learned up to that point in the lesson and require participants to perform multiple skills in succession. Skill drills provide an immediate opportunity to put the “total picture” into practice.

Putting It All Together Scenarios

Once new skills are learned, additional class activities provide the opportunity to practice newly learned skills as well as use decision-making abilities in various situations. The scenarios help to reinforce learning by drawing on participants' skills and decision-making abilities in various situations. They are also included as a review during which participants can recall and apply the information learned in the course such as:

- First aid scenarios
- Putting It All Together activities
- Multiple-rescuer response scenarios

SETTING UP SKILL PRACTICE SESSIONS

Land-Based Skill Practice

When arranging the classroom for skills practice, ensure that there is an adequate amount of equipment and supplies for the number of participants in the class. Arrange the skill practice area so that each participant has ample room to view the demonstration (video or instructor), move about, practice the skill, ask questions and receive feedback on their performance. Also ensure that you and your fellow instructors can see the participants, move from person to person, and provide feedback and oversight at all times. When using skill sheets, distribute copies of each sheet to each participant to use as a guide or refer participants to the appropriate skill sheet in their participant's manual. When participants are working in pairs, encourage communication among the group and peer-to-peer learning using the skill sheet.

When the participants are practicing on manikins, the manikins' heads should be pointing in the same direction, and all the participants should be in the same position next to the manikins. If the participants are practicing on partners, being able to see everyone allows you to judge skill competency as well as ensure participant safety.

In-Water Skill Demonstration and Practice

In the Lifeguarding program, the in-water skills performed have multiple actions occurring simultaneously. If necessary, skills should be demonstrated in exactly the same manner from the front, back and both sides. This allows participants to see all sides and angles of a sequence. In some cases, this may not be possible, such as with an entry from a lifeguard stand. However, the more participants can see, the better they will conceptualize a skill.

If a skill is only demonstrated from one side or angle, the secondary actions may be missed and the total picture will be incomplete. This is particularly true for skills that involve actions both above and below the water. A demonstration by the instructor is also often included so that the participant understands what is to be performed and has a model to follow. The instructor demonstration is also beneficial when providing corrective feedback during skill practice sessions.

For each skill practice, organize participants so they can clearly see and hear. Pair up participants and explain that they will take turns as a victim and rescuer for each skill. For skills and scenarios requiring more than one rescuer, reassign participants into larger groups. Be sure to provide any instructions related to their position in the water and how they should behave as victims. Instruct participants that if they experience difficulty when playing the role of a victim, they should use the predetermined safety signal, such as a tap or gentle pinch to communicate that the rescue should be immediately stopped. Throughout the practice session, maintain a safe environment and ensure you can clearly observe class participants. It is beneficial for certain skills to be demonstrated, and then practiced, on land first before the in-water skill demonstration and practice. These skills include but are not limited to the submerged victim rescue and feet-first surface dive.

RUNNING SKILL PRACTICE SESSIONS

The instructions in the skill practice sessions are condensed for ease of use. However, during every skill practice session, circulate among groups to monitor progress and provide assistance when necessary. For the benefit of all course participants, provide global feedback (feedback to the entire class) during skill practice to correct common mistakes or commend correct skill practice. Participants should practice the skills until they are able to meet performance criteria. Observe each participant's performance of the skill and provide corrective individual feedback using the skill charts and skill assessment tools.

Helping Participants to Practice Correctly

Practicing a skill helps learning only when the skill is performed correctly. One of your most difficult challenges as an instructor is to ensure that participants practice correctly. Continually monitor all participants, watching for errors participants make while practicing. (A summary of common errors that participants make when practicing the skills in the program can be found in Section E of this blended manual.) Correct any problems you notice as soon as possible using global or individual feedback to prevent participants from continuing to practice incorrectly. While you are working closely with one participant, check others with an occasional glance. Encourage participants to ask questions if they are unsure how to perform any part of a skill.

A positive learning environment is important. Participants perform best when you keep them informed of their progress. When participants are practicing correctly, provide positive feedback that identifies what they are doing correctly. If participants are practicing incorrectly, provide specific, corrective individual feedback and have them practice again. Before saying what they are doing wrong, tell them what they are doing correctly. Then tactfully help them improve their performance.

When giving feedback, keep the following strategies in mind:

- Be specific when providing feedback.
- If the error is simple, explain directly and positively how to correct the skill performance. For example, if the participant is having trouble finding the proper hand placement for CPR, you might say, “The steps leading up to beginning CPR are good; now try finding the center of the chest for compressions. That will be the spot you want to aim for.”
- Show the participant what they should be doing. For example, in addition to telling the participant that the hands should be placed in the center of the chest for compressions, demonstrate the proper hand placement.
- Explaining why the skill should be performed in a certain way may help participants remember how to perform the skill correctly. For example, if a participant continually forgets to check the scene for safety as part of the scene size-up, you might remind the participant that failing to check for safety before going to another’s aid can put the lifeguard at risk for injury or illness as well.
- If a participant has an ongoing problem with a skill, carefully observe what they are doing. Give specific instructions for performing the skill the correct way and lead the participant through the skill. It may help to have the participant state the steps back to you for reinforcement.
- Emphasize the critical performance steps, focusing on those steps that make a difference in the successful completion of a skill.
- Have the participant practice again after the corrective feedback.
- During skill sessions, resist telling participants anecdotes, which can distract or confuse them.
- Remind participants what they are doing right and what they need to improve. Use phrases such as “Your arms are lined up well, but try to keep them as straight as possible while giving compressions to help ensure that they are effective.” Help participants focus on the critical components of each skill.

Coaching Versus Prompting Participants

The desired outcome of each skill session is for participants to demonstrate a skill correctly from beginning to end without receiving any assistance from you or a partner or referring to the skill sheet. Because participants learn at different rates, bring different levels of knowledge to the course and learn in different ways, you will most likely need to coach or guide participants as they first learn skill elements. Coaching occurs in the initial phases of skill practice and allows you to give participants information that they need to establish the sequence, timing, duration and technique for a particular skill. When coaching (also known as guided practice), provide information such as the sequence of steps in a skill. Statements such as “Size up the scene” or “Check the person for responsiveness” are examples of coaching.

Once guided practice ends and independent demonstration of a skill begins, you should change tactics and shift to prompting. Prompting allows you to assess the participant’s ability to make the right decision at the right time and give the appropriate care. Because participants are expected to demonstrate the skill without any assistance, when you prompt someone, provide only the information necessary for the participant to make a decision and give care. In other words, you should give information only about the conditions found. For example say, “The person is unresponsive,” instead of “Call 9-1-1.”

Evaluating Skill Performance

Skill Charts and Skill Assessment Tools are provided in this manual to assist you in evaluating participants' mastery of the skill. Before conducting a course, become familiar with the Skill Charts and Skill Assessment Tools, found at the end the lesson in which the skill is practiced. Skill Charts provide step-by-step descriptions of the skills participants must master to pass the course. The Skill Assessment Tools summarize the objectives that must be met for correct performance of the skill, along with descriptions of actions that constitute proficiency and non-proficiency. The Skill Assessment Tools include specific depths, ranges, rates, intervals, times and other quantifiable elements by which to assess skill performance. In addition to performing the steps listed in the Skill Chart in the correct order, participants must meet the objectives listed at the proficient level on the Skill Assessment Tool before they can be checked off for a skill. Objectives that are general for the category of skills, as well as specific to the skill, must be met. It is your responsibility as the instructor to observe participants' skill performance to determine whether they are performing the skill correctly with respect to sequence, timing and duration, and whether they are meeting the established skill proficiency criteria.

Instructors must focus on the successful completion of an objective as opposed to perfecting every individual skill. For example, a participant who has arthritis in their hands can still perform effective chest compressions by grasping the wrist of the hand positioned on the chest with their other hand, instead of placing one hand on top of the other and interlacing the fingers. In this example, the participant may continue the course and still receive certification, since the skills needed to prevent injury or save a life may need modification, but the result is the same. Additional information on adjustments to training can be found in the *American Red Cross Inclusion Resource Guide*, located in the Resources section of the Red Cross Learning Center.

Many American Red Cross courses provide Participant Progress Logs to track each participant's completion of the requirements for certification. During the skill session, check off each skill as completed on the Participant Progress Log once the participant has demonstrated proficiency in it. To complete the course requirements and receive a completion certificate, a participant must be able to complete the required skills proficiently without any coaching or assistance.

COURSE COMPLETION

CRITERIA FOR COURSE COMPLETION AND CERTIFICATION

Many agencies, organizations and individuals look to the American Red Cross for formal training that results in certification. *Red Cross certification* means that on a particular date, an instructor verified that a course participant could demonstrate proficiency in all required skills taught in the course. *Proficiency* is defined as being able to perform each skill to meet the objective without guidance and apply those skills in a simulated emergency. Achieving certification does not imply any future demonstration of the knowledge or skill at the level achieved on the particular date of course completion.

On successful completion of a course in the Lifeguarding program, participants receive American Red Cross certification specific to the course they completed. Participants can access the digital certificate through an email with a link once the course has been closed. Participants who took a blended learning class can also view their certificates on the Red Cross Learning Center—Student Portal. The digital certification will contain an alpha-numeric identifier and Quick Response (QR) code and can be viewed, printed or shared online.

To successfully complete the Lifeguarding Blended Learning course, the participant must:

- Attend the entire course and participate in all class sessions.
- Actively participate in all course activities, including assuming various roles during scenarios.
- Demonstrate competency in all required skills.
- Pass the final skills scenarios.
- Complete all eLearning content, including the eLearning written exam (CPR/AED for Professional Rescuers and First Aid).
- Successfully pass final written exams with a minimum grade of 80 percent. If a participant fails to reach the minimum 80 percent on the final written exam, a retest is allowed using the other version of the exam, provided that the learner has passed the final skills assessment.

Participants must be told of the requirements when they enroll for the course and again during the course introduction. Remember to provide ongoing individual feedback to participants about their performance throughout the course. Feedback should be ongoing, so there are no surprises if a participant's performance is evaluated as unacceptable.

SKILL COMPETENCY

To complete the course requirements and receive a completion certificate, a participant must be able to complete all required skills proficiently without any coaching or assistance. A participant's performance is proficient or not proficient based on the performance of the critical components of a skill that are necessary to meet the objective.

FINAL WRITTEN EXAMS

There are two versions of each written exam, and thus, participants have two opportunities to take each exam. Participants are required to answer the questions without assistance from the instructor trainer. If an accommodation is requested by the participant, the instructor trainer may read the exam questions to the participant. Participants are required to pass both final written exams in order to receive certification in American Red Cross Lifeguarding/First Aid/CPR/AED. Final written exams to support the modules in the Lifeguarding program are available on the Red Cross Learning Center.

Administering Exams

When administering a written exam, you must use the exam provided and may not substitute exam questions. Either Exam A or Exam B can be used. Administer only those exams for the components that are included in the course (shown below) being taught:

- Lifeguarding
- Shallow Water Lifeguarding
- Aquatic Attraction Lifeguarding
- CPR/AED for Professional Rescuers and First Aid*
- Waterfront Skills
- Waterpark Skills

**Completed at the conclusion of the eLearning section.*

To pass the written exam, participants must score 80 percent or better on each exam section. If a participant does not achieve a score of 80 percent, they have the opportunity to take the alternative exam. Instructors may allow participants who passed the exam to review questions they missed; however, graded answer sheets and written exams must be returned to the instructor.



Instructor's Note: *It is acceptable for an instructor/proctor to read the exam to a participant as long as the participant determines the appropriate response.*

Maintaining Exam Security

Exam security is the instructor's responsibility. It is not recommended that participants be allowed to see the written exam before it is distributed. Instruct participants to put away all course materials and mobile devices. As participants hand in their answer sheets, you may quickly grade the exam (using the answer keys located in Appendix G of this manual) and return it to the participant. This way, the participant can review any incorrect answers. Be sure to collect all answer sheets and exams before participants leave the class. Exams may be updated periodically and it is the responsibility of the instructor to ensure that they are using the most current exam.

FINAL (IN-WATER) SKILLS SCENARIOS

Participant skills are evaluated and feedback given throughout the course. The purpose of the final in-water skill scenarios is to ensure that participants have achieved a level of competency and retention of the skills learned in the course.

Participants will have to demonstrate competency in the following areas for the Lifeguarding course:

- Scenario 1: Passive Submerged Victim Rescue with Extrication (including CPR)
- Scenario 2: Multiple-Rescuer Response Scenario 3

CRITERIA FOR GRADING PARTICIPANTS

Course participants are assigned one of the following grades:

- **Successful** is entered for a participant who has successfully attended and participated in all class sessions, including activities and skill sessions, and demonstrated proficient competency in all required skills.
- **Unsuccessful** is entered for a participant who has not met course objectives and/or has not successfully attended and participated in all class sessions, including activities and skill sessions, or demonstrated proficient competency in all required skills.
- **Not Evaluated** is entered as the final grade for a participant who is not attending the course with the intention of receiving a completion certificate. This grade should not be substituted for Unsuccessful for a participant who attempts certification but is unable to pass the completion requirements. A participant who chooses to audit must make their intent known to the instructor at the beginning of the class.

When conducting Final Skill Scenario 2: Multiple-Rescuer Response Scenario 3, evaluate participants on both:

- Individual performance and their ability to achieve skill competencies for the individual skill(s) that they are responsible for.
- Overall team response performance, demonstrating the ability to work effectively as part of a team to prioritize care, take action without following an assigned role and communicate with fellow responders.



Instructor's Note: Use the multiple-rescuer response assessment tool in Appendix F. If an individual receives a "fail" in any skill of the scenario, they receive an overall "fail" rating. If the team receives a "fail" rating, each lifeguard on the team receives a "fail" rating. It is possible for the overall team to receive a "pass" rating but one of the lifeguards to receive a "fail."

HANDLING UNSUCCESSFUL COURSE COMPLETION

If a participant does not meet the criteria for course completion and certification, provide the participant with information about course topics and skills where remediation is needed. Advise the participant that they can repeat the course if they choose.

REPORTING PROCEDURES

You must close the course in the Red Cross Learning Center within the specified time frame (10 days). Instructions for using and submitting records are available in the Resources section of the Red Cross Learning Center.

ACKNOWLEDGING COURSE COMPLETION

Awarding Certification

Red Cross certification means that on a particular date an instructor verified that a participant demonstrated competency in all required skills taught in the course, including successfully completing both the written exam and skills assessment.

When closing the course, instructors must include the email address of each participant so they can receive an email with a link to their digital certificate.

Participants can access the digital certificate through an email with a link once the course has been closed, or candidates can access their certificate by going directly to the site. Participants can also view their certificates on the Red Cross Learning Center—Student Portal.

The digital certificate can be viewed, printed or shared online. It will contain an alpha-numeric identifier and Quick Response (QR) code.

Continuing Education Units for Professionals

Many course-takers are professionals who need continuing education units to maintain a license, a certification or both. The American Red Cross is an accredited provider of the International Association of Continuing Education and Training (IACET). IACET's Criteria for Quality Continuing Education and Training Programs are the standards by which hundreds of organizations measure their educational offerings. For additional information, please see the Red Cross Learning Center or redcross.org.

OBTAINING PARTICIPANT FEEDBACK

Gaining feedback from participants is an important step in any evaluation process. Participants should have an opportunity to tell you what they thought about the course. Have participants complete evaluations each time you teach the course. This information will provide you with feedback concerning the course and its instruction and help the Red Cross maintain the high quality of the course.

ADDITIONAL TRAINING OPPORTUNITIES

A wide range of additional training opportunities in safety and preparedness are offered through the American Red Cross. Examples include:

- Swimming and Water Safety
- Lifeguarding Instructor
- Water Safety Instructor
- Basic Swim Instructor
- First Aid for High School Coaches
- Anaphylaxis and Epinephrine Auto-Injector Training
- Basic Life Support for Health Care Providers
- Wilderness and Remote First Aid
- Babysitter's Training and Advanced Child Care Training

Refer participants to redcross.org for more information about scheduled courses in their community.

SECTION **B****LIFEGUARDING BLENDED
LEARNING COURSE EXTENDED
OUTLINE****L**—Lecture/Guided Discussion | **A**—Activity | **V**—Video**WSP**—Water Skills Practice | **LSP**—Land Skills Practice**PRECOURSE SESSION**

TOPIC	LESSON	METHOD	TIME
Introduction to the Precourse Skills Session	Precourse	A	10 minutes
Verification of Age Prerequisite	Precourse	A	5 minutes
Prerequisite Swimming Skills Evaluation	Precourse	A	40 minutes
Wrap-Up	Precourse	L	5 minutes
Total Session Time			1 hour

LESSON 1: THE PROFESSIONAL LIFEGUARD

TOPIC	LESSON	METHOD	TIME
Introduction to the Course	1	L	5 minutes
Being Part of a Team	1	L, A	10 minutes
Total Session Time			15 minutes

LESSON 2: FACILITY SAFETY AND PATRON SURVEILLANCE

TOPIC	LESSON	METHOD	TIME
<ul style="list-style-type: none"> Facility Safety and the Drowning Process 	2	L	5 minutes
In-Water Skill Session: Entries and Approaches <ul style="list-style-type: none"> Skill Practice Skill Drill 	2	WSP	40 minutes
Total Session Time			45 minutes

LESSON 3: INJURY PREVENTION

TOPIC	LESSON	METHOD	TIME
Injury Prevention	3	L	5 minutes
In-Water Skill Session: Review Skills, Victim Recognition and Rotations <ul style="list-style-type: none"> Victim School Scanning & Lifeguard Rotations 	3	WSP	35 minutes
Putting It All Together <ul style="list-style-type: none"> Brick Drill Rescue Tube Relay Ask Drill 	3	WSP	35 minutes
Total Session Time			1 hour, 15 minutes

LESSON 4: **WATER RESCUE SKILLS**

TOPIC	LESSON	METHOD	TIME
In-Water Skill Session: Rescue Skills, Part 1 ■ Skill Practice <ul style="list-style-type: none"> ○ Reaching Assist ○ Simple Assist ○ Active Victim Front Rescue ○ Active Victim Rear Rescue ○ Passive Victim Front Rescue ○ Passive Victim Rear Rescue ○ Multiple Victim Rescue ■ Skill Drill	4	WSP	1 hour, 25 minutes
Putting It All Together ■ EAP Activity	4	WSP	35 minutes
In-Water Skill Session: Rescue Skills, Part 2 ■ Skill Practice <ul style="list-style-type: none"> ○ Feet-first surface dive ○ Head-first surface dive ○ Submerged victim rescue in deep water ○ Extrication 	4	WSP	1 hour, 10 minutes
Putting It All Together ■ Skill drill – parts 1, 2, 3, 4 <ul style="list-style-type: none"> ○ Put on gloves with wet hands ○ Rescue, extricate, gloves ○ Challenge: Rescue and extrication in under 1 minute ○ Extrication with two assisting responders 	4	WSP	1 hour
Total Session Time			4 hours, 10 minutes

LESSON 5: **BEFORE PROVIDING CARE, VICTIM ASSESSMENT AND BREATHING EMERGENCIES**

TOPIC	LESSON	METHOD	TIME
Standard Precautions and Glove Removal	5	L	5 minutes
General Procedures for an Emergency on Land	5	L	5 minutes
Performing a Primary Assessment <ul style="list-style-type: none"> ■ Adult practice ■ Using a Resuscitation Mask practice ■ Infant practice ■ Summoning EMS 	5	L, LSP	35 minutes
Moving a Victim	5	L	5 minutes
Recognizing and Caring for Breathing Emergencies	5	L	5 minutes
Giving Ventilations (PWYW or WTP) <ul style="list-style-type: none"> ■ Adult ■ Infant 	5	V, LSP	15 minutes
Giving Ventilations Using a Bag-Valve-Mask Resuscitator <ul style="list-style-type: none"> ■ Giving Ventilations Using a Bag-Valve-Mask Resuscitator—Two Rescuers 	5	V, LSP	15 minutes
Airway Obstruction <ul style="list-style-type: none"> ■ Conscious Choking—Adult and Child ■ Conscious Choking—Infant 	5	V, LSP	15 minutes
Total Session Time			1 hour, 40 minutes

LESSON 6: **CARDIAC EMERGENCIES AND USING AN AUTOMATED EXTERNAL DEFIBRILLATOR**

TOPIC	LESSON	METHOD	TIME
Cardiac Arrest	6	L	5 minutes
CPR (PWYW/WTP) ■ CPR—Adult ■ CPR—Infant	6	V, LSP	40 minutes
Two-Rescuer CPR ■ Two-Rescuer CPR—Adult ■ Two-Rescuer CPR—Infant	6	V, LSP	15 minutes
When the Heart Stops and AEDs	6	L	5 minutes
Using an AED ■ Using an AED (adult, child or infant) ■ Using and AED—CPR in Progress	6	L, LSP	10 minutes
CPR with Airway Obstruction ■ CPR with Airway Obstruction—Adult ■ CPR with Airway Obstruction—Infant	6	L, A	10 minutes
In-Water Skill Session: Putting It All Together ■ Skill Drill Part 1 and 2: Part 1: Submerged Victim Rescue, Extrication, Primary Assessment and Ventilations Part 2: Lifeguard Station Response Time Testing	6	WSP/LSP	45 minutes
Putting it All Together: Multiple-Rescuer Response Skill Drill (Scenarios 1-4)	6	V, LSP	1 hour, 5 minutes
Total Session Time			3 hours, 15 minutes

LESSON 7: **FIRST AID**

TOPIC	LESSON	METHOD	TIME
Secondary Assessment	7	L	5 minutes
Responding to Emergencies <ul style="list-style-type: none"> ■ Controlling Bleeding ■ Shock ■ Common Injuries 	7	LSP, A	25 minutes
Putting It All Together—First Aid Scenarios	7	A	20 minutes
In-Water Skill Session—When Things Do Not Go As Practiced <ul style="list-style-type: none"> ■ Escapes ■ In-Water Ventilations 	7	WSP	30 minutes
In-Water Skill Session—Rescue Skills Review <ul style="list-style-type: none"> ■ Submerged passive rescue--shallow ■ Passive Victim Front Rescue ■ Passive Victim Rear Rescue ■ Submerged Passive Victim in Deep Water ■ Extrication Using a Backboard at the Pool Edge ■ Multiple-Rescuer Response—Scenarios 5 and 6 	7	WSP/LSP	45 minutes
Total Session Time			2 hours, 5 minutes

LESSON 8: **HEAD, NECK AND SPINAL INJURIES IN THE WATER**

TOPIC	LESSON	METHOD	TIME
Caring for Head, Neck and Spinal Injuries in the Water	8	L	5 minutes
In-Water Skill Session: Head, Neck and Spinal Injuries <ul style="list-style-type: none"> ■ Skill Practice—Shallow Water <ul style="list-style-type: none"> ○ Over-Arm Head Splint—Face-Up ○ Head Splint—Face-Down ○ Spinal Backboarding Procedure ○ Spinal Backboarding Procedure—For Facilities with High Edges ■ Skill Practice—Deep Water <ul style="list-style-type: none"> ○ Head Splint—Face-Down ○ Head Splint—Submerged ○ Spinal Backboarding Procedure 	8	WSP	2 hours, 20 minutes
Total Session Time			2 hours, 25 minutes

LESSON 9: **FINAL WRITTEN EXAM AND FINAL IN-WATER SKILL SCENARIOS**

TOPIC	LESSON	METHOD	TIME
Final Written Exam: Section 2—Lifeguarding Skills	9	A	30 minutes
In-Water Skill Session: General Skills Review (optional)	9	A	(30 minutes)
Final In-Water Skill Scenarios <ul style="list-style-type: none"> ■ Scenario 1: Submerged Passive Victim in Deep Water with Extrication, Primary Assessment and CPR ■ Scenario 2: Multiple-Rescuer Response 	9	A	2 hours, 30 minutes
Closing	9	L	5 minutes
Total Session Time			3 hours, 5 minutes

TOTAL COURSE TIME.....19 hours, 55 minutes

SECTION B | LIFEGUARDING BLENDED LEARNING COURSE INTENSIVE OUTLINE

This blended learning course outline has been adjusted to a three-day intensive format. This allows participants to complete all of the eLearning information and view the videos for skills prior to the in-person session. Please see the lesson number in the outline that corresponds to the lesson topic location.

When teaching the intensive format, consider conducting the precourse session one week in advance of the first classroom session, if possible. This will allow you to provide participants with the intensive course outline schedule, the eLearning information and the participant's manual with reading assignments. When offering this intensive course, instructors must ensure that participants have ample time to complete all eLearning content prior to the first classroom session. Participants must provide proof of completion before attending Session 1.

In addition to completing the eLearning content, it is recommended that participants complete the review questions at the end of each chapter in the *Lifeguarding Manual*, prior to attending Session 1.

Note: This intensive outline includes several hours of physical skills each day. Provide breaks as appropriate to allow participants time to rest and recover.

L—Lecture/Guided Discussion | **A**—Activity | **V**—Video
WSP—Water Skills Practice or Activity | **LSP**—Land Skill Practice

PRECOURSE SESSION:

TOPIC	LESSON	METHOD	TIME
Introduction to the Precourse Skills Session	Precourse	A	10 minutes
Verification of Age Prerequisite	Precourse	A	5 minutes
Prerequisite Swimming Skills Evaluation	Precourse	A	40 minutes
Wrap-Up	Precourse	L	5 minutes
Total Session Time			1 hour

SESSION 1: **THE PROFESSIONAL LIFEGUARD AND FACILITY SAFETY, PATRON SURVEILLANCE, ENTRIES AND APPROACHES**

TOPIC	LESSON	METHOD	TIME
Introduction to the Course	1	L	5 minutes
Being a Part of a Team	1	L, A	10 minutes
Facility Safety and the Drowning Process	2	L	5 minutes
In-Water Skill Session: Entries and Approaches <ul style="list-style-type: none"> ■ Skill Practice ■ Skill Drill 	2	WSP	40 minutes
Injury Prevention	3	L	5 minutes
In-Water Skill Session: Review Skills, Victim Recognition and Rotations <ul style="list-style-type: none"> ■ Victim School ■ Effective Scanning & Lifeguard Rotations 	3	WSP	35 minutes
Putting It All Together <ul style="list-style-type: none"> ■ Brick Drill ■ Rescue Tube Relay ■ Ask Drill 	3	WSP	35 minutes
Total Session Time			2 hours, 15 minutes

SESSION 2: **IN-WATER SKILL SESSIONS, EMERGENCY ACTION PLANS, STANDARD PRECAUTIONS, INJURY PREVENTION, RESCUE SKILLS AND CPR AND AEDS**

TOPIC	LESSON	METHOD	TIME
In-Water Skill Session—Rescue Skills, Part 1 ■ Skill Practice <ul style="list-style-type: none"> ○ Reaching Assist ○ Simple Assist ○ Active Victim Front Rescue ○ Active Victim Rear Rescue ○ Passive Victim Front Rescue ○ Passive Victim Rear Rescue ○ Multiple Victim Rescue ■ Skill Drill	4	WSP	1 hour, 25 minutes
Putting It All Together ■ EAP Activity	4	WSP	35 minutes
In-Water Skill Session—Rescue Skills, Part 2 ■ Skill Practice <ul style="list-style-type: none"> ○ Feet-First Surface Dive ○ Head-First Surface Dive ○ Submerged Victim Rescue in Deep Water ○ Extrication 	4	WSP	1 hour, 10 minutes
Putting It All Together ■ Skill Drill—Parts 1, 2, 3, 4 <ul style="list-style-type: none"> ○ Put on gloves with wet hands ○ Rescue, extricate, gloves ○ Challenge: Rescue and extrication in under 1 minute ○ Extrication with two assisting responders 	4	WSP	1 hour
Standard Precautions and Glove Removal	5	L	5 minutes
General Procedures for an Emergency on Land	5	L	5 minutes
Performing a Primary Assessment ■ Adult practice ■ Using a Resuscitation Mask practice ■ Infant practice ■ Summoning EMS	5	L, LSP	35 minutes
Moving a Victim	5	L	5 minutes
Recognizing and Caring for Breathing Emergencies	5	L	5 minutes

SESSION 2 TOPIC, CONTINUED	LESSON	METHOD	TIME
Giving Ventilations (PWYW or WTP) <ul style="list-style-type: none"> ■ Adult ■ Infant 	5	V, LSP	15 minutes
Giving Ventilations Using a Bag-Valve-Mask Resuscitator <ul style="list-style-type: none"> ■ Giving Ventilations Using a Bag-Valve-Mask Resuscitator—Two Rescuers 	5	V, LSP	15 minutes
Airway Obstruction <ul style="list-style-type: none"> ■ Conscious Choking—Adult and Child ■ Conscious Choking—Infant 	5	V, LSP	15 minutes
Cardiac Arrest	6	L	5 minutes
CPR (PWYW or WTP) <ul style="list-style-type: none"> ■ CPR—Adult ■ CPR—Infant 	6	V, LSP	40 minutes
Two-Rescuer CPR <ul style="list-style-type: none"> ■ Two-Rescuer CPR—Adult and Child ■ Two-Rescuer CPR—Infant 	6	V, LSP	15 minutes
When the Heart Stops and AEDs	6	L	5 minutes
Using an AED <ul style="list-style-type: none"> ■ Using an AED (adult, child or infant) ■ Using an AED—CPR in Progress 	6	L, LSP	10 minutes
CPR with Airway Obstruction <ul style="list-style-type: none"> ■ CPR with Airway Obstruction—Adult ■ CPR with Airway Obstruction—Infant 	9	L, A	10 minutes
In-Water Skill Session: Putting It All Together <ul style="list-style-type: none"> ■ Skill Drill Part 1 and 2: Part 1: Submerged Victim Rescue, Extrication, Primary Assessment and Ventilations Part 2: Lifeguard Station Response Time Testing	6	WSP/LSP	45 minutes
Putting It All Together: Multiple-Rescuer Response Skill Drill (Scenarios 1-4)	6	V, LSP	1 hour, 5 minutes
Total Session Time			9 hours, 5 minutes

SESSION 3: **SECONDARY ASSESSMENT, RESPONDING TO EMERGENCIES, HEAD, NECK AND SPINAL INJURIES IN THE WATER; RESCUE SKILLS; FINAL SKILL SCENARIOS AND FINAL WRITTEN EXAM**

TOPIC	LESSON	METHOD	TIME
Secondary Assessment	7	L	5 minutes
Responding to Emergencies <ul style="list-style-type: none"> ■ Controlling Bleeding ■ Shock ■ Common Injuries 	7	LSP, A	25 minutes
Putting It All Together—First Aid Scenarios	7	A	20 minutes
In-Water Skill Session—When Things Do Not Go As Practiced <ul style="list-style-type: none"> ■ Escapes ■ In-Water ventilations 	7	WSP	30 minutes
In-Water Skill Session—Rescue Skills Review <ul style="list-style-type: none"> ■ Submerged Passive rescue--shallow ■ Passive Victim Front Rescue ■ Passive Victim Rear Rescue ■ Submerged Passive Victim in Deep Water ■ Extrication Using a Backboard at the Pool Edge ■ Multiple-Rescuer Response—Scenarios 5 and 6 	7	WSP/LSP	45 minutes
Caring for Head, Neck and Spinal Injuries in the Water	8	L	5 minutes
In-Water Skill Session: Head, Neck and Spinal Injuries <ul style="list-style-type: none"> ■ Skill Practice—Shallow Water <ul style="list-style-type: none"> ○ Over-Arm Head Splint—Face-up ○ Head Splint—Face-down ○ Spinal Backboarding Procedure ○ Spinal Backboarding Procedure—For Facilities with High Edges ■ Skill Practice—Deep Water <ul style="list-style-type: none"> ○ Head Splint—Face Down ○ Head Splint—Submerged ○ Spinal Backboarding Procedure 	8	WSP	2 hours, 20 minutes
Final Written Exam: Section 2—Lifeguarding Skills	9	A	30 minutes
In-Water Skill Session: General Skills Review - optional	9	A	(30 minutes)

SESSION 3 TOPIC, CONTINUED	LESSON	METHOD	TIME
Final In-Water Skill Scenarios ■ Scenario 1: Submerged Passive Victim in Deep Water with Extrication, Primary Assessment and CPR ■ Scenario 2: Multiple-Rescuer Response	9	A	2 hours, 30 minutes
Closing	9	L	5 minutes
Total Session Time			7 hours, 35 minutes

TOTAL COURSE TIME.....19 hours, 55 minutes

PRECOURSE SESSION

Lesson Length: 1 hour

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Verify participant age.
- Conduct the prerequisite swimming skills evaluation.
- Conduct the lesson wrap-up.

SESSION OBJECTIVES

After completing this lesson, successful participants must be able to:

- Meet the age requirement.
- Demonstrate proficiency in all of the prerequisite skills.

MATERIALS, EQUIPMENT AND SUPPLIES

- Timing device, such as a stopwatch or smartphone with a stopwatch feature
- 10lb object (a diving brick or weight; one for every five participants)
- Lifeguarding Precourse Skills Checklist

LESSON PREPARATION

- Send participants the *Sample Letter to Lifeguarding Blended Learning Course Participants*, available in Appendix A and on the Red Cross Learning Center, to set expectations, provide the eLearning direct link and help participants prepare for the course.
- To save time, have all equipment and materials set up before the start of the class.
- Fill in the lifeguarding participant names on the Lifeguarding Precourse Skills Checklist.



INSTRUCTOR NOTES

- When reviewing the prerequisite skills with participants, only cover the course and/or modules you are teaching. Have participants perform the prerequisite skills only for the course and/or module you are teaching.
- The prerequisite swimming skills evaluation is designed to assess the individual's strength, endurance and comfort in the water. If a candidate is not successful on the first attempt at the prerequisite skills, they have only one opportunity to re-attempt the prerequisites after sufficient rest, prior to the first scheduled class session.
- When determining a participant's ability to pass the prerequisite swimming skills evaluation and successfully participate in the course, the instructor must evaluate the individual's overall performance.

- The individual should not be judged on stroke mechanics, but rather on their overall demonstration of swimming strength, endurance, comfort in the water and ability to meet the time requirements.
- Participants may use goggles for the 300-yard swim. This is the only activity where participants are permitted to use goggles. Participants may not use goggles for the timed event, treading water or other Lifeguarding course activities.
- Participants may wear contact lenses during the course, but may not use protective eyewear/goggles during the courses.
- During the timed precourse event, participants must retrieve a 10-pound object such as a dive brick or weight; after retrieving the object, participants must swim on their back with both hands on the object.
- If a Waterfront Skills module is scheduled to immediately follow the Lifeguarding course and all candidates are enrolled in both the Lifeguarding course and Waterfront Skills module, you should conduct the precourse session for the Waterfront Skills module instead of the Lifeguarding precourse session.
- If the prerequisite evaluation for Waterfront Lifeguarding is not completed at this time, then it must be completed as a precourse session for the Waterfront Skills module.
- Counseling after the Precourse Session: On an individual basis, after the precourse session has ended, advise each participant who did not meet the prerequisites that:
 - Entry into the Red Cross Lifeguarding course is strictly limited to those who meet the minimum age requirement and have successfully completed the prerequisite swimming skills evaluation.
 - Failure to have attained the appropriate skill level could pose a safety threat to themselves and to others in the class.
 - Participants who do not successfully complete the precourse evaluation may not continue in the course.
 - Instructors should suggest developmental training opportunities and explain the specific skills that the individual needs to improve to be eligible should the candidate choose to participate in the Lifeguarding course in the future.
- When teaching the Lifeguarding course, if the maximum water depth is 6 feet, an alternate timed event is permitted as described in the swimming skills evaluation section below.
- The treading water prerequisite skill for the Shallow Water Lifeguarding course should be conducted in a minimum of 5 feet. Taller participants should lean slightly forward if needed while treading to keep from touching the bottom.
- When teaching the Aquatic Attraction Lifeguarding course, the water competency sequence must be performed in water that is deep enough for participants to jump in and fully submerge without touching the bottom (a minimum depth of 5 feet).
- Participants must have access to their own manual throughout the course in either digital or print format. When using a digital manual, a tablet or laptop should be used to ensure proper viewing. (The manual should not be displayed on a cell phone.)

TEACHING TIPS

- You must be able to observe and evaluate each participant's skills during the prerequisite swimming skills evaluation.
- Consider conducting the prerequisite skills evaluation on a different day prior to the start of the course.
- Encourage participants to complete the review questions after reading each chapter of the participant's manual throughout the course.

INSTRUCTION KEY:



Discussion



Lecture



Skill Practice



Activity



Video



Skill Drill

TOPIC: INTRODUCTION TO THE PRECOURSE SESSION

Time: 10 minutes

VERIFICATION OF AGE AND TRAINING

ACTIVITY:



- Welcome prospective participants and introduce yourself. Identify yourself as an American Red Cross instructor. Briefly tell about your background in aquatics. Include introductions of co-instructors and aides, if applicable.
- Review facility policies, including emergency procedures. Give the locations of restrooms, locker rooms, water fountains and details unique to your facility. Also, identify the location of the automated external defibrillator (AED) and first aid kit.
- Have participants briefly introduce themselves.
- Explain that the purpose of the Lifeguarding course is to teach the knowledge and skills needed to help prevent and respond to aquatic emergencies. This includes land and water rescue skills as well as first aid and CPR/AED.

■ SHALLOW WATER LIFEGUARDING

For the Shallow Water Lifeguarding course, explain that the purpose of the course is to teach the knowledge and skills needed to help prevent and respond to aquatic emergencies in water up to 5 feet deep.

- Explain to prospective participants that this precourse session is designed to evaluate their swimming skills. Participants who successfully complete the precourse skills evaluation should be able to participate in the Red Cross Lifeguarding course.



Instructor's Note: Review the prerequisite skills only for the course and/or modules you are teaching.

- Review the prerequisite skills to be performed for their course and/or module:
 - **Lifeguarding course or Waterpark Skills module prerequisite skills:**
 1. Swim 300 yards continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both but swimming on the back or side is not allowed. Swim goggles may be used.
 2. Tread water for 2 minutes using only the legs. Candidates should place their hands under the armpits.
 3. Complete a timed event within 1 minute, 40 seconds.
 - Starting in the water, swim 20 yards. The face may be in or out of the water. Swim goggles are not allowed.
 - Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object.
 - Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface so they are able to get a breath. Candidates should not swim the distance under water.
 - Exit the water without using a ladder or steps.

ACTIVITY:*continued*○ **Waterfront Skills module prerequisite skills:**

1. Swim 550 yards continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both but swimming on the back or side is not allowed. Swim goggles are allowed.
2. Tread water for 2 minutes using only the legs. Candidates should place their hands under the armpits.
3. Complete a timed event within 1 minute, 40 seconds.
 - Starting in the water, swim 20 yards. The face may be in or out of the water. Swim goggles are not allowed.
 - Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object.
 - Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface so they are able to get a breath. Candidates should not swim the distance under water.
 - Exit the water without using a ladder or steps.
4. Swim 5 yards, submerge and retrieve three dive rings placed 5 yards apart in 4 to 7 feet of water, resurface and continue to swim another 5 yards to complete the skill sequence.

○ **Shallow Water Lifeguarding course prerequisite skills:**

1. Swim 100 yards continuously demonstrating breath control and rhythmic breathing. Candidates may swim using the front crawl, breaststroke or a combination of both but swimming on the back or side is not allowed. Swim goggles are allowed.
2. Tread water for 2 minutes using only the legs. Candidates should place their hands under the armpits.
3. Complete a timed event within 50 seconds.
 - Starting in the water, swim 20 yards using the front crawl or breaststroke. The face may be in or out of the water. Swim goggles are not allowed.
 - Submerge to a depth of 4 to 5 feet to retrieve a 10-pound object.
 - Return to the surface and walk or swim 20 yards on the back to return to the starting point with both hands holding the object at the surface of the water.
 - Exit the water without using a ladder or steps.

○ **Aquatic Attraction Lifeguarding course prerequisite skills:**

1. Complete the water competency sequence without stopping.
 - Step into water from the side and totally submerge.
 - Maintain position for 1 minute by treading water or floating (or a combination of the two).
 - Rotate one full turn and orient to the exit.
 - Level off and swim on the front or back 25 yards.
 - Exit without using a ladder or steps.
2. Complete a timed event within 50 seconds without stopping.
 - Starting in the water, walk or swim 20 yards.
 - Submerge to a depth of 3 feet to retrieve a 10-pound object.
 - Return to the surface and walk or swim 20 yards on the back to return to the starting point with both hands holding the object at the surface of the water.
 - Exit the water without using steps or a ladder.

ACTIVITY:*continued***Instructor's Note:**

- *When teaching the Lifeguarding course, if the maximum water depth is 6 feet, an alternate timed event is permitted.*
- *The treading water prerequisite skill for the Shallow Water Lifeguarding course should be conducted in a minimum of 5 feet.*

- If a Waterfront Skills module is scheduled to immediately follow the Lifeguarding course and all candidates are enrolled in both the Lifeguarding course and Waterfront Skills module, you should conduct the precourse session for the Waterfront Skills module instead of the Lifeguarding precourse session.
- If the prerequisite evaluation for Waterfront Lifeguarding is not completed at this time, then it must be completed as a precourse session for the Waterfront Skills module.
- When teaching the Aquatic Attraction Lifeguarding course, the water competency sequence must be performed in water that is deep enough for participants to jump in and fully submerge without touching the bottom (a minimum depth of 5 feet).

**Science Note:** *Swim goggles should only be worn for the prerequisite swim for a variety of reasons:*

- *Swim goggles are not part of any standard issue lifeguarding equipment protocol used in making a land or water rescue.*
- *Swim goggles are designed for preventing water entry and irritation and not to protect from trauma to the eye. Swim goggles present a greatly reduced surface area at the point of contact with tissue around the eye. The potential for serious eye injury is greatly increased by the swim goggle being contacted by an external object (or another participant) during the course.*
- *Submerging to a depth of 5 feet or greater has the potential to cause barotraumas to the eye of an individual wearing swim goggles that cannot be pressure equalized.*

TOPIC: **VERIFICATION OF AGE PREREQUISITE**

Time: 5 minutes**VERIFICATION OF AGE PREREQUISITE****ACTIVITY:**

- Tell participants that to participate in any Red Cross Lifeguarding course or module, they must be at least 15 years of age on or before the final scheduled session of this course.
- Verify the eligibility of participants to participate in the course by checking their proof of age, which can be a driver's license, state identification, birth certificate or passport.
- If an individual does not meet the age requirements for course participation, suggest that they enroll in the next available Lifeguarding course once the age requirement is met.
- Orient them to the locker rooms and the pool area where they are to meet for the prerequisite swimming skills evaluation.

TOPIC: **PREREQUISITE SWIMMING SKILLS EVALUATION**

Time: 40 minutes

PREREQUISITE SWIMMING SKILLS EVALUATION

ACTIVITY:



- Explain to prospective participants that they must successfully complete three swimming prerequisites to continue in the Lifeguarding course.
- Refer to the Skill Assessment Chart to evaluate performance of each prospective participant. Record completion of each skill on the Lifeguarding Precourse Skills Checklist.



Instructor's Note: Have participants perform the prerequisite skills only for the course and/or module you are teaching.

LIFEGUARDING COURSE AND WATERPARK SKILLS MODULE

☐ Prerequisite 1— 300-Yard Swim

- Explain to prospective participants that they must perform a 300-yard continuous swim using the front crawl, breaststroke or a combination of both. Swimming on the back or side is not permitted. Swim goggles are allowed.

☐ Prerequisite 2— Tread Water

- Explain to prospective participants that they must tread water for 2 minutes without support and without stopping. When treading, only the legs can be used. Candidates should place their hands under the armpits. The head must remain above the surface of the water.

☐ Prerequisite 3— Timed Event

- Arrange the swim distance of 20 yards and place a 10-pound object at a depth of 7 to 10 feet.
- **Explain that goggles are not allowed for this event.**
- Evaluate each prospective participant on the following skill to be performed within 1 minute and 40 seconds.
 - Starting in the water, swim 20 yards. The face may be in or out of the water.
 - Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object.
 - Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface so they are able to get a breath. The participants should not swim the distance under water.
 - Exit the water without using a ladder or steps.
- For pools with maximum water depth of 6 feet deep, candidates should complete the following alternate timed event:
 - Starting in the water, swim at the surface for 20 yards. The face may be in or out of the water. Swim goggles are not allowed.
 - Surface dive to a depth of 6 feet, swim 10 to 15 feet along the bottom and retrieve a 10-pound object.
 - Return to the surface and swim on the back to the starting point with both hands holding the object at the surface and the face remaining at or near the surface or able to get a breath. Candidates should not swim the distance underwater.

WATERFRONT SKILLS MODULE	
<input type="checkbox"/> Prerequisite 1— 550-Yard Swim	<ul style="list-style-type: none"> ■ Explain to prospective participants that they must perform a 550-yard continuous swim using the front crawl, breaststroke or a combination of both. Swimming on the back or side is not permitted. Swim goggles are allowed.
<input type="checkbox"/> Prerequisite 2— Tread Water	<ul style="list-style-type: none"> ■ Explain to prospective participants that they must tread water for 2 minutes without support and without stopping. When treading, only the legs can be used. Candidates should place their hands under the armpits. The head must remain above the surface of the water.
<input type="checkbox"/> Prerequisite 3— Timed Event	<ul style="list-style-type: none"> ■ Arrange the swim distance of 20 yards and place a 10-pound object at a depth of 7 to 10 feet. ■ Explain that goggles are not allowed for this event. ■ Evaluate each participant on the following skill to be performed within 1 minute and 40 seconds. <ul style="list-style-type: none"> ○ Starting in the water, swim 20 yards using the front crawl or breaststroke. The face may be in or out of the water. ○ Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object. ○ Return to the surface and swim 20 yards on the back to return to the starting point with both hands holding the object and keeping the face at or near the surface so they are able to get a breath. The participants should not swim the distance under water. ○ Exit the water without using a ladder or steps.
<input type="checkbox"/> Prerequisite 4— Underwater Swim	<ul style="list-style-type: none"> ■ Arrange the swim distance area, placing three dive rings 5 yards apart in 4 to 7 feet of water. ■ Explain that goggles are not allowed for this event. ■ Evaluate each participant on the following skill. <ul style="list-style-type: none"> ○ Starting in the water, swim 5 yards. The face may be in or out of the water. ○ Submerge, swim under water and retrieve three dive rings placed 5 yards apart in 4 to 7 feet of water. ○ Return to the surface after picking up all three dive rings and continue to swim another 5 yards to complete the skill sequence.
SHALLOW WATER LIFEGUARDING COURSE	
<input type="checkbox"/> Prerequisite 1— 100-Yard Swim	<ul style="list-style-type: none"> ■ Explain to prospective participants that they must perform a 100-yard continuous swim using the front crawl, breaststroke or a combination of both. Swimming on the back or side is not permitted. Swim goggles are allowed.
<input type="checkbox"/> Prerequisite 2— Tread Water	<ul style="list-style-type: none"> ■ Explain to prospective participants that they must tread water for 2 minutes without support and without stopping. When treading, only the legs can be used. Candidates should place their hands under the armpits. The head must remain above the surface of the water.
<input type="checkbox"/> Prerequisite 3— Timed Event	<ul style="list-style-type: none"> ■ Arrange the swim distance of 20 yards and place a 10-pound object at a depth of 4 to 5 feet. ■ Explain that goggles are not allowed for this event. ■ Evaluate each participant on the following skill to be performed within 50 seconds. <ul style="list-style-type: none"> ○ Starting in the water, swim 20 yards using the front crawl or breaststroke or a combination of both. The face may be in or out of the water. ○ Submerge to a depth of 4 to 5 feet to retrieve a 10-pound object. ○ Return to the surface and walk or swim 20 yards on the back to return to the starting point with both hands holding the object at the surface of the water. ○ Exit the water without using a ladder or steps.

AQUATIC ATTRACTION LIFEGUARDING COURSE

□ Prerequisite 1— Water Competency Sequence

- Complete the water competency sequence without stopping.
 - Step into water from the side and totally submerge.
 - Recover to the surface, then maintain position for 1 minute by treading water or floating (or a combination of the two).
 - Rotate one full turn and orient to the exit.
 - Level off and swim on the front or back 25 yards.
 - Exit without using a ladder or steps.



Instructor's Note: *The water competency sequence must be performed in water that is deep enough for participants to jump in and fully submerge without touching the bottom (a minimum depth of 5 feet).*

□ Prerequisite 2— Timed Event

- Complete a timed event within 50 seconds without stopping.
 - Starting in the water, walk or swim 20 yards.
 - Submerge to a depth of 3 feet to retrieve a 10-pound object.
 - Return to the surface and walk or swim 20 yards to return to the starting point with both hands holding the object at the surface of the water.
 - Exit the water without using a ladder or steps.



Instructor's Note: *When determining a participant's ability to pass the prerequisite swimming skills evaluation and successfully participate in the course, the instructor must evaluate the individual's overall performance. The prerequisite swimming skills evaluation is designed to assess the individual's strength, endurance and comfort in the water. The individual should not be judged on stroke mechanics, but rather on their overall demonstration of swimming strength, endurance, comfort in the water and ability to meet the time requirements.*

If a candidate is not successful on the first attempt, they have only one opportunity to reattempt the prerequisites after sufficient rest. Instructors may suggest developmental training opportunities and explain the specific skills that the individual needs to improve to be eligible should the candidate choose to participate in the Lifeguarding course in the future.

WRAP-UP

GUIDED DISCUSSION:



- Respond to participants' questions.
- Provide participants with information on the first class session, including the time of the class and location. Review the full course schedule and basic course outline, including test dates.
- Provide participants who have passed the precourse evaluation with a copy of the *American Red Cross Lifeguarding Manual*. All participants must have a copy of the manual—digital or print—for use during the course.
- Instruct participants to complete the following assignments prior to the start of the next in-person session.
 - If following the intensive outline, participants should read the *Lifeguarding Manual* and complete all eLearning modules, including the conclusion which contains the CPR/AED for Professional Rescuers and First Aid Final Written Exam.
 - If following the extended outline, participants should complete the eLearning Introduction and Module 1 and read the following chapter in the *Lifeguarding Manual*:
 - Chapter 1: The Professional Lifeguard



Instructor's Note: *Each participant should have access to their own manual throughout the course in either digital or print format. When using a digital manual, a tablet or laptop should be used to ensure proper viewing. (The manual should not be displayed on a cell phone.)*



COUNSELING AFTER THE PRECOURSE SESSION

ACTIVITY:

- On an individual basis, after the precourse session has ended, advise each participant who did not meet the prerequisites that:
 - Entry into the Red Cross Lifeguarding course is strictly limited to those who meet the minimum age requirement and have successfully completed the prerequisite swimming skills evaluation.
 - Failure to have attained the appropriate skill level could pose a safety threat to themselves and to others in the class.
- Suggest appropriate developmental training opportunities and explain the specific skills that the individual needs to improve to be eligible to take the Lifeguarding course in the future, including Shallow Water Lifeguarding and Aquatic Attraction Lifeguarding.

SKILL CHART AND SKILL ASSESSMENT TOOL

LIFEGUARDING AND SHALLOW WATER LIFEGUARDING COURSES AND WATERFRONT AND WATERPARK SKILLS		
Criteria	Proficient	Not Proficient
Continuous swim	<ul style="list-style-type: none"> ■ Swims designated distance continuously using front crawl, breaststroke or a combination of both without stopping to rest ■ Demonstrates comfort in deep water ■ Swims with face in the water and demonstrates breath control (slight hesitation during breathing acceptable) ■ Maintains body position that is nearly horizontal to the surface ■ Uses above-water arm recovery for the front crawl ■ Leg action contributes to forward momentum 	<ul style="list-style-type: none"> ■ Cannot swim designated distance continuously ■ Swims on the back or side ■ Stops to rest during a turn at a wall ■ Stops swimming, stands on the bottom or clings to rope, lane line or other support ■ Refuses to swim in deep water ■ Swims with head or face out of the water ■ Does not demonstrate breath control or rhythmic breathing ■ Body position is near vertical ■ Uses underwater arm recovery for the front crawl ■ No leg action or leg action that does not contribute to forward momentum
Tread water	<ul style="list-style-type: none"> ■ Treads water for 2 minutes ■ Body position is near vertical ■ Head remains above the surface ■ Uses legs only 	<ul style="list-style-type: none"> ■ Unable to tread water for 2 minutes ■ Body position is near horizontal—prone or supine ■ Stands on the bottom or clings to rope, lane line or other support ■ Swims rather than treads ■ Mouth sinks below the surface ■ Uses arms while treading
Timed event	<ul style="list-style-type: none"> ■ Completes the prerequisite event within the designated time ■ Submerges and retrieves a 10-pound object ■ Swims back to the side, holding the object in both hands while keeping the face at or near the surface of the water (<i>Note: Shallow Water Lifeguarding candidates can swim or walk</i>) ■ Exits the water without using ladder or steps 	<ul style="list-style-type: none"> ■ Does not complete the prerequisite event within the designated time ■ Does not submerge far enough to reach the 10-pound object ■ Does not locate the 10-pound object ■ Does not lift the 10-pound object and return to the surface ■ Returns to the side holding the object in one hand ■ Returns to the side underwater with the object and without taking a breath ■ Unable to exit the water without ladder or steps

LIFEGUARDING AND SHALLOW WATER LIFEGUARDING COURSES AND WATERFRONT AND WATERPARK SKILLS, *CONTINUED*

Waterfront Skill Module Only

Underwater Swim Event

- | | |
|---|---|
| <ul style="list-style-type: none"> ■ Swims 5 yards ■ Submerges, swims and retrieves three dive rings ■ Swims to the side with three dive rings | <ul style="list-style-type: none"> ■ Walks along the bottom ■ Does not submerge enough to reach the dive ring(s) ■ Surfaces before retrieving all three dive rings ■ Does not retrieve all three dive rings ■ Does not swim back with three dive rings |
|---|---|

SKILL ASSESSMENT TOOL: AQUATIC ATTRACTION LIFEGUARDING

Criteria	Proficient	Not Proficient
Water Competency Sequence	<ul style="list-style-type: none"> ■ Steps into water from side and totally submerges ■ Recovers to the surface without pushing off the bottom ■ Maintains position for 1 minute by treading or floating (or a combination of the two) ■ Rotates one full turn and orients to the exit. ■ Levels off and swims on the front or back for 25 yards ■ Exits the water without using a ladder or steps 	<ul style="list-style-type: none"> ■ Enters the water in an unsafe manner or does not totally submerge after entering the water ■ Does not recover to the surface or pushes off the bottom to resurface ■ Is unable to maintain position for 1 full minute by treading or floating (or a combination of the two) ■ Does not rotate one full turn ■ Does not orient to the exit ■ Is unable to level off or swim on the front or back for 25 yards ■ Is unable to exit the water without using the ladder
Timed Event	<ul style="list-style-type: none"> ■ Completes the prerequisite event within the designated time ■ Submerges and retrieves a 10-pound object ■ Walks or swims on the back to the starting point, holding the object in both hands at the surface of the water ■ Exits the water without using ladder or steps 	<ul style="list-style-type: none"> ■ Does not complete the prerequisite event within the designated time ■ Does not submerge far enough to reach the 10-pound object ■ Does not locate the 10-pound object ■ Does not lift the 10-pound object and return to the surface ■ Returns to the side holding the object in one hand ■ Returns to the side holding the object underwater ■ Unable to exit the water without using ladder or steps

THE PROFESSIONAL LIFEGUARD

Lesson Length: 20 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Introduce participants to the Lifeguarding course.
- Guide the discussion on The Professional Lifeguard.
- Guide the discussion on legal considerations.
- Conduct the team building activity.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - The Professional Lifeguard
 - Characteristics of a Professional Lifeguard
 - Responsibilities of a Professional Lifeguard
 - Legal Considerations
 - Continuation of Training

LESSON OBJECTIVES

- Describe the characteristics and responsibilities of a professional lifeguard.
- Explain how to fulfill the responsibilities of a professional lifeguard.
- Define certain legal considerations and apply them to situations that might be encountered in lifeguarding.
- Describe ongoing training for lifeguards.
- Describe what it means to work as part of a lifeguard and safety team.

LESSON PREPARATION

- Set up equipment and have copies of the appropriate materials ready before the start of class.
- Be prepared to answer questions the participants may have about the review questions and the eLearning module they completed.



INSTRUCTOR NOTES


- Remind participants to present the eLearning component completion certificates for the eLearning Introduction and Module 1: The Professional Lifeguard. Instructors following the intensive outline should verify that participants have completed all eLearning modules.
- The purpose of the team-building activity is to break the ice with participants, to get used to working in close proximity, to communicate and to work together as a team.

TEACHING TIPS

- As you cover the topics of the course, refer to the review questions they may have completed, as this may encourage them to complete those as the course progresses.

TOPIC: INTRODUCTION TO THE COURSE

Time: 5 minutes

WELCOME AND INTRODUCTION TO THE COURSE	
<p>GUIDED DISCUSSION:</p>  <p>REFERENCES:</p> <p>Course Presentation: Slides 3</p> <p>Participant's Manual: Chapter 1</p>	<ul style="list-style-type: none"> ■ Welcome participants and introduce yourself, including your background in aquatics and certification as an American Red Cross instructor. Have co-instructors and aides introduce themselves, if applicable. ■ Have participants introduce themselves. ■ Review facility policies and procedures, and give locations of restrooms, water fountains, break areas and details unique to your facility. Also, point out where the exits are located as well as where the automated external defibrillators (AEDs) are located. ■ Review the course schedule and basic outline, including blended learning expectations and written exams. ■ Explain to participants that the primary purpose of the Lifeguarding course is to learn the knowledge and skills needed to prevent and to respond to aquatic emergencies. The course content and activities prepare participants to recognize and respond quickly and effectively to emergencies and prevent drowning and injuries. <p>SHALLOW WATER LIFEGUARDING</p> <ul style="list-style-type: none"> ■ When conducting the Shallow Water Lifeguarding course, explain to participants that the primary purpose of the course is to learn the knowledge and skills needed to prevent and to respond to aquatic emergencies in shallow water up to 5 feet deep. ■ Requirements for successful completion of the Blended course include: <ul style="list-style-type: none"> ○ Attend and participate in all class sessions. ○ Complete all units of the eLearning component and provide proof of completion to the instructor. ○ Demonstrate competency in all required skills and activities. ○ Demonstrate competency in all required final rescue skill scenarios. ○ Correctly answer at least 80 percent of the questions in each of the two sections of the final written exam. ■ Explain that upon successful completion of the Lifeguarding course, each participant will receive an American Red Cross certificate for Lifeguarding/First Aid/CPR/AED, which is valid for 2 years.

GUIDED
DISCUSSION:
continued



SHALLOW WATER LIFEGUARDING

- Explain that upon successful completion of the Shallow Water Lifeguarding course, each participant will receive an American Red Cross certificate for Shallow Water Lifeguarding (up to 5 feet)/First Aid/CPR/AED, which is valid for 2 years.
- Explain the ground rules for the course.
 - Participants must demonstrate a professional attitude and mature behavior, including, but not limited to:
 - Being prepared for all class activities, including appropriate swimwear for all in-water skill sessions.
 - Completing reading assignments.
 - Completing all eLearning units.
 - Behaving appropriately during activities.
 - Making an effort to improve skills during practice sessions.
 - Treating others with respect.
 - Following all pool safety rules and any additional safety precautions as explained throughout the course.
 - Demonstrating respect for the facility and equipment used in the course.
 - Ask participants to turn off or silence cell phones and refrain from using electronic devices during all class sessions, with the exception of accessing digital course materials.
 - Explain that participants should secure any items of value or avoid bringing them to class if possible.
 - When following the extended outline, explain that participants must complete the assigned eLearning modules before each session and bring their proof of completion to each session. Proof of completion may be printed or displayed electronically on a laptop or mobile device.

TEAM-BUILDING ACTIVITY

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 5
Participant's
Manual:
Chapter 1



Instructor's Note: Choose just one of the following activities. You do not need to have the class complete both. The purpose of the team-building activity is to break the ice with participants, to get participants used to working together in close proximity, communicating and working together as a team.

- **Superlatives**—This activity requires participants to work together and sort themselves into order (in a line from left to right) based on prompts from the instructor.
 - Line participants up so they are standing shoulder to shoulder.
 - Begin by giving participants prompts to reorder themselves in the line, such as: "Sort yourselves from youngest on the left to oldest on the right."
 - Inform participants that they should talk amongst themselves to uncover the information about each other they'll need to complete the ordering activity.
 - After a series of simple prompts, begin giving participants more difficult prompts that will require them to learn more about each other, such as: "Sort yourselves from least experience to most experienced in terms of lifeguarding."
 - Stop the activity after about 8 minutes.
- **Human Knot**
 - Divide participants into teams of six to eight people. Have each team move to a location that allows them to stand shoulder to shoulder in a small circle.
 - Instruct members of each team to form a human pretzel by having each person extend their left hand across the circle and grasp the left hand of someone else not directly next to them. Then have each person extend their right hand across the circle and grasp the right hand of another, different person.
 - Inform the teams that their task is to unravel their interlocking arms without letting go of anyone's hands and without causing injury. If group members break the chain, they must repair the break the way it was or start over.
 - Stop the activity after about 8 minutes if the group is unsuccessful at making the circle without breaking the chain of hands. It is sometimes impossible to get to a single circle.

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 6-11
Participant's
Manual:
Chapter 1

- Ask participants the following:
 - **How did it feel to be successful or unsuccessful?**
 - **What strategy did your team use to complete the task?**
 - **Who were the leaders in this activity?**
 - **Did the team reach consensus on a plan of action or take action without a plan?**
 - **How well did your team communicate during this activity?**
 - **If you could do it again, what would you change?**
- **Just as in the activity, the lifeguard team must communicate and work together effectively when responding to emergencies.**
- **Effective communication, trust, mutual respect, commitment and cooperation are crucial elements for working effectively as a team.**
- Ask participants: **In your job as a lifeguard, aside from being a team player while responding to emergencies, what can you do as an individual to have a positive effect on the team?**

Answers: Responses should include the following:

 - *Arriving to work on time*
 - *Rotating stations on time*
 - *Attending in-service trainings*
 - *Enforcing safety rules in a consistent manner*
 - *Communicating clearly while treating others with respect*
 - *Being prepared by maintaining knowledge, skills and physical fitness*
 - *Completing secondary responsibilities in a timely and acceptable fashion*
- **As lifeguards, you should be given an Emergency Action Plan (EAP) that guides the actions of lifeguards and other team members in emergencies. The EAP describes what needs to be done and who does it in the event of an emergency. EAPs are discussed in more detail later in the course.**
- **The lifeguard team is part of the broader facility safety team.**
 - **The safety team includes management and maintenance staff who provide assistance in maintaining a safe environment and providing emergency care.**
 - **Local emergency response personnel also are part of the safety team.**

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 12

- When following the extended outline, instruct participants to complete the following assignments prior to the start of the next in-person session.
 - Complete eLearning Module 2: Facility Safety.
 - Read Chapter 2: Facility Safety in the *Lifeguarding Manual*.

FACILITY SAFETY AND PATRON SURVEILLANCE

Lesson Length: 2 hours, 25 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Conduct the in-water skill session for entries and approaches.
- Conduct the skill drill for entries and approaches.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Facility Safety
 - The Drowning Process
 - Effective Surveillance—Zones of Surveillance Responsibility
 - Effective Surveillance—Victim Recognition and Scanning
 - Entries and Approaches

LESSON OBJECTIVES

- Describe the role lifeguards play in ensuring facility safety.
- Identify how to ensure the safety of patrons when weather conditions create safety concerns.
- Explain the reasons for common rules and regulations at aquatic facilities.
- Describe the role that facility management plays in facility safety and the lifeguarding operational benchmarks for facilities.
- Describe the drowning process.
- Identify the behaviors of a swimmer, distressed swimmer and an active and passive victim.
- Identify and define elements of effective surveillance.
- Explain proper scanning techniques and identify tactics to overcome scanning challenges.
- Identify various types of zones of surveillance.
- Demonstrate how to safely and effectively enter the water and approach a victim.
- Explain patron surveillance techniques for various activities.
- Explain patron surveillance techniques for facilities with special attractions.
- Explain and demonstrate lifeguard rotations.
- Demonstrate how to perform effective surveillance including scanning, searching, victim recognition and lifeguard rotations.
- Explain various types of drills that test lifeguard zones, recognition and response.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- 10-pound object (a diving brick or weight—one for every five participants)
- Timing device, such as a stopwatch or smartphone with a stopwatch feature (one per instructor)

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time.
- Have copies of the appropriate materials ready before the start of class.
- Be prepared to answer questions the participants may have about the eLearning content they completed.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 2: Facility Safety.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.

TOPIC: **FACILITY SAFETY AND THE DROWNING PROCESS**

Time: 5 minutes

THE UNPROFESSIONAL LIFEGUARD AND NOT ON YOUR WATCH

GUIDED DISCUSSION:



REFERENCES:

Participant's
Manual:
Chapter 2, 3

- Briefly discuss the videos "The Unprofessional Lifeguard" and "Not on Your Watch" and ask participants if they have any questions or reflections.

TOPIC: **IN-WATER SKILL SESSION: ENTRIES AND APPROACHES**

Time: 40 minutes

SKILL PRACTICE

SKILL PRACTICE:



REFERENCES:

REFERENCES:

Course
Presentation:
Slides 15
Participant's
Manual:
Chapter 6

- Ask participants: **What questions do you have about the "Entries and Approaches" videos?**
- Explain to participants that during the water rescue skill sessions you will demonstrate skills that they saw in the videos included in the eLearning module and guide them through practice.
- For each skill, be sure to review key points from the text and video, including instructions on how to perform each skill and reminders about when each entry or approach is appropriate.
- Explain that every rescue should begin by activating the EAP. Participants should simulate this during each practice session.
- Explain that the signals used to activate the EAP may vary among facilities. Define the method that will be used in skill sessions, including the following:
 - Announce the activation of the EAP with a loud signal either mimicking a whistle or making a verbal announcement.
 - Point to the victim that is in need of help.
- Lead them through the following skills using a rescue tube:
 - Slide-In Entry and Walking Approach
 - Especially useful in shallow water, crowded pools or when a victim with a head, neck or spinal injury is close to the side of the pool.
 - Slide-In Entry and Swimming Approach
 - Especially useful in shallow water, crowded pools or when a victim with a head, neck or spinal injury is close to the side of the pool.
 - Stride Jump and Swimming Approach
 - When you are less than 3 feet above the water and the water is at least 5 feet deep.
 - Compact Jump and Swimming Approach
 - When you are more than 3 feet above the water and the water is at least 5 feet deep.
 - Jump from the deck into the water.

SKILL PRACTICE: <i>continued</i>	SHALLOW WATER LIFEGUARDING <ul style="list-style-type: none"> ■ When conducting the Shallow Water Lifeguarding course, omit the stride jump and swimming approach. The compact jump should be performed when the lifeguard is 3 feet or less above the water. ■ Remind participants that if the tube slips out or if they need to swim a longer distance, let the tube trail behind. They should reposition the tube as appropriate before making contact with the victim. ■ Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice. ■ Participants should practice the skills several times. Time permitting, participants should practice the skills until they are able to meet performance criteria. Participants who cannot meet the performance criteria should be counseled to practice outside of class times if possible. ■ Observe each participant's performance of the skill and provide corrective feedback.
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SKILL DRILL: ENTRIES AND APPROACHES

SKILL DRILL—ENTRIES AND APPROACHES:



REFERENCES:
Participant's
Manual:
Chapter 6



Instructor's Note: *The purpose of this activity is for participants to use critical thinking to decide which entry to use based on the scenario and also to develop speed, endurance and experience when performing approaches with a rescue tube.*

- Explain to participants that they now are going to practice the entry and approach skills to make decisions as to when it is appropriate to use the different entries and approaches and build fitness.
- Keep participants moving throughout these activities to develop conditioning for speed and endurance:
 - Have participants simulate activating the EAP, perform a designated entry and then swim an approach stroke with a rescue tube as fast as they can for a significant distance, 25 yards if possible, climb out without using the ladder and walk quickly back to the starting point. Repeat until participants have done this several times, sometimes swimming the approach stroke with the rescue tube under their armpits and sometimes with the rescue tube trailing behind.
 - Continue to follow the skill drill using the same pattern but give participants a scenario and let them decide what entry to use, such as:
 - The water is murky and they cannot see the bottom: *Slide-In Entry*.
 - They are guarding on the deck and the water is 4-feet deep: *Compact Jump*.
 - The pool is crowded and swimmers are directly in front of them: *Slide-In Entry*.
 - They are in an elevated lifeguard station that is 4 feet above the level of the water and the water is 7-feet deep: *Compact Jump*.
 - They are in an elevated guard chair that is not suitable for a jump so they must climb down to enter the water. The chair could be situated in a shallow water area or not secured adequately to allow the lifeguard to jump from it. Simulate stepping down from the stand and perform a *Compact Jump* or *Slide-In Entry*.
 - They suspect a spinal injury close to the edge of the pool: *Slide-In Entry*.
 - They are guarding a deep water area on the deck and suspect a spinal injury at the far side of the pool: *Compact Jump*, *Stride Jump* or *Slide-In Entry*.

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 16

- When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session.
 - Complete eLearning Module 3: Injury Prevention.
 - Read the following chapters in the *Lifeguarding Manual*:
 - Chapter 3, Surveillance and Recognition
 - Chapter 4, Injury Prevention

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill.

ENTRIES

SKILL CHART: SLIDE-IN ENTRY

1. Sit down on the edge facing the water. Place the rescue tube next to you or in the water.
2. Lower your body into the water feet-first.
3. Retrieve the rescue tube.
4. Place the rescue tube across your chest with the tube under your armpits, focus on the victim and begin the approach.

SKILL CHART: COMPACT JUMP

1. Squeeze the rescue tube high against your chest with the tube under your armpits.
2. Hold the excess line to keep it from getting caught on the lifeguard chair or other equipment when jumping into the water.
3. Jump out and away from the lifeguard chair, pool deck or pier. In a wave pool, time the jump to land on the crest (top) of a wave.
4. Bend your knees and keep your feet together and flat to absorb the shock if you hit the bottom. Do not point your toes or keep your legs straight or stiff.
5. Let the buoyancy of the rescue tube bring you back to the surface.
6. Focus on the victim when surfacing and begin the approach.

SKILL CHART: STRIDE JUMP

1. Squeeze the rescue tube high against your chest with the tube under your armpits.
2. Hold the excess line to keep the line from getting caught on something when jumping into the water.
3. Leap into the water with one leg forward and the other leg back.
4. Lean slightly forward, with your chest ahead of your hips, and focus on the victim when you enter the water.
5. Squeeze or scissor your legs together right after they make contact with the water for upward thrust.
6. Focus on the victim and begin the approach.

SKILL ASSESSMENT TOOL: ENTRIES

Criteria	Proficient	Not Proficient
Equipment is properly positioned for the appropriate entry	<ul style="list-style-type: none"> ■ Control of the rescue tube maintained ■ Tube held securely to the chest for the compact jump and stride jump ■ Excess line held to keep it from getting caught on the lifeguard stand or other equipment 	<ul style="list-style-type: none"> ■ Contact with the rescue tube not maintained ■ Tube not held securely to the chest for the compact jump and stride jump ■ Excess line not held
Appropriate entry is selected for the situation	<ul style="list-style-type: none"> ■ Assumes a sturdy posture and stable footing 	<ul style="list-style-type: none"> ■ Entry causes a safety hazard
Focus on the victim is maintained	<ul style="list-style-type: none"> ■ Upon entering (or resurfacing after a compact jump), focus on the victim or the site where the victim was last seen is maintained 	<ul style="list-style-type: none"> ■ Fails to look toward the victim or site where the victim was last seen

RESCUE APPROACHES

SKILL CHART: WALKING APPROACH

1. Walk to the victim.
2. Hold the rescue tube at your side and walk quickly toward the victim.
3. If necessary, position the tube in front of you before contacting the victim.

SKILL CHART: SWIMMING APPROACH

1. Swim to the victim using a modified front crawl or breaststroke.
2. Keep the rescue tube under your armpits or torso and swim toward the victim with your head up, keeping the rescue tube in control at all times.
3. For longer distances, or if the rescue tube slips out from under your arms or torso while you are swimming, let the tube trail behind.
4. If necessary, reposition the rescue tube in front of you before contacting the victim.

SKILL ASSESSMENT TOOL: APPROACHES

Criteria	Proficient	Not Proficient
Approaches victim safely and quickly	<ul style="list-style-type: none"> ■ Effective propulsion used for safe approach 	<ul style="list-style-type: none"> ■ No effective propulsion ■ Approach causes a safety hazard
Focus on the victim is maintained	<ul style="list-style-type: none"> ■ Focus on the victim or the site where the victim was last seen is maintained 	<ul style="list-style-type: none"> ■ Fails to look toward the victim or site where the victim was last seen
Equipment is properly positioned for the appropriate approach	<ul style="list-style-type: none"> ■ Control of rescue tube is maintained during approach ■ Tube is strapped on during approach ■ Tube remains in position or is repositioned as needed before contact with victim 	<ul style="list-style-type: none"> ■ Fails to maintain contact with the rescue tube ■ Does not strap on tube during approach ■ Tube is not in position for the selected rescue before contact with victim

INJURY PREVENTION

Lesson Length: 1 hour, 10 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Complete the skill practice for Victim Recognition and Lifeguard Rotations.
- Conduct the Victim School activity.
- Conduct the Effective Scanning and Lifeguard Rotations activity.
- Conduct the Round Robin Brick Drill, Rescue Tube Relay and Ask Drill activities.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Injury Prevention Strategies
 - Guarding a Variety of Activities
 - Guarding Special Attractions
 - Guarding for Organized Recreational Swim Groups

LESSON OBJECTIVES

After completing this lesson, participants will be able to:

- Explain how communication with patrons plays a role in preventing injuries.
- Explain patron surveillance techniques for various activities.
- Explain patron surveillance techniques for organized groups.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Rescue tubes (one for every two participants)

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time.
- Have copies of the appropriate materials ready before the start of the class.
- Be prepared to answer questions the participants may have about the review questions they completed.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 3: Injury Prevention.
- The purpose of the Victim School activity is for participants to learn and practice how each of the victim types should act during the rescues throughout the course, so they are getting the most realistic practice being a rescuer as the course progresses (i.e., the victim does not help the rescuer). It will also help them identify victim types throughout the course.
- A drowning victim who is active and struggling may be in a horizontal face-down position during the struggle because they are unable to lift their face out of the water. This may be particularly likely with a younger swimmer, such as a toddler.
- The purpose of the EAP activity is for participants to gain experience scanning, recognizing victims, activating an EAP and performing lifeguard rotations.
- The purpose of the Round Robin Brick drill is for participants to build endurance and skill in treading water.
- The purpose of the Rescue Tube Relay drill is to build endurance, to gain additional practice with entries and approaches and experience swimming quickly with the rescue tube. If a relay is not practical, you can switch this activity to sprints.
- The purpose of the ask drill activity is to help lifeguards understand the ask drill, a drill commonly used by lifeguard managers to identify what lifeguards can and cannot see from each station. The intent of this activity is not to practice victim recognition, but to identify what the lifeguard can actually see at the top, middle or bottom of the water from their station.
- For realistic simulation and practice, when possible, conduct the ask drill activity when the facility is open to the public and other activities such as recreational swim, swim lessons or lap swim are happening. Ensure that you communicate the drill with the lifeguard management and the lifeguards on duty, so that the lifeguards are aware and do not mistake the drill for an actual emergency. Monitor the situation and be prepared to intervene if a patron is alarmed.
- There's no "wrong" answer. If the participants do not see a victim or object, they have identified a challenge for lifeguards at that station. It is possible that they did not identify the victim or object because of a scanning challenge such as a blind spot, glare, water movement, heavy patron loads, etc.
- When conducting the Victim School activity, remind participants that a drowning victim who is active and struggling may be in a horizontal face-down position during the struggle because they are unable to lift their face out of the water. This may be particularly likely with a younger swimmer, such as a toddler.
- You can conduct the Ask Drill activity when the facility is open to the public and other activities such as recreational swim, swim lessons or lap swim are happening. Ensure that you communicate the drill with the lifeguard management and the lifeguards on duty so that the lifeguards are aware and do not mistake the drill for an actual emergency.
- When conducting the Ask Drill activity, there is no "wrong" answer. If the participants don't see a victim or object, they have identified a challenge for lifeguards at that station. It is possible that they did not identify the victim or object because of a scanning challenge, such as a blind spot, glare, water movement, heavy patron loads, etc.
- Plan to assign each participant a number and record it with their name to avoid calling the number of one of those playing the lifeguard role for the surveillance activity.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.

TOPIC: INJURY PREVENTION

Time: 5 minutes

INJURY PREVENTION

GUIDED DISCUSSION:



- Briefly discuss the video “Injury Prevention” and ask participants if they have any questions or reflections.

REFERENCES:

Participant's
Manual:
Chapter 4

TOPIC: IN-WATER SKILL SESSION: VICTIM RECOGNITION AND LIFEGUARD ROTATIONS

Time: 35 minutes

VICTIM SCHOOL

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 18



Instructor's Note: *The purpose of this activity is for participants to learn and practice how each of the victim types should act during the rescues throughout the course, so they are getting the most realistic practice being a rescuer as the course progresses (i.e., the victim does not help the rescuer). It will also help them identify victim types throughout the course.*

- Explain to participants that they are going to participate in an activity to help them understand the different types of victims they will encounter during this course.
- The purpose of this activity is to help participants understand how to play the role of a victim.
- Throughout the course, participants will be required to act as both rescuer and victim to gain realistic experience practicing rescues.
- Lead participants through an in-water practice session of each of the following victim behaviors:
 - Swimmers in Distress:
 - Able to keep your face out of the water
 - Able to call for help
 - Able to wave for help
 - Drowning Victim–Active and Struggling at the Surface:
 - Ineffective kick
 - Head leaning back
 - Arms either out to the side or to the front, pressing down on the water (like they are trying to climb a ladder underwater; arms not flailing above their head)
 - Struggling to keep their mouth above water to breathe
 - Drowning Victim–Active and Struggling–Submerged:
 - Climbing a ladder under water, fighting to get to the surface
 - Staring at the surface of the water, unable to make progress towards the surface



continued



Instructor's Note: A drowning victim who is active and struggling may be in a horizontal face-down position during the struggle because they are unable to lift their face out of the water. This may be particularly likely with a younger swimmer, such as a toddler.

- Drowning Victim Who is Passive and Not Struggling–Face-Down:
 - Limp, no movement
 - Floating at the surface
 - Horizontal or vertical
- Drowning Victim Who is Passive and Not Struggling–Submerged:
 - Limp, no movement
 - Underwater, at the bottom or sinking towards the bottom
- Horizontal or vertical. Explain to participants that when they are acting as a victim in class, it's important to be realistic to allow for properly simulated emergency scenarios throughout the rescue.
- For example, when acting as a passive victim and being rescued by another participant, they must remain limp and unresponsive until the instructor prompts.
- Explain that assisting the rescuing lifeguard by swimming or kicking is not appropriate for passive drowning victims. Doing so will prevent other lifeguarding course participants from gaining realistic practice in this important lifesaving skill.

EFFECTIVE SCANNING AND LIFEGUARD ROTATIONS

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 19



Instructor's Note: The purpose of this activity is for participants to gain experience scanning, recognizing victims, activating an EAP and performing lifeguard rotations.

- Explain to participants that they are going to participate in an activity to experience effective scanning and lifeguard rotations.
- Two participants will be positioned on deck as lifeguards, equipped with rescue tubes and hip packs. The remaining participants will be in the water as if it were a recreational swim time.
- Assign each participant a number and record it with their name to avoid calling the number of one of those playing the lifeguard role. When their number is called, they will know it is their turn to play the role of a distressed swimmer, an active victim or a passive victim. The victim should not react immediately but should allow the lifeguards some time to scan the pool before presenting them with the challenge of victim recognition.
- Assign zones of coverage for the lifeguards. When a victim is recognized, the lifeguard should activate (or simulate) the EAP, point to the victim and state what type of victim they observe.
- Place an extra rescue tube and hip pack on the deck for the incoming lifeguard. Explain that the participant who was the victim will exit the water, put on a rescue tube and hip pack and rotate into the position of one of the lifeguards. The lifeguard who is being replaced will rotate to the position of the other lifeguard; afterward, they will place the rescue tube and hip pack on the deck and enter the water to join the recreational swim group. Follow the same pattern of rotation throughout the activity.



continued

- Remind participants that they need to follow rotation procedures that maintain patron surveillance.
 - Each lifeguard should carry their own rescue tube during the rotation.
 - The incoming lifeguard should be aware of the patrons and activity level of the zone and begin scanning while walking toward the station, checking all areas of the water from the surface to the bottom.
 - The outgoing lifeguard should inform the incoming lifeguard of any situations that need special attention. The exchange of information should be brief and patron surveillance must be maintained throughout the entire rotation.
 - Once in position, with the rescue tube strapped on, the incoming lifeguard makes any adjustments needed, such as removing shoes or adjusting an umbrella, before confirming to the outgoing lifeguard that they “own the zone.” The outgoing lifeguard should continue scanning as they are walking toward the next station.
 - Begin the activity with the lifeguards that have been assigned to be on deck. Call out a number that has been assigned to one of the participants who is in the water.
 - Provide guidance as needed for both victim recognition and for the lifeguard rotation.
 - Continue the activity until everyone has had the opportunity to play the role of a lifeguard.

TOPIC: **PUTTING IT ALL TOGETHER**

Time: 35 minutes

ROUND ROBIN BRICK DRILL

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 20



Instructor's Note: *The purpose of this drill is for participants to build endurance and skill in treading water.*

- Gather participants and explain they will be participating in three activities to challenge their physical fitness, skill and test a typical zone of surveillance.
- Have participants form a circle in deep water and begin treading.
- Hand one participant a brick and have them tread water while holding the brick at the surface of the water with both hands for 20 seconds. At your signal, have participants pass it to the person on their right. Participants who are not currently supporting the brick will alternate between treading water by kicking only, then using their arms and legs each time you signal.
- Anyone who drops the brick must retrieve it.
- Continue this activity for about 7 to 10 minutes.
- You can vary this activity by adding additional items to the circle, such as another brick and a tennis ball.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, place three bricks on the bottom of the shallow end of the pool, starting at the edge of the pool; there should be 5 feet between each brick.
- At your signal, have participants swim under water to the first brick, pick up the brick and stand up, bringing the brick to the surface of the water. After placing the brick back on the bottom of the pool, have participants swim to the next brick and repeat the drill.
- Continue this activity until every participant has retrieved all three bricks two times.

RESCUE TUBE RELAY

ACTIVITY:



REFERENCES:

Course

Presentation:

Slides 20



Instructor's Note: *The purpose of this drill is to build endurance, to gain additional practice with entries and approaches and experience swimming quickly with the rescue tube. If a relay is not practical, you can switch this activity to sprints.*

- Explain to participants that this is a swimming relay activity to practice entries and approach strokes combined with speed.
- Divide the group into two or more teams with an equal number of participants.
- Each team member, wearing a hip pack, must either do a stride jump or compact jump into the water and swim to the other side, using a modified front crawl or breaststroke while keeping the rescue tube under their armpits.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, participants should use the compact jump to enter the water.
- When each team member reaches the other end of the pool, they should hand off the rescue tube and hip pack to the next person in line. The next person in line performs a stride jump or compact jump into the water and swims with the rescue tube back to the starting point.
- Continue this process until each team member has participated, or continue for about 7 to 10 minutes.
- You can vary this activity by changing the type of entry, approach stroke or letting the tube trail behind.

ASK DRILL

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 20



Instructor's Note: The purpose of this activity is to help lifeguards understand the ask drill, a drill commonly used by lifeguard managers to identify what lifeguards can and cannot see from each station. The intent of this activity is not to practice victim recognition, but to identify what the lifeguard can actually see at the top, middle or bottom of the water from their station.

For realistic simulation and practice, when possible, conduct this activity when the facility is open to the public and other activities such as recreational swim, swim lessons or lap swim are happening. Ensure that you communicate the drill with the lifeguard management and the lifeguards on duty, so that the lifeguards are aware and do not mistake the drill for an actual emergency. Monitor the situation and be prepared to intervene if a patron is alarmed.

- Divide participants into two teams: one lifeguard team and one patron team.
 - The lifeguard team should wait in a different room or be unable to see while the instructor places the objects and “victims”.
- Place an object, such as a manikin, silhouette, a live “victim” (other course participant) or a sinkable object, in various locations.
- Have participants take turns acting as the lifeguard stationed at different stations throughout the pool area. These should include stations used by the lifeguards at that facility, including elevated stations, ground-level stations and roving stations.
- Ask the lifeguards:
 - Can you see the object(s)?
 - Which object(s) would cause you to respond and why?
- If a lifeguard does not identify an object or victim, ask them what could be done reduce or eliminate the scanning challenges at that station.



Instructor's Note: There's no “wrong” answer. If the participants do not see a victim or object, they have identified a challenge for lifeguards at that station. It is possible that they did not identify the victim or object because of a scanning challenge such as a blind spot, glare, water movement, heavy patron loads, etc.

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 21

- When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session.
 - Complete eLearning Module 4: Water Rescue Skills
 - Read the following chapters in the *Lifeguarding Manual*:
 - Chapter 5, Emergency Action Plans
 - Chapter 6, Water Rescue Skills

WATER RESCUE SKILLS

Lesson Length: 4 hours, 30 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Discuss all points in the topic Water Rescue Skills—Submerged Victim Rescues.
- Conduct the skill practice for rescues at or near the surface.
- Complete the skill drills for Passive Victim Extrication (a four-part skill drill).
- Conduct the EAP activity.
- Conduct the skill practice for submerged victim rescues and extrication.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Emergency Action Plans
 - Water Rescue Skills—Rescues at or Near the Surface
 - Water Rescue Skills—Submerged Victim Rescues
 - Extrications

LESSON OBJECTIVES

- Guide the discussion on Emergency Action Plans.
- Complete the Putting It All Together—EAP for Active Victim or Distressed Swimmer.
- Demonstrate how to safely and effectively rescue a submerged victim in shallow or deep water.
- Demonstrate how to safely and effectively perform feet-first and head-first surface dives.
- Demonstrate how to safely and effectively extricate a passive victim from the water using a backboard.
- Demonstrate how to put on gloves in a wet environment.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Rescue tubes (one for every two participants)
- Backboard (one for every three participants)
- Latex-free nitrile gloves
- Timing device, such as a stop watch or smartphone with a stop watch feature

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time.
- Be prepared to answer questions participants may have about the review questions they completed.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 4: Water Rescue Skills.
- To help ensure participant comfort and safety when practicing submerged victim rescues:
 - Instruct participants that if they experience difficulty when playing the role of a victim, they should signal “let go” to the lifeguard by a predetermined safety signal, such as a tap or gentle pinch.
 - Explain that ear and sinus squeeze can be uncomfortable; for those with congestion, it can be painful or even cause damage to the ear. In this course, when practicing rescues of submerged victims, participants are required only to go to a depth of 7 to 10 feet. However, when hired to work at a facility with deeper water, they would be expected to be able to go all the way to the bottom.
- Explain to participants that swim goggles may not be used for rescues of submerged victims since they have no mechanism for pressure relief, which could result in injury to the eyes when swimming in deeper water. They will be expected to open their eyes under water to perform rescues.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.
- When conducting the skill drill for active and passive victim rescues, ensure the participants are challenged by keeping them all moving and rotating to gain experience with a variety of victims (other participants in the class).

TOPIC: IN-WATER SKILL SESSION— RESCUE SKILLS, PART 1

Time: 1 hour, 25 minutes

WATER RESCUE SKILLS—RESCUES AT OR NEAR THE SURFACE


SKILL
PRACTICE:



REFERENCES:

Course
Presentation:
Slides 24
Participant's
Manual:
Chapter 6

- Ask participants: **What questions do you have about the "Rescues at or Near the Surface" video?**
- Ask participants: **What are the different rescue skills that lifeguards use to rescue a victim at or near the surface of the water?**
Answers: Responses should include the following:
 - Reaching Assist
 - Simple Assist
 - Active Victim Front Rescue
 - Active Victim Rear Rescue
 - Passive Victim Front Rescue
 - Passive Victim Rear Rescue
 - Multiple Victim Rescue
- Explain to participants that during water rescue skill sessions you will demonstrate skills that they saw in the videos included in the eLearning module and guide them through practice.
- Pair up participants and explain that they will take turns as a victim and rescuer for each skill. For the multiple victim rescue, reassign participants into groups of three.
- For each skill, organize participants so that they can clearly see and hear. Be sure to provide any instructions related to their position in the water or how they should behave as victims.
- Lead them through the following skills for victims at or near the surface:
 - Reaching Assist From the Deck
 - Lifeguards: on the edge of the deck
 - Victims: about 3 feet from the edge of the pool; distressed swimmer
 - Simple Assist
 - Lifeguards: standing in shallow water
 - Victims: standing in shallow water; losing balance
 - Active Victim Front Rescue
 - Lifeguards: on the edge of the deck
 - Victims: at least 10 yards from the edge of the pool facing the lifeguard; struggling in deep water
 - Active Victim Rear Rescue
 - Lifeguards: on the edge of the deck
 - Victims: at least 10 yards from the edge of the pool facing away from the lifeguard; struggling in deep water

<p>SKILL PRACTICE: <i>continued</i></p> 	<ul style="list-style-type: none"> ○ Passive Victim Front Rescue <ul style="list-style-type: none"> ● Lifeguards: on the edge of the deck ● Victims: in deep water, passive ○ Passive Victim Rear Rescue <ul style="list-style-type: none"> ● Lifeguards: on the edge of the deck ● Victims: in deep water, passive ○ Multiple Victim Rescue <ul style="list-style-type: none"> ● Lifeguards: in the water ● Victims: two victims per rescuer in deep water; when playing the role of the victims they should face each other, one victim holding securely to the other victim ■ Observe each participant's performance of the skill and provide global and individual feedback to correct common mistakes or commend correct skill practice.
	<p>SHALLOW WATER LIFEGUARDING</p> <ul style="list-style-type: none"> ■ For the Shallow Water Lifeguarding course, practice the simple assist and reaching as noted above. ■ For the Active Victim Front Rescue, Active Victim Rear Rescue and Multiple Victim Rescue, practice in water up to 5 feet deep. ■ For the Passive Victim Front and Rear Rescue, the victim should be at or near the surface of the water.

SKILL DRILL— ACTIVE & PASSIVE VICTIM RESCUES:



REFERENCES:
Participant's
Manual:
Chapter 6



Instructor's Note: *The purpose of this skill drill is to keep lifeguard participants rotating and practicing rescues for a variety of different victim types.*

- Explain to participants that they are going to participate in an activity to practice recognizing a victim, activating the EAP, entering the water, approaching a victim, performing a rescue and returning the victim safely to the side of the pool. This is designed to allow participants to practice rescuing a variety of victims in rapid succession.
- Divide the class in half and assign one group as lifeguards and the other group as victims. Line up lifeguards stationed on the deck, one per victim in the water:

VICTIMS	X	X	X	X	X
LIFEGUARDS	O	O	O	O	O

- Explain that when you say, "Go!" all victims and lifeguards will go at the same time:
 - The victims will simulate an active victim facing the lifeguard.
 - The lifeguards will simulate the EAP signal, enter the water, rescue the victim and return the victim to a point of safety at the wall where the rescuer started the rescue.
 - Lifeguards will exit the water and the victims will return to their same spot in the water to be victims again.
- Once out of the water and standing in front of their victims again, have each lifeguard move one spot down so they are stationed in front of the next victim in line. Have the last rescuer in line move to the first position so that each lifeguard has a new victim in front of them. On your instruction to go, lifeguards will repeat the Front Active Victim Rescue with the new victim.
- Continue until all lifeguards have rotated down the line to rescue each victim and they are back in front of the victim they started with.
- Repeat the drill with the victim facing away from the rescuer.
- Repeat this drill after each participant has had the opportunity to rescue active drowning victims.
 - Repeat drill for Passive Victim Front Rescue.
 - Repeat drill for Passive Victim Rear Rescue.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include:
 - Active Victim Front Rescue: not keeping straight arms throughout, pushing the victim onto their back, not having the victim lean forward on tube to stay up
 - Active Victim Rear Rescue: not communicating with the victim after making contact, trying to put the active victim into a vertical position, trying to put them completely on their back

SKILL DRILL:*continued*

- Passive Victim Front Rescue: grasping the victim's arm in the incorrect place (topside instead of underside), unable to easily turn the victim face-up by pulling and twisting the arm, not pushing the tube (with a straight arm) under the victim's back during the turn, letting go of one arm before in position to tow, victim's head not in an open airway position during the tow, not reaching over the tube for the tow, not hooking the towing arm tight during the tow
- Passive Victim Rear Rescue: victim's head not in an open airway position during the tow, not reaching over the tube for the tow, not hooking the towing arm tight during the tow
- Multiple Victim Rescue: not supporting the victim's head

TOPIC: PUTTING IT ALL TOGETHER**Time: 35 minutes****EAP ACTIVITY****ACTIVITY:****REFERENCES:**

Course
Presentation:
Slides 26
Participant's
Manual:
Chapter 5



Instructor's Note: *The purpose of this activity is for participants to gain experience in an EAP as the rescuer and assisting responder, and to use critical thinking in assessing how the EAP went.*

- Ask participants: **What questions do you have about the "Emergency Action Plans" video?**
- Ask participants: **What is the purpose of an EAP?**
Answer: The purpose of an EAP is to describe everyone's responsibility in an emergency.
- Explain to participants that they are going to participate in an activity to practice an EAP for an active victim or distressed swimmer.
- Assign one lifeguard who is performing patron surveillance and one back-up lifeguard who is not on surveillance duty. Assign the zone and have the lifeguard go to the lifeguard station, and have the back-up lifeguard go to an area on the deck where they can see the lifeguard station.
- Explain to participants that upon recognizing a victim, the lifeguard will:
 - Activate the EAP.
 - Enter the water using the appropriate entry.
 - Perform the appropriate rescue.
 - Bring the victim to a point of safety at the side of the pool.
- Explain to participants that when the EAP signal is activated, the back-up lifeguard will get a rescue tube, go to the lifeguard station and assume coverage of the zone.
- Gather the rest of the group so that the lifeguards cannot hear. Assign someone to simulate a victim (active or distressed) after a prearranged signal from you, such as a head nod.
- Begin the activity by allowing the swimmers to swim and play until you give the signal and the drowning simulation begins.
- Once the rescue is complete, gather the group and discuss how it went and what the next steps of the EAP would be.
- Repeat the activity until all participants have had the opportunity to be a lifeguard or back-up lifeguard.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.

SUBMERGED VICTIM RESCUES AND EXTRICATION

SKILL PRACTICE :



REFERENCES:

Course
Presentation:
Slides 28-31
Participant's
Manual:
Chapter 6



Instructor's Note: Follow these safety tips when practicing rescues for victims submerged in deep water:

- Instruct participants that if they experience difficulty when playing the role of a victim, they should signal "let go" to the lifeguard by a predetermined safety signal, such as a tap or gentle pinch.
- Explain that ear and sinus squeeze can be uncomfortable and, for those with congestion, it can be painful or even cause damage to the ear. In this course, when practicing rescues of submerged victims, participants are required only to go to a depth of 7 to 10 feet. However, when hired to work at a facility with deeper water, they would be expected to be able to go all the way to the bottom.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding Course, participants are required only to go to a maximum depth of 5 feet.



Instructor's Note: When demonstrating the submerged victim rescue, start with a skill demonstration on the pool deck to show participants the correct position of the rescue tube and demonstrate how to "climb up the tube" while bringing a submerged victim to the surface. Following the land demonstration, conduct an in-water demonstration so that participants can see the correct lifeguard and rescue tube position (the rescue tube should be vertical as the lifeguard approaches the surface of the water).

- Ask participants: **Do you have any questions about the submerged victim rescue skills that you observed in the eLearning video?**
- Ask participants: **What are some examples of submerged victim rescue skills that you saw in the eLearning module and in your Lifeguarding Manual?**
Answers: Responses should include the following:
 - Passive Submerged Victim—Shallow Water
 - Submerged Victim in Deep Water
- Ask participants: **When performing a submerged victim rescue in deep water, technique should lifeguards use to submerge underwater to reach the victim?**
 - Feet-First Surface Dive
 - Head-First Surface Dive
- Ask participants: **After performing a rescue, what factors should you consider when deciding which extrication technique to use?**
 - The victim's size
 - The victim's condition
 - Characteristics of the facility (attractions with stairs or moving water, zero depth entry)

**SKILL
PRACTICE:**



REFERENCES:

Participant's
Manual:
Chapter 6

- Explain to participants that during the water rescue skill sessions, you will demonstrate each skill that they saw in the videos included in the eLearning module and guide participants through practice.
- Explain that swim goggles may not be used for rescues of submerged victims since they have no mechanism for pressure relief, which could result in injury to the eyes when swimming in deeper water. They will be expected to open their eyes under water to perform rescues.
- Pair up participants and explain that they will take turns as victim and rescuer for each skill. For the passive victim extrication using a backboard skill, participants should form groups of three.
- For each skill, organize participants so that they can clearly see and hear. Be sure to provide any instructions related to their position in the water or how they should behave as victims.
- Explain to them that for each rescue skill, they should begin by simulating the activation of the emergency action plan (EAP) (except when learning the surface dives).
- Lead them through skill demonstrations followed by practice for the following skills:
 - Submerged Passive Victim in Shallow Water
 - Instructor demonstration on dry land
 - Lifeguards: on the edge of the deck
 - Victims: at least 10 yards from the edge of the pool submerged in shallow water; passive
 - Feet-First Surface Dive in Deep Water
 - Instructor demonstration on dry land
 - Instructor demonstration in water
 - Participant practice in the water (with no victim)
 - Head-First Surface Dive in Deep Water (in water practice only)
 - Instructor demonstration in water
 - Participant practice in the water (with no victim)
 - Submerged Victim in Deep Water
 - Land demonstration—instructor demonstrates submerged victim rescue on land. The tube should be placed overhead, such as on a storage locker or diving board, or held by a participant.
 - Feet-first Surface Dive with Tube—skill practice—no victim
 - Submerged Victim Rescue—skill practice—with victim
 - Lifeguards: on the edge of the deck
 - Victims: at least 10 yards from the edge of the pool submerged in deep water; passive
 - Extrication Using a Backboard at the Pool Edge
 - Lifeguards: on the edge of the deck
 - Assisting Responder: on deck with backboard
 - Victims: at least 10 yards away—passive
 - Optional: Extrication Using a Backboard at the Steps (hot tub or aquatic attraction area)

**SKILL
PRACTICE:**
continued



SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, omit the feet-first and head-first surface dives and the submerged victim in deep water rescue unless necessary to get to the bottom.
- Passive Victim Extrication Using a Backboard
 - Rescuing lifeguard: bringing victim to the edge of the pool after a passive victim rescue
 - Assisting responder: on deck with backboard
 - Victim: passive
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include:
 - Submerged Passive Victim in Shallow Water: taking the rescue tube off completely; victim's head not in an open airway position during the tow; not reaching over the tube for the tow; not hooking the towing arm tight during the tow
 - Feet-First Surface Dive: positions that promote buoyancy rather than submerging if the person is not submerging (holding the breath; looking straight ahead or up toward the surface; using legs in a way to move to the surface such as kicking movements that fight submerging; legs spread not streamlined); not using sweeping arm movements to assist submerging
 - Head-First Surface Dive: positions that promote buoyancy rather than support submerging if the person is not submerging (holding the breath; not looking down toward the target; looking up toward the surface; not using sweeping arm movements to assist submerging)
 - Submerged Victim in Deep Water: does not submerge to a position "standing" behind the victim (heel to toe); does not grasp arm around the victim's chest; does not feed the tube strap into their hand as they move toward the surface; unable to get the tube under the victim's back before breaking the surface; victim's head not in an open airway position during the tow; not reaching over the tube for the tow; not hooking the towing arm tight during the tow
 - Extrication Using a Backboard at the Pool Edge: does not submerge board deep enough; does not angle board once submerged to assist loading the victim; does not control the board; does not control the board and the victim; loses contact with the victim; does not keep the board low during removal; drops the board after removal

SKILL DRILL PART 1—PUTTING ON GLOVES WITH WET HANDS

SKILL DRILL:



REFERENCES:

Participant's
Manual:
Chapter 6

- Assemble the participants on the deck and explain they will be practicing team rescues for a submerged passive victim in deep water, removing the victim from the water on a backboard and preparing to provide care by putting on disposable gloves.
- Explain that they will be practicing how to put on gloves in a wet environment. They will learn the method for glove removal in Lesson 5.
- Explain that putting on gloves with wet hands can be challenging.
- Lead them through the skill of putting on gloves with wet hands. One method is to dip the glove in the pool and fill with water and insert your hand in the glove.
- Participants should practice the skill until they are comfortable doing it quickly.

SKILL DRILL PART 2—SUBMERGED VICTIM RESCUE, EXTRICATION AND GLOVES

SKILL DRILL:



REFERENCES:

Participant's
Manual:
Chapter 6

- Divide the participants into groups of three and assign one rescuing lifeguard, one victim and one assisting lifeguard for each group. Have both lifeguards wear a hip pack with gloves inside.
- Explain for each group:
 - The rescuing lifeguard will simulate activating the EAP and enter the water.
 - The victim will submerge to the bottom in deep water at the same time as the rescuer. The rescuing lifeguard will rescue a victim who is submerged in deep water and passive.
 - While the rescuing lifeguard supports the victim at the edge, the assisting lifeguard will bring the backboard and then remove the victim from the water, demonstrating team communication skills between both lifeguards.
 - Once removed from the water, the victim will remain passive on the backboard until all both lifeguards have put on their gloves.
- Repeat the drill until each person in the group has performed as a rescuing lifeguard and an assisting lifeguard at least once.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, have teams practice rescues for a submerged passive victim in shallow water, removing the victim from the water on a backboard and preparing to provide care by putting on disposable gloves.
- Participants will complete part one as it is described above. For part two, the victim will submerge to the bottom in shallow water at the same time as the rescuer. The rescuing lifeguard will rescue a victim who is submerged in shallow water and passive.

SKILL DRILL PART 3—RESCUE AND EXTRICATION CHALLENGE

SKILL DRILL:



- Divide the participants into groups of four and assign one rescuing lifeguard, one victim, and two assisting rescuers. Have them repeat the drill from part two but challenge the groups to complete the extrication skill in under 1 minute.

REFERENCES:

Participant's
Manual:
Chapter 6

SKILL DRILL PART 4: TEAM RESPONSE—RESCUE AND EXTRICATION

SKILL DRILL:



- Divide the participants into groups of four and assign one rescuing lifeguard, one victim, and two assisting rescuers. Have them repeat the drill above but to do the extrication using two additional rescuers to help with the backboard.

REFERENCES:

Participant's
Manual:
Chapter 6

FOLLOW-UP

- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.

ASSIGNMENT

ACTIVITY:



- When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session.
 - Complete eLearning Module 5: Before Providing Care, Victim Assessment and Breathing Emergencies.
 - Read the following chapters in the *Lifeguarding Manual*:
 - Chapter 7, Before Providing Care and Victim Assessment
 - Chapter 8, Breathing Emergencies

REFERENCES:

Course
Presentation:
Slides 32

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill. Assessment criteria that are general for the category of skills, as well as specific to the skill, must be met.

ASSISTS

SKILL CHART: REACHING ASSIST FROM THE DECK

1. Extend the tube to the victim, keeping your body weight on your back foot and crouching to avoid being pulled into the water.
 - Remove the rescue strap from your shoulder if necessary to reach the victim and hold the shoulder strap in one hand and extend the tube to the victim with the other hand.
2. Tell the victim to grab the rescue tube.
3. Slowly pull the victim to safety.

SKILL CHART: SIMPLE ASSIST

1. Approach the person who needs help while keeping the rescue tube between you and that person.
2. Reach across the tube and grasp the person at the armpit to help the person maintain their balance.
 - If the person is under water, grasp under the person's armpits with both hands and help them stand up.
3. Assist the person to the exit point, if necessary.

SKILL ASSESSMENT TOOL: ASSISTS

Criteria	Proficient	Not Proficient
Communicates with the victim	<ul style="list-style-type: none"> ■ Victim is reassured and told what to do 	<ul style="list-style-type: none"> ■ No attempted verbal communication with the victim
Maintains balance	<ul style="list-style-type: none"> ■ Assumes a sturdy posture and stable footing 	<ul style="list-style-type: none"> ■ Stumbles, falls or knocks victim under the water
Equipment is properly positioned for the assist	<ul style="list-style-type: none"> ■ Control of the rescue tube is maintained between victim and rescuer 	<ul style="list-style-type: none"> ■ Rescue tube is not kept between victim and rescuer
Maintains support until victim is safe	<ul style="list-style-type: none"> ■ Supports the victim so that the mouth and nose are above water ■ Assists the victim to a safe position 	<ul style="list-style-type: none"> ■ Victim's mouth or nose is under water ■ Lets go of victim without ensuring that the victim is at a position of safety ■ Does not assist the victim out of the water if needed

RESCUES AT OR NEAR THE SURFACE

SKILL CHART: ACTIVE VICTIM FRONT RESCUE

1. Approach the victim from the front.
2. As you near the victim, grab the rescue tube from under your arms with both hands and begin to push the tube out in front of you. Continue kicking to maintain momentum.
3. Thrust the rescue tube slightly under water and into the victim's chest, keeping the tube between you and the victim. Encourage the victim to grab the rescue tube and hold onto it.
4. Keep kicking, fully extend your arms and move the victim to a safe exit point. Change direction, if needed.

SKILL CHART: ACTIVE VICTIM REAR RESCUE

1. Approach the victim from behind with the rescue tube across your chest.
2. With both arms, reach under the victim's armpits and grasp the shoulders firmly. Tell the victim that you are there to help and continue to reassure the victim throughout the rescue.
3. Using your chest, squeeze the rescue tube between your chest and the victim's back.
4. Keep your head to one side to avoid being hit by the victim's head if it moves backwards.
5. Lean back and pull the victim onto the rescue tube.
6. Use the rescue tube to support the victim so the victim's mouth and nose are out of the water.
7. Tow the victim to a safe exit point.

SKILL CHART: PASSIVE VICTIM FRONT RESCUE

1. Approach the face-down victim from the front with the rescue tube across your chest.
2. As you near the victim, reach one arm out toward the victim's opposite arm and grab the victim's wrist/forearm while grabbing the rescue tube with your other hand.
3. Grasp the victim's opposite wrist/forearm with your palm facing up on the underside of the victim's arm. Pull and twist the arm toward your opposite shoulder to turn the victim over on their back. As you pull and twist, thrust the rescue tube under the victim's back as they turn over.
4. Place the tube under the victim below the shoulders so that the victim's head naturally falls back to an open airway position. Keep the victim's nose and mouth out of the water.
5. Reach one arm over the victim's shoulder and grasp the rescue tube.
6. Use the other hand to stroke toward a safe exit point.
7. Remove the victim from the water, assess the victim's condition and provide appropriate care.

SKILL CHART: PASSIVE VICTIM REAR RESCUE

1. Approach a face-down victim from behind with the rescue tube across your chest.
2. With both arms, reach under the victim's armpits and grasp the shoulders firmly. You may be high on the victim's back when doing this.
3. Using your chest, squeeze the rescue tube between your chest and the victim's back.
4. Keep your head to one side to avoid being hit by the victim's head if it moves backwards.
5. Roll the victim over by dipping your shoulder and rolling onto your back so that the victim is face-up on top of the rescue tube. Keep the victim's mouth and nose out of the water. Place the tube under the victim below the shoulders so that the victim's head naturally falls back to an open-airway position.
6. Reach one arm over the victim's shoulder and grasp the rescue tube.
7. Use the other hand to stroke toward a safe exit point.
8. Remove the victim from the water, assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOLS: RESCUES AT OR NEAR THE SURFACE		
Criteria	Proficient	Not Proficient
Communicates with the victim	<ul style="list-style-type: none"> Victim is reassured and told what to do 	<ul style="list-style-type: none"> No attempted verbal communication with the victim
Equipment is properly positioned for the appropriate rescue	<ul style="list-style-type: none"> Rescue tube is kept between the lifeguard and the victim Rescue tube is positioned to support the victim at the surface of the water 	<ul style="list-style-type: none"> Rescue tube is not maintained between the victim and the rescuer The victim is not supported by the rescue tube
Victim's mouth and nose above water	<ul style="list-style-type: none"> Victim's mouth and nose are maintained above water 	<ul style="list-style-type: none"> Victim's mouth or nose is under water
Tows the victim to a safe exit point	<ul style="list-style-type: none"> Victim is towed to a safe exit point using the rescue tube to support the victim 	<ul style="list-style-type: none"> Victim is not supported by the rescue tube Releases contact with the victim
ACTIVE VICTIM FRONT RESCUE		
Rescue tube is placed to provide support for the victim and safety for the rescuer	<ul style="list-style-type: none"> Rescue tube is slightly submerged and thrust into the victim's chest to provide support Lifeguard's arms are extended with elbows locked 	<ul style="list-style-type: none"> Rescue tube is thrust above victim's armpits or in the stomach area and does not provide support Lifeguard's arms are not fully extended
Moves the victim to a safe exit point	<ul style="list-style-type: none"> Forward momentum and kick are used to move the victim to a safe exit point 	<ul style="list-style-type: none"> Little to no forward movement Unable to move the victim to a safe exit point
ACTIVE VICTIM REAR RESCUE		
Lifeguard squeezes the rescue tube against the victim's back to provide support for the victim and safety for the rescuer	<ul style="list-style-type: none"> Rescue tube remains in place and is repositioned if it slips out 	<ul style="list-style-type: none"> Unable to tow the victim to a safe exit point Victim is not supported by the rescue tube Releases contact with the victim

PASSIVE VICTIM FRONT RESCUE		
Turns the victim to a face-up position	<ul style="list-style-type: none"> ■ Pulls and twists the victim's opposite arm to turn the victim over ■ Rescue tube is thrust under the victim's back as the victim is turned over 	<ul style="list-style-type: none"> ■ Unable to pull the victim to a face-up position ■ Rescue tube is not placed under the victim's back as the victim is turned over ■ Unable to reposition the tube if it slips out
Maintains head in an open airway position at the surface	<ul style="list-style-type: none"> ■ Rescue tube is placed under the victim's back so that the victim's head is in an open airway position 	<ul style="list-style-type: none"> ■ Victim's head is tilted forward (chin toward chest)
Switches to a towing position	<ul style="list-style-type: none"> ■ Holds the victim's wrist of one arm until in position with other arm to tow the victim to safety ■ The towing arm is over and around the rescue tube 	<ul style="list-style-type: none"> ■ Releases contact with the victim ■ The towing arm is not over and around the rescue tube
PASSIVE VICTIM REAR RESCUE		
Turns the victim to a face-up position	<ul style="list-style-type: none"> ■ Rescue tube is squeezed between rescuer's chest and victim's back ■ Leans back to pull victim face-up 	<ul style="list-style-type: none"> ■ Rescue tube is not maintained between the victim and the rescuer ■ Unable to reposition the tube if it slips out ■ Unable to pull victim to a face-up position
Maintains head in an open airway position at the surface	<ul style="list-style-type: none"> ■ Rescue tube is placed under the victim's back so that the victim's head falls back to an open airway position 	<ul style="list-style-type: none"> ■ Victim's head is tilted forward (chin toward chest)
Switches to a towing position	<ul style="list-style-type: none"> ■ Holds the victim's wrist of one arm until in position with other arm to tow the victim to safety ■ The towing arm is over and around the rescue tube 	<ul style="list-style-type: none"> ■ Releases contact with the victim ■ The towing arm is not over and around the rescue tube

SKILL CHART: MULTIPLE-VICTIM RESCUE

If you are the only one rescuing two victims who are clutching each other:

1. Approach one victim from behind.
2. With both arms, reach under the victim's armpits and grasp the shoulders. Squeeze the rescue tube between your chest and the victim's back, keeping your head to one side of the victim's head.
3. Use the rescue tube to support both victims with their mouths out of the water. Talk to the victims to help reassure them.
4. Support both victims until other lifeguards arrive or the victims become calm enough to move to a safe exit point.

SKILL ASSESSMENT TOOLS: MULTIPLE-VICTIM RESCUE

Criteria	Proficient	Not Proficient
Communicates with the victims	■ Victims are reassured and told what to do	■ No attempted verbal communication with the victims
Equipment is properly positioned for the appropriate rescue	■ Rescue tube is kept between the lifeguard and the victims ■ Rescue tube is positioned to support the victims at the surface of the water	■ Rescue tube is not maintained between the victims and the rescuer ■ The victims are not supported by the rescue tube
Victims' mouths and noses above water	■ Victims' mouths and noses are maintained above water	■ Victims' mouths or noses are under water
Tows the victims to safety	■ Victims are towed to safety using the rescue tube to support the victims	■ Unable to tow the victims to safety ■ Victims are not supported by the rescue tube ■ Releases contact with the victims
Rescue tube is placed to provide support for victims and safety for rescuer	■ Maintains firm hold of one victim and rescue tube effectively supports both victims' heads above water	■ Both victims are not supported

SUBMERGED VICTIM

SKILL CHART: PASSIVE SUBMERGED VICTIM IN SHALLOW WATER

1. Swim or quickly walk to the victim's side. Let go of the rescue tube but keep the strap around your shoulders.
2. Submerge and reach down to grab the victim under the armpits.
3. Simultaneously, pick up the victim, move forward and roll the victim face-up upon surfacing.
4. Grab the rescue tube and position it under the victim's shoulders. The victim's head should naturally fall back into an open-airway position. If an assisting lifeguard is there with the backboard, skip this step and proceed to remove the victim from the water.
5. Move the victim to a safe exit point, remove the victim from the water, assess the victim's condition and provide appropriate care.

SKILL CHART: SUBMERGED VICTIM IN DEEP WATER (LIFEGUARDING COURSE ONLY)

1. Release the rescue tube, perform a feet-first surface dive and position yourself behind the victim.
2. Reach one of your arms under the victim's arm (your right arm under their right arm or your left arm under their left arm) and across the victim's chest. Hold firmly onto the victim's opposite side.
3. Once you have hold of the victim, reach up with your free hand and grasp the towline. Pull it down and feed the line to the hand that is holding the victim. Keep feeding the towline this way until nearing the surface.
4. As you approach the surface, grasp and position the rescue tube so it is placed on the victim's back, below their shoulders.
5. Upon reaching the surface, ensure that the victim is positioned on the rescue tube and the victim's head is back in an open-airway position.
6. Reach your free arm over the tube and under the victim's armpit. Grasp the rescue tube firmly.
7. Tow the victim to a safe exit point. Remove the victim from the water, assess the victim's condition and provide appropriate care.

Note: As you descend into deep water, be sure to equalize pressure early and often. If you are unable to equalize pressure, return to the surface.

SKILL ASSESSMENT TOOL: SUBMERGED VICTIM RESCUES

Criteria	Proficient	Not Proficient
Equipment is properly positioned to provide support for the victim upon rolling over or surfacing	<ul style="list-style-type: none"> Rescue tube is positioned under the victim's back and is supporting the victim at the surface 	<ul style="list-style-type: none"> Victim slides off tube Victim's head submerges
Victim is face-up upon surfacing	<ul style="list-style-type: none"> Victim is quickly brought to a face-up position 	<ul style="list-style-type: none"> Victim is face-down Unable to turn victim to a face-up position upon surfacing
Victim's mouth and nose are above water	<ul style="list-style-type: none"> Victim's mouth and nose are maintained above water 	<ul style="list-style-type: none"> Victim's mouth or nose is under water
Maintain head in an open airway position at the surface	<ul style="list-style-type: none"> Rescue tube is placed under the victim's back so that the victim's head falls back to an open airway position 	<ul style="list-style-type: none"> Victim's head is tilted forward (chin toward chest)
Switch to a towing position	<ul style="list-style-type: none"> Holds the victim's wrist of one arm until in position with other arm to tow the victim to safety 	<ul style="list-style-type: none"> Releases contact with the victim The towing arm is not over and around the rescue tube
Tow the victim to safety	<ul style="list-style-type: none"> Victim is towed to a safe exit point using the rescue tube to support the victim 	<ul style="list-style-type: none"> Unable to make progress in the water to move the victim to a safe exit point Victim is not supported by the rescue tube and slips off or submerges
SUBMERGED PASSIVE VICTIM IN SHALLOW WATER		
Equipment is properly positioned to start the rescue	<ul style="list-style-type: none"> Rescue strap is around the shoulder of the rescuer 	<ul style="list-style-type: none"> Tries to submerge with the rescue tube Rescue tube strap is not worn over the shoulder

SUBMERGED PASSIVE VICTIM IN SHALLOW WATER, <i>CONTINUED</i>		
Victim brought to the surface	<ul style="list-style-type: none"> ■ Submerges to grasp victim ■ Maintains grasp of the victim and brings to the surface 	<ul style="list-style-type: none"> ■ Unable to submerge ■ Does not make contact with victim ■ Drops victim ■ Unable to return to the surface with victim
SUBMERGED VICTIM IN DEEP WATER (LIFEGUARDING COURSE ONLY)		
Equipment is properly positioned appropriate to the rescue	<ul style="list-style-type: none"> ■ Rescuer releases rescue tube so it remains at the surface ■ Rescue tube strap is worn around the shoulder ■ For water deeper than the tube strap length, strap is removed from the shoulder and held 	<ul style="list-style-type: none"> ■ Tries to submerge with the rescue tube ■ Loses contact with the rescue tube strap—not worn around the shoulder or not held ■ Unable to grasp rescue tube once returned to the surface to place under the victim's back
Victim brought to the surface	<ul style="list-style-type: none"> ■ Submerges to grasp the victim ■ Maintains grasp of the victim and brings to the surface ■ Rescue tube placed under the victim's back upon surfacing 	<ul style="list-style-type: none"> ■ Unable to submerge ■ Cannot grasp the victim ■ Does not make contact with the victim ■ Drops the victim ■ Unable to return to the surface with the victim ■ Unable to grasp or place rescue tube under the victim upon surfacing
SURFACE DIVES		
SKILL CHART: FEET-FIRST SURFACE DIVE (LIFEGUARDING COURSE ONLY)		
<ol style="list-style-type: none"> 1. Swim to a point near and above the victim. Release the rescue tube but keep the strap around your shoulders. 2. Position your body vertically, then at the same time, press both hands down to your sides and kick strongly to raise your body out of the water. 3. Take a breath, then let your body sink under water as you begin to extend your arms outward with palms upward, pushing against the water to help you move downward. Keep your legs straight and together with toes pointed. Tuck your chin and turn your face to look down toward the bottom. 4. As downward momentum slows, repeat the motion of extending your arms outward and sweeping your hands and arms upward and overhead to go deeper. 5. Repeat this arm movement until deep enough to reach the victim. <p>If you must swim under water, such as for a deep-water line search, also perform these steps:</p> <ol style="list-style-type: none"> 1. When deep enough, tuck your body and roll to a horizontal position. 2. Extend your arms and legs and swim under water. <p>Note: As you descend into deep water, be sure to equalize pressure early and often. If you are unable to equalize pressure, return to the surface.</p>		

SKILL CHART: HEAD-FIRST SURFACE DIVE (LIFEGUARDING COURSE ONLY)

1. Swim to a point near the victim and release the rescue tube.
2. Gain momentum using a swimming stroke.
3. Take a breath, sweep your arms backwards to your thighs and turn them palms-down.
4. Tuck your chin to your chest and flex at the hip sharply while your arms reach downward toward the bottom.
5. Lift your legs upward, straight and together so that their weight above the water helps the descent. Get in a fully extended, streamlined body position that is almost vertical.
6. If you need to go deeper, such as in a diving well, do a simultaneous arm pull with both arms to go deeper, then level out and swim forward under water.

Tip: If the depth of the water is unknown or the water is murky, hold one or both arms extended over the head toward the bottom or use a feet-first surface dive.

Note: As you descend into deep water, be sure to equalize pressure early and often. If you are unable to equalize pressure, return to the surface.

SKILL ASSESSMENT TOOL: SURFACE DIVES

Criteria	Proficient	Not Proficient
Submerge to appropriate depth	<ul style="list-style-type: none"> ■ Submerges to appropriate depth 	<ul style="list-style-type: none"> ■ Unable to submerge to appropriate depth
Look toward bottom while descending	<ul style="list-style-type: none"> ■ Face is looking down toward bottom while descending 	<ul style="list-style-type: none"> ■ Face is looking forward or upward while descending
FEET-FIRST SURFACE DIVE (LIFEGUARDING COURSE ONLY)		
Body descends feet-first in a streamlined position	<ul style="list-style-type: none"> ■ Legs are held together ■ Arms are fully extended overhead 	<ul style="list-style-type: none"> ■ Legs are apart and impede descent ■ Arm positioning impedes descent
HEAD-FIRST SURFACE DIVE (LIFEGUARDING COURSE ONLY)		
Body descends head-first in a streamlined position	<ul style="list-style-type: none"> ■ Legs are held together and lifted upward toward the surface to aide descent ■ Arms reach downward toward the bottom 	<ul style="list-style-type: none"> ■ Legs are apart ■ Body is not nearly vertical during descent ■ Arms are not in front reaching downward

EXTRICATION FROM WATER

SKILL CHART: EXTRICATION USING A BACKBOARD - AT THE POOL EDGE

1. The rescuing lifeguard swims with the victim toward the side of the pool. The assisting responder(s) on deck brings the backboard to the edge of the water and removes the head immobilizer.
2. The assisting responder then places the board in the water vertically. The rescuing lifeguard approaches the backboard and moves to the side of the victim, while the assisting responder grasps the victim's wrist with one hand while holding the backboard with their other hand.
3. The rescuing lifeguard raises one of the victim's arms so that the assisting responder can grasp the arm. The rescuing lifeguard then slides the rescue tube out from under the victim and toward him before contact is made with the board.
4. The assisting responder on deck firmly holds the backboard with one hand and the victim's forearm with the other hand, as the rescuing lifeguard stabilizes the backboard from the side.
 - If more than one on-deck responder is available, they should help hold and stabilize the backboard.
5. Once the victim is centered on the backboard, the assisting responder(s) signals that they are ready to remove the victim. While maintaining his or her hold on the victim's arm, the assisting responder(s) on deck pulls the backboard onto the deck. The rescuing lifeguard pushes the backboard as the assisting responder(s) pulls.
 - If more than one on-deck responder is available, they should help hold the backboard and pull the backboard onto the deck.
6. Assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOL: EXTRICATION FROM WATER USING A BACKBOARD—AT THE POOL EDGE

Criteria	Proficient	Not Proficient
Backboard is submerged into position	<ul style="list-style-type: none"> ■ Backboard head immobilizer blocks are removed and backboard is placed vertically, against the wall ■ Maintains control of the backboard 	<ul style="list-style-type: none"> ■ Unable to submerge the backboard ■ Unable to stabilize the backboard
Lifeguards communicate with each other	<ul style="list-style-type: none"> ■ Lifeguard(s) communicates what, how and/or when actions happen 	<ul style="list-style-type: none"> ■ Lifeguards cannot proceed with removing the victim from the water
Victim's head remains above the surface of the water	<ul style="list-style-type: none"> ■ Victim's mouth and nose are maintained out of the water 	<ul style="list-style-type: none"> ■ Victim's mouth or nose is in the water
Victim is placed onto the board	<ul style="list-style-type: none"> ■ Rescuing lifeguard moves to the side of the victim. ■ Rescuing lifeguard raises one of the victim's arms; the assisting responder grasps the victim's forearm 	<ul style="list-style-type: none"> ■ Unable to place victim on the backboard ■ Loses contact with backboard or victim

SKILL CHART: EXTRICATION USING A BACKBOARD—ZERO DEPTH ENTRY

1. The rescuing lifeguard supports the victim in a face-up position with the victim's arms extended alongside the victim's head until another lifeguard arrives with the backboard.
2. The assisting responder removes the head-immobilizer device, enters the water, submerges the backboard and positions the board under the victim so that it extends slightly beyond the victim's head. The assisting lifeguard raises the backboard into place.
3. Each lifeguard moves behind the victim's head. Each lifeguard grasps one of the victim's wrists and one of the handholds of the backboard and begins to move toward the zero-depth entry.
4. After reaching the zero-depth entry, the lifeguards slightly lift the head-end of the backboard, carefully pulling the backboard out of the water.
5. Assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOL: EXTRICATION USING A BACKBOARD – ZERO-DEPTH ENTRY

Criteria	Proficient	Not Proficient
Lifeguards communicate with each other	<ul style="list-style-type: none"> ■ Lifeguard(s) communicates what, how and/or when actions happen 	<ul style="list-style-type: none"> ■ Lifeguards cannot proceed with removing the victim from the water
Backboard is submerged into position	<ul style="list-style-type: none"> ■ Backboard head immobilizer blocks are removed and backboard is submerged underneath the victim ■ Maintains control of the backboard ■ Each lifeguard grasps one of the victim's wrists and one of the handholds of the backboard and begins to move toward the zero-depth entry 	<ul style="list-style-type: none"> ■ Unable to submerge the backboard ■ Unable to stabilize the backboard
Victim is placed onto the board	<ul style="list-style-type: none"> ■ Victim's body is on the backboard ■ Victim's head is positioned on the backboard's head space 	<ul style="list-style-type: none"> ■ Victim's body is not aligned and on the backboard ■ Victim's head is not positioned on the backboard's head space
Victim is pulled out on the backboard	<ul style="list-style-type: none"> ■ The lifeguards slightly lift the head-end of the backboard, carefully pulling the backboard out of the water 	<ul style="list-style-type: none"> ■ Is unable to pull the backboard and victim onto land ■ Does not demonstrate good body mechanics while pulling the backboard and victim onto land

SKILL CHART: EXTRICATION USING A BACKBOARD AT THE STEPS

1. The rescuing lifeguard swims with the victim toward the side of pool. The assisting responder(s) on deck brings the backboard to the steps and removes the head immobilizer.
2. The assisting responder(s) on deck places the board in the water at an angle against the stairs. The rescuing lifeguard approaches the backboard and moves to the side of the victim.
3. The rescuing lifeguard raises both of the victim's arms so that the assisting responder(s) can grasp the arm(s).
4. The assisting responder on deck firmly holds the backboard with one hand and the victim's forearm with the other hand, as the rescuing lifeguard stabilizes the backboard from the side.
5. If more than one on-deck responder is available, they should help hold and stabilize the backboard. Once the victim is centered on the backboard, the assisting responder(s) signals that they are ready to remove the victim. While maintaining his or her hold on the victim's arm, the assisting responder(s) on deck pulls the backboard at an angle up the stairs and onto the deck. The rescuing lifeguard pushes the backboard as the assisting responder(s) pulls. If more than one on-deck responder is available, they should grasp the backboard and the victim's other forearm to help pull the backboard up the stairs.
6. Assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOL: EXTRICATION USING A BACKBOARD - AT THE STEPS

Criteria	Proficient	Not Proficient
Backboard is submerged into position	<ul style="list-style-type: none"> ■ Backboard head immobilizer blocks are removed and backboard is submerged underneath the victim ■ Maintains control of the backboard 	<ul style="list-style-type: none"> ■ Unable to submerge the backboard ■ Unable to stabilize the backboard
Victim is placed onto the board	<ul style="list-style-type: none"> ■ The rescuing lifeguard raises one of the victim's arms so that the assisting responder can grasp the arm ■ Assisting rescuer holds the backboard with one hand and the victim's forearm with the other hand ■ Victim's body is on the backboard ■ Victim's head is positioned on the backboard's head space 	<ul style="list-style-type: none"> ■ Victim's body is not aligned and on the backboard ■ Victim's head is not positioned on the backboard's head space
Victim is pulled out on the backboard in a safe manner for rescuers and victim	<ul style="list-style-type: none"> ■ The assisting responder(s) on deck pulls the backboard onto the deck while maintaining hold on the victim's arm ■ The rescuing lifeguard pushes the backboard as the assisting responder(s) pulls ■ Backboard is carefully lowered to the ground 	<ul style="list-style-type: none"> ■ Is unable to pull the backboard and victim onto land ■ Does not demonstrate good body mechanics while pulling the backboard and victim onto land ■ Drops backboard and victim

SKILL CHART: EXTRICATION USING A BACKBOARD—STEEP STEPS AND/OR MOVING WATER ATTRACTIONS

1. The rescuing lifeguard supports the victim in a face-up position with the victim's arms extended alongside the victim's head until another lifeguard arrives with the backboard.
 - In moving water, the rescuing lifeguard should position the victim so that their head is pointed upstream. This position will help keep the victim's body in alignment for easier placement of the backboard and reduce splashing of water on to the victim's face.
2. The assisting responder removes the head-immobilizer device, enters the water, submerges the backboard and positions the board under the victim so that it extends slightly beyond the victim's head. The assisting lifeguard raises the backboard into place.
3. Each lifeguard moves behind the victim's head. Each lifeguard grasps one of the victim's wrists and one of the handholds of the backboard and begins to move toward the zero-depth entry.
4. Lifeguards carefully and gently drag the backboard, taking one step at a time until they reach the top of the steps.
5. Gently lower the backboard to the ground.
6. Assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOL: EXTRICATION USING A BACKBOARD—STEEP STEPS AND/OR MOVING WATER ATTRACTIONS

Criteria	Proficient	Not Proficient
Backboard is submerged into position	<ul style="list-style-type: none"> ■ Backboard head immobilizer blocks are removed and backboard is submerged underneath the victim ■ Maintains control of the backboard ■ Each lifeguard grasps one of the victim's wrists and one of the handholds of the backboard and begins to move toward the zero-depth entry 	<ul style="list-style-type: none"> ■ Unable to submerge the backboard ■ Unable to stabilize the backboard
Lifeguards communicate with each other	<ul style="list-style-type: none"> ■ Lifeguard(s) communicates what, how and/or when actions happen 	<ul style="list-style-type: none"> ■ Lifeguards cannot proceed with removing the victim from the water
Victim is placed onto the board	<ul style="list-style-type: none"> ■ Victim's body is on the backboard ■ Victim's head is positioned on the backboard's head space 	<ul style="list-style-type: none"> ■ Victim's body is not aligned and on the backboard ■ Victim's head is not positioned on the backboard's head space
Victim is pulled out on the backboard	<ul style="list-style-type: none"> ■ Carefully and gently drag the backboard, taking one step at a time until they reach the top of the steps 	<ul style="list-style-type: none"> ■ Is unable to pull the backboard and victim up the steps onto land ■ Does not demonstrate good body mechanics while pulling the backboard and victim onto land ■ Drops backboard and victim

BEFORE PROVIDING CARE, VICTIM ASSESSMENT AND BREATHING EMERGENCIES

Lesson Length: 1 hour, 40 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Complete the skills practice for Removing Disposable Gloves.
- Discuss all points in the topic Standard Precautions.
- Discuss all points in the topic General Procedures for an Emergency on Land.
- Guide the discussion on Scene Size-up.
- Discuss all points in the topic Performing a Primary Assessment.
- Guide the discussion on Performing a Primary Assessment.
- Complete the skill practice for Using a Resuscitation Mask.
- Complete the skill practice for Primary Assessment—Adult and Child.
- Complete the skill practice for Primary Assessment—Infant.
- Discuss all points in the topic Moving a Victim.
- Discuss all points in the topic Recognizing and Caring for Breathing Emergencies.
- Discuss all points in the topic Giving Ventilations.
- Complete the skill practice for Giving Ventilations.
- Discuss all points in the topic Giving Ventilations Using a Bag-Valve-Mask Resuscitator.
- Show the video segment “Using a Bag-Valve-Mask-Resuscitator—Two Rescuers.”
- Complete the skill practice for Using a Bag-Valve-Mask Resuscitator—Two Rescuers.
- Discuss all points in the topic Airway Obstruction.
- Show the video segment “Conscious Choking—Adult and Child.”
- Complete the skill practice for Conscious Choking—Adult and Child.
- Show the video segment “Conscious Choking—Infant.”
- Complete the skill practice for Conscious Choking—Infant.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Standard Precautions
 - Primary Assessment
 - Recognizing and Caring for Breathing Emergencies
 - Airway Obstructions

LESSON OBJECTIVES

- Describe what standard precautions to take to prevent disease transmission when providing care.
- Demonstrate proper removal of disposable gloves.
- Describe the general procedures for injury or sudden illness on land.
- Identify items of concern when conducting a scene size-up and forming an initial impression.
- Demonstrate how to perform a primary assessment and place a victim in a recovery position.
- Identify victim conditions that indicate the need to summon emergency medical services (EMS) personnel.
- Understand how to safely and effectively move a victim on land.
- Demonstrate how to use a resuscitation mask.
- Recognize and care for a breathing emergency.
- Demonstrate how to safely and effectively give ventilations.
- Demonstrate how to safely and effectively use a bag-valve-mask (BVM) resuscitator with two rescuers.
- Demonstrate how to safely and effectively care for an obstructed airway for a conscious and an unconscious victim.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Manikins (one adult and one infant manikin for every two participants, child manikins optional)
- Pediatric resuscitation masks (one per participant)
- Bag-valve-mask (BVM) resuscitators (adult and infant, one for each manikin, child BVMs optional)
- Decontamination supplies

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time.
- Be prepared to answer questions participants may have about the review questions they completed.
- Select and arrange for a location that is appropriate to conduct the Lifeguard Response Time Testing Drill activity in advance. Be prepared by discussing the drill with facility management and the lifeguarding staff on duty so that the staff on duty are aware and do not mistake the drill for an actual emergency. If possible, conduct the drill in an area of the pool not crowded by patrons.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 5: Before Providing Care, Victim Assessment and Breathing Emergencies.
- Training information and skill sheets for the administration of epinephrine and for the administration of inhalers can be found on the Red Cross Learning Center.
- It is not necessary to practice the primary assessment and recovery position for an adult and a child. Have participants practice the primary assessment and a recovery position for an adult. Then, have participants as a group explain the elements that are unique when performing the primary assessment for a drowning victim, including when to give ventilations, as well as unique elements when performing the primary assessment on a child, including getting consent, opening the airway and giving ventilations.
- Choose either the practice-while-you-watch or watch-then-practice method for the Giving Ventilations skill practice.
- Participants need only demonstrate how to provide ventilations for an adult. Have participants as a group explain the differences for a child, such as how far to tilt the head or using a pediatric mask.
- Participants need only demonstrate how to care for conscious choking for an adult. Have participants as a group explain the differences for a child such as kneeling if the victim is shorter.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.
- When using the practice-while-you-watch method for Giving Ventilations, do not interrupt this skill session to lecture or communicate anything other than guidance related to skill practice. In general, answering questions should occur after the video segment (and skill session) has ended.
- Arrange the manikins so the heads are facing the same direction to make it easier for you to observe and assess participant performance.

STANDARD PRECAUTIONS

LECTURE:



REFERENCES:

Course
Presentation:
Slides 35
Participant's
Manual:
Chapter 7

- Ask participants: **Do you have any questions about the video “Standard Precautions”?**
- Ask participants: **What are the diseases that are of primary concern for you as a lifeguard?**

Answers: Responses should include the following:

- Hepatitis B
- Hepatitis C
- HIV

REMOVING DISPOSABLE GLOVES

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 7

- Provide all participants with disposable non-latex gloves.
- Explain that participants will have many opportunities to practice glove removal since they will be following procedures each time they remove gloves throughout the remainder of this course.
- Lead participants through the skill of Removing Disposable Gloves.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.

SCENE SIZE-UP

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slide 37-38
Participant's
Manual:
Chapter 7

- Tell participants that the first step in the general procedures is the scene size-up. A scene size-up is the careful and systematic approach of a scene to get a full picture of the emergency situation.

- Ask participants: **Using your senses, what information can you gather about the scene of an emergency?**

Answers: Responses should include the following:

- Sight: Hazardous conditions, number of victims, number of bystanders
- Smell: Odors that might suggest chemical release, intoxication, diabetic emergency or burning objects
- Hearing: Unusual sounds, cries for help, splashing

- Ask participants: **Why else is a scene size-up necessary?**

Answers: Responses should include the following:

- To ensure scene safety for the rescuers, the victims and any bystanders
- To identify necessary PPE
- To form an initial impression by looking for signs that might indicate a life-threatening emergency
- To determine the mechanism of injury or nature of the illness
- To determine the number of victims
- To identify what additional help may be required

PERFORMING A PRIMARY ASSESSMENT

LECTURE:



REFERENCES:

Course
Presentation:
Slides 40-42

Participant's
Manual:
Chapter 7

- A primary assessment is conducted to identify any life-threatening conditions.
- The steps for a primary assessment include the following:
 - Check the victim for responsiveness using a shout-tap-shout sequence. *When checking a child or infant, obtain consent from a parent or guardian before providing care, if possible.*
 - Open the victim's airway and check for breathing and a pulse simultaneously.
 - Check for a carotid pulse in an adult and a child. Check for a brachial pulse in an infant.
 - If the chest does not clearly rise when attempting either of the first 2 ventilations, re-tilt the head and try to give another ventilation.
 - If after the second attempt the chest clearly rises, give 1 more ventilation so there are two successful ventilations.
 - If after the second attempt the chest does not clearly rise, immediately give CPR.
 - Do not attempt giving more than 3 ventilations total.
- In general, if a victim is unresponsive but breathing and you do not suspect a head, neck or spinal injury, place the victim in a side-lying recovery position. A recovery position should also be used whenever you are alone and need to leave the scene (e.g., to call for help).



Science Note:

- **Checking for responsiveness:** *When checking a person for responsiveness, sometimes a tapping of the shoulder does not provide enough physical stimuli to elicit a response to pain. Therefore, a trained responder could employ a "shout-tap-pinch" approach with a pinch to the muscle between the neck and shoulder in order to provide a stronger physical stimulus to a sensitive area. It is important that "shout-tap-pinch" does not delay patient care by adding extra time to determine a response to verbal or painful stimuli.*
- **Recovery Positions:** *Based on the available evidence, it is important to turn a person who is responsive and breathing normally but not fully awake onto their side to lower the risk for choking and aspiration. There is little evidence to suggest an optimal recovery position. However, turning the victim towards the rescuer, rather than away from the rescuer, allows for more control over the movement and facilitates monitoring the victim's airway.*
- **Ventilations for Drowning Victims:** *Due to the hypoxic nature of drowning, lifeguards and professional responders should alter the initial treatment for victims with no breathing or no pulse as a result of a drowning and provide 2 initial ventilations during the primary assessment prior to beginning CPR with chest compressions.*

PERFORMING A PRIMARY ASSESSMENT

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 43–47
Participant's
Manual:
Chapter 7

- Ask participants: **Do you have any questions about the “Primary Assessment” video?**
- Ask participants: **What types of life-threatening conditions are you looking for during a primary assessment?**
Answer: Is the victim breathing and does the victim have a pulse?
- Ask participants: **In what situations would you give 2 ventilations during the primary assessment?**
Answer: For any victim who is not breathing and has no pulse as a result of a drowning
- Ask participants: **How long do you check for a pulse and breathing during the primary assessment?**
Answer: At least 5 seconds but no more than 10 seconds.
- Ask participants: **What are the techniques for opening a victim's airway to give ventilations?**
Answers: From the victim's side: Use the head-tilt/chin-lift. From above the victim's head: Tilt the head back using the jaw-thrust maneuver. If the victim is suspected of having a head, neck or spinal injury, use the jaw-thrust (without head extension) maneuver.
- Ask participants: **What should you do if your ventilation does not make the victim's chest clearly rise?**
Answer: Re-tilt the victim's head and re-attempt another ventilation.

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 7

- Ask participants to take their participant's manual and disposable gloves to the practice area.
- Ask participants to find a partner. One person will be the responder while the other person will be the injured or ill person, then they will switch roles.
- Guide participants through the steps listed on the Performing a Primary Assessment skill chart. Once participants have completed the primary assessment, have them practice the recovery position.
- Guide them through the steps listed on the recovery position skill chart.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: failing to size up the scene, failing to determine responsiveness, failing to follow standard precautions, improperly opening the airway, checking an inappropriate pulse site or not looking at the chest while checking for breathing.



Instructor's Note: *It is not necessary to practice the primary assessment and recovery position for an adult and a child. Have participants practice the primary assessment and a recovery position for an adult. Then, have participants as a group explain the elements that are unique when performing the primary assessment for a drowning victim, including when to give ventilations, as well as unique elements when performing the primary assessment on a child, including getting consent, opening the airway and giving ventilations.*

USING A RESUSCITATION MASK

SKILL PRACTICE:



REFERENCES:

Course
Presentation:
Slides 48

Participant's
Manual:
Chapter 7

- Ask participants: **Do you have any questions about the “Giving Ventilations—Adult, Child and Infant” video?**
- Ask participants to take their participant's manual, disposable gloves and resuscitation masks to the practice area.
- Using a manikin, guide participants through the three methods for giving ventilations using each of the following methods:
 - Head-Tilt/Chin-Lift Technique
 - Jaw-Thrust (with Head Extension) Maneuver
 - Jaw-Thrust (without Head Extension) Maneuver
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: not opening the airway, improperly opening the airway, not obtaining a seal with the resuscitation mask, or not making the chest rise and fall, not looking at the chest while checking for breathing.

PRIMARY ASSESSMENT—INFANT

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 7

- Using a manikin, guide participants through the steps listed on the Primary Assessment skill chart.
- Once participants have completed the primary assessment, have them practice the recovery position. Guide participants through the steps listed on the Recovery Position skill chart.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: failing to size up the scene, failing to obtain consent, failing to determine responsiveness, failing to follow standard precautions, improperly opening the airway, checking an inappropriate pulse site, not looking at the chest while checking for breathing.

SUMMONING EMS PERSONNEL

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 49

Participant's
Manual:
Chapter 7

- Ask participants: **What other conditions that may occur in the aquatic environment might require summoning EMS personnel?**
Answers: Responses should include the following:
 - Any victim recovered from underwater who may have inhaled water
 - Seizures in the water
 - Suspected or obvious injuries to the head, neck or spine

MOVING A VICTIM

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 51-54

Participant's
Manual:
Chapter 7

- **Moving a victim needlessly or improperly can lead to further pain and injury.**
- Ask participants: **What factors should be considered when deciding whether or not to move a victim?**
Answers: Responses should include the following:
 - You are faced with immediate danger
 - You need to get to other victims who have more serious injuries or illnesses
 - It is necessary to provide appropriate care (e.g., moving a victim to the top or bottom of a flight of stairs to perform Cardiopulmonary Resuscitation [CPR])
- **If you must leave a scene to ensure your personal safety, you should make reasonable attempts to move the victim to safety as well.**
- Ask participants: **If you have to move a victim, what factors should be considered in deciding what method to use?**
Answers: Responses should include the following:
 - The victim's height and weight
 - Your physical strength
 - Obstacles, such as stairs and narrow passages
 - The distance to be moved
 - Whether others are available to assist
 - The victim's condition
 - Whether aids to transport are readily available

TOPIC: **RECOGNIZING AND CARING FOR BREATHING EMERGENCIES**

Time: 5 minutes

RECOGNIZING AND CARING FOR BREATHING EMERGENCIES

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 56-58

Participant's
Manual:
Chapter 8

- **There are two types of breathing (also referred to as respiratory) emergencies:**
 - **Respiratory distress** is a condition in which breathing becomes difficult.
 - **Respiratory arrest** is a condition in which breathing stops.
- **Respiratory distress may lead to respiratory arrest.**
- **Ask participants: What are some signs and symptoms of a person in respiratory distress?**

Answers: Responses should include the following:

 - Slow or rapid breathing
 - Unusually deep or shallow breathing
 - Shortness of breath or noisy breathing
 - Dizziness, drowsiness or light-headedness
 - Changes in level of consciousness
 - Increased heart rate
 - Chest pain or discomfort
 - Skin that is flushed, pale, ashen or bluish
 - Unusually moist or cool skin
 - Gasping for breath
 - Wheezing, gurgling or high-pitched noises
 - Inability to speak in full sentences
 - Tingling in the hands, feet or lips
 - Apprehensive or fearful feelings
- Refer participants to Chapter 8, Breathing Emergencies, in the *Lifeguarding Manual*. Point out the sidebars on asthma and anaphylaxis. Explain that if they will be required to administer epinephrine, they may need to undergo additional training conducted at their facility.



Instructor's Note: Training information and skill sheets for the administration of epinephrine and for the administration of inhalers can be found on the Red Cross Learning Center.

**GUIDED
DISCUSSION:**
continued



Science Note:

- **Respiratory Arrest:** Hyperventilation most commonly occurs when victims are being ventilated in respiratory arrest or when an advanced airway is placed during cardiac arrest. It is critical to avoid hyperventilation of the victim because it leads to increased pressure and a subsequent decrease in cardiac filling and cardiac perfusion pressures by putting pressure on the vena cava (the main chest vein).
- **Opioid Overdose:** With a growing epidemic of opioid (commonly heroin and oxycodone) overdoses in the United States, local and state departments of health have increased access to the medication naloxone, which can counteract the effects of overdose including respiratory arrest. Naloxone (also referred to by its trade name Narcan™) has few side effects and can be administered intranasally (through the nose). Trained responders should administer the drug when the patient is in respiratory arrest and an opioid overdose is suspected. Lifeguards and professional responders should follow local medical protocols and regulations to determine dosing and timing of naloxone administration.

TOPIC: **GIVING VENTILATIONS**

Time: 15 minutes

GIVING VENTILATIONS—ADULT AND CHILD

**SKILL
PRACTICE:**






REFERENCES:
Participant's
Manual:
Chapter 8



Instructor's Note: Participants need only demonstrate how to provide ventilations for an adult. Have participants as a group explain the differences for a child, such as how far to tilt the head or using a pediatric mask.

- Choose either the practice-while-you-watch or watch-then-practice method for this skill practice.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: not tilting the head, tilting the head too far back, not looking at the chest when assessing for breathing, not noticing if the ventilations are inadequate (do not cause the chest to rise), failing to reassess for breathing and pulse, providing ventilations at the incorrect ratio, breathing too hard or too soft, not obtaining a seal with the resuscitation mask, using an improperly sized mask for the victim or not counting out loud.

<p>SKILL PRACTICE AND VIDEO SEGMENT:</p>  <p>REFERENCES: Course Presentation: Slide 60 Participant's Manual: Chapter 8</p>	<p>PRACTICE-WHILE-YOU-WATCH</p> <ul style="list-style-type: none"> ■ Ask participants to take their disposable gloves and resuscitation masks to the practice area. ■ Explain to the participants that, for this skill, they will follow along with and practice the steps for giving ventilations to an adult as they are guided by the video. ■ Show the video segment "Giving Ventilations." ■ Do not interrupt this skill session to lecture or communicate anything other than guidance related to skill practice. In general, answering questions should occur after the video segment (and skill session) has ended. <p>WATCH-THEN-PRACTICE</p> <ul style="list-style-type: none"> ■ Tell participants that, for this skill, they will watch the video segment without practicing until you pause it, even though the narration may say to follow along. ■ Show the video segment "Giving Ventilations." ■ Ask participants to take their disposable gloves and resuscitation masks to the practice area. ■ Show the video segment "Giving Ventilations." ■ Guide participants through the steps of the skill of giving ventilations to an adult.
<p>GUIDED DISCUSSION:</p>  <p>REFERENCES: Course Presentation: Slides 61-62 Participant's Manual: Chapter 8</p>	<ul style="list-style-type: none"> ■ Ask participants: What are the differences to be aware of when giving ventilations to a child? Answers: Responses should include the following: <ul style="list-style-type: none"> ○ When opening a child's airway, tilt the head slightly past the neutral position, but not as far as you would for an adult. ○ When giving ventilations to a child, give 1 ventilation about every 3 seconds. ■ Ask participants: What are the differences to be aware of when giving ventilations to an infant? Answers: Responses should include the following: <ul style="list-style-type: none"> ○ Always use a pediatric mask when giving ventilations to an infant. ○ When opening an infant's airway, keep the head in the neutral position. ○ When giving ventilations to an infant, give 1 ventilation about every 3 seconds.
<p>GIVING VENTILATIONS—INFANT</p>	
<p>SKILL PRACTICE:</p>  <p>REFERENCES: Participant's Manual: Chapter 8</p>	<ul style="list-style-type: none"> ■ Guide participants through the steps of the skill giving ventilations to an infant. ■ Examples of common errors to point out include: not tilting the head, tilting the head past a neutral position, failing to recheck for breathing and a pulse, giving ventilations that are too hard or at the wrong rate, not properly sealing the resuscitation mask, not looking at the chest when checking for breathing, not using a pediatric mask for the infant victim or not counting out loud.

TOPIC: **GIVING VENTILATIONS USING A BAG-VALVE-MASK RESUSCITATOR**

Time: 15 minutes

GIVING VENTILATIONS USING A BVM—TWO RESCUERS

ACTIVITY:



REFERENCES:

Participant's
Manual:
Chapter 8

- Briefly show participants two to three BVMs (adult and infant, child is optional) and point out the parts (bag, valve and mask), demonstrating how squeezing the bag opens the one-way valve, forcing air into the lungs, and how releasing the bag closes the valve, allowing environmental air to refill it.
- Emphasize the need for two rescuers: one to position and seal the mask and one to squeeze the bag.
- Emphasize the need to use the appropriate sized BVM for the victim.



Science Note: Ventilation with a BVM is reserved for when multiple rescuers are available to treat the victim: One to perform chest compressions and two others to manage the airway and provide ventilations. While a BVM may often be used in some situations by a single responder (advanced medical personnel), the evidence supports the use of a BVM with two responders: One to maintain an adequate seal and one to squeeze the bag to deliver the ventilations.

VIDEO:



REFERENCES:

Course
Presentation:
Slides 63
Participant's
Manual:
Chapter 8

- Explain to participants that the video segment demonstrates how to use a BVM.
- Show the video segment "Using a Bag-Valve-Mask Resuscitator—Two Rescuers."
- Answer participants' questions about the segment.

GIVING VENTILLATIONS USING A BVM—TWO RESCUERS

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 8

- Divide participants into pairs and guide them through the steps listed on the Giving Ventilations Using a Bag-Valve-Mask Resuscitator—Two Rescuers skill chart.
- Guide participants through the steps of the skill for using a BVM on an adult.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: not tilting the head, not maintaining a seal with the resuscitation mask, not squeezing the bag hard enough or squeezing the bag too hard, the chest does not rise, giving ventilations at the wrong rate, not counting out loud.

CONSCIOUS CHOKING—ADULT AND CHILD

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 65-66
Participant's
Manual:
Chapter 8

- Ask participants: **What is the most common cause of respiratory emergencies?**
- **Answer:** Airway obstruction
- Ask participants: **What are mechanical and anatomical obstructions?**
- **Answers:**
 - Mechanical obstructions result from a foreign body lodged in the airway, generally food or other small objects.
 - Anatomical obstructions are caused mostly by the tongue. When a person becomes unconscious, the tongue loses muscle tone and falls back, blocking the airway.
- If the person cannot cough, speak, cry or breathe, immediate action is needed.

VIDEO:



REFERENCES:

Course
Presentation:
Slides 67
Participant's
Manual:
Chapter 8

- Explain to participants that the video segment will demonstrate how to care for an adult or child who is choking.
- Show the video segment "Conscious Choking—Adult and Child."
- Answer participants' questions about the segments.



Science Note: Evidence suggests that it may take more than one technique to clear the airway, and that back blows, abdominal thrusts and chest thrusts are all effective.

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 8

- **Instructor's Note:** Participants need only demonstrate how to care for conscious choking for an adult. Have participants as a group explain the differences for a child, such as kneeling if the victim is shorter.
- Divide participants into two lines facing the same direction or have them partner and arrange each pair so you can see all groups. Designate victims and lifeguards.
- Instruct participants not to give actual back blows or abdominal thrusts to their partners.
- Guide them through the steps listed on the Conscious Choking—Adult and Child skill chart.
- Have participants change roles and repeat the guided skill practice.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: failing to obtain the victim's consent, performing abdominal thrusts before back blows, positioning the hands improperly, not using the thumb side of the fist to give abdominal thrusts.
- Remind participants that if a conscious choking victim is too large to reach around or if the victim is obviously pregnant or known to be pregnant, back blows and chest thrusts are used.

CONSCIOUS CHOKING—INFANT

VIDEO:



REFERENCES:

Course
Presentation:
Slides 68
Participant's
Manual:
Chapter 8

- Explain to participants that the video segment will demonstrate how to care for a choking infant.
- Show the video segment “Conscious Choking—Infant.”
- Answer participants' questions about the segments.

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 8

- Ask participants to return to the practice area.
- Divide participants into pairs and guide them through the steps listed on the Conscious Choking—Infant skill chart.
- Guide them through the steps listed on the Conscious Choking—Infant skill chart.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: not keeping the infant's head lower than the chest, not supporting the head and neck securely when turning the infant, not placing the fingers correctly for chest thrusts or the hand for back blows.

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 69

- When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session.
 - Complete eLearning Module 6: Cardiac Emergencies and Using an AED.
 - Read Chapter 9: Cardiac Emergencies in the *Lifeguarding Manual*.

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill. Assessment criteria that are general for the category of skills, as well as specific to, the skill must be met.

REMOVING DISPOSABLE GLOVES

SKILL CHART: REMOVING DISPOSABLE GLOVES

1. Pinch the glove.
 - Pinch the palm side of one glove near your wrist.
 - Carefully pull the glove off so that it is inside out.
2. Slip two fingers under the glove.
 - Hold the glove in the palm of your gloved hand.
 - Slip two fingers under the glove at the wrist of the remaining gloved hand.
3. Pull the glove off.
 - Hold the glove in the palm of your gloved hand.
 - Slip two fingers under the glove at the wrist of the remaining gloved hand.
4. Dispose of gloves and wash hands.
 - Dispose of gloves and other PPE in a proper biohazard container.
 - Wash your hands thoroughly with soap and running water, if available. Otherwise, rub hands thoroughly with an alcohol-based sanitizer if hands are not visibly soiled.

SKILL ASSESSMENT TOOL: REMOVING DISPOSABLE GLOVES

Criteria	Proficient	Not Proficient
Removes gloves	■ Bare skin does not come into contact with outside surface of gloves	■ Bare skin comes into contact with surface of gloves

PRIMARY ASSESSMENT

SKILL CHART: PRIMARY ASSESSMENT—ADULT, CHILD, OR INFANT

Note: Activate the EAP and get an AED on the scene as soon as possible.

1. Size up the scene while forming an initial impression:

- Use your senses to check for hazards that could present a danger to you or the victim.
- Use appropriate PPE.
- Determine the number of injured or ill victims.
- Determine what caused the injury or the nature of the illness. Look for clues to what may have caused the emergency and how the victim became ill or injured.
- Form an initial impression that may indicate a life-threatening emergency, including responsiveness or severe bleeding.
- Does the victim look sick? Are they awake and moving?
- Determine what additional resources may be needed.

Note: If you see severe life-threatening bleeding, use any available resources to control the bleeding including a tourniquet if one is available and you are trained.

2. Check for responsiveness.

- Shout, "Are you okay?" (use the person's name if you know it) then tap the victim on the shoulder and shout, "Are you okay?" again in a shout-tap-shout sequence.
- For an infant, tap the foot.

3. If no response, summon EMS personnel, if you have not already done so.

- If the victim is face-down, roll the victim onto their back while supporting the head, neck and back.


4. Perform a primary assessment, open the airway and simultaneously check for breathing and a pulse for at least 5 seconds, but no more than 10 seconds.

- To open the airway:
 - From the side, use the Head-Tilt/Chin-Lift technique.
 - From above the victim's head, use the jaw-thrust (with head extension) maneuver.
 - If a head, neck or spinal injury is suspected, use the jaw-thrust (without head extension) maneuver.
- Look, listen and feel for breathing and pulse simultaneously.
 - For an adult or child, feel for a carotid pulse by placing two fingers in the middle of the victim's throat and then sliding them into the groove at the side of the neck closest to you. Press lightly.
 - For an infant, feel for the brachial pulse on the inside of the upper arm between the infant's elbow and shoulder. Press lightly.

SKILL CHART: PRIMARY ASSESSMENT—ADULT, CHILD, OR INFANT, *CONTINUED*

5. Give two ventilations **ONLY IF** the victim is not breathing as the result of a drowning.
 - If the chest does not clearly rise when attempting either of the first 2 ventilations, re-tilt the head and try to give another ventilation.
 - If after the second attempt the chest clearly rises, give 1 more ventilation so there are two successful ventilations.
 - If after the second attempt the chest does not clearly rise, immediately give CPR.
 - Do not attempt giving more than 3 ventilations total.
6. Provide appropriate care.
 - If the victim is not breathing but has a pulse, give ventilations.
 - Adult: Give 1 ventilation about every 5-6 seconds.
 - Child and Infant: Give 1 ventilation about every 3 seconds.
 - If the victim is not breathing and has no pulse, begin CPR starting with compressions.
 - If unresponsive but breathing and you do not suspect a head, neck or spinal injury, place the victim in a side-lying recovery position. To place the victim in a recovery position:
 - Raise the victim's arm that is closest to you.
 - Roll the victim toward you so that their head rests on their extended arm.
 - Bend the victim's knees to stabilize their body.

SKILL ASSESSMENT TOOL: PRIMARY ASSESSMENT—ADULT, CHILD, OR INFANT

Criteria	Proficient	Not Proficient
Scene size-up	<ul style="list-style-type: none"> ■ Use of PPE (wears gloves) ■ Obtains consent (child/infant) 	<ul style="list-style-type: none"> ■ Does not use PPE ■ Does not obtain consent (child/infant)
Checks for responsiveness	<ul style="list-style-type: none"> ■ Uses a shout-tap-shout sequence ■ Summons EMS personnel 	<ul style="list-style-type: none"> ■ Does not check for responsiveness or use a shout-tap-shout sequence ■ Does not summons EMS personnel
Simultaneous breathing and pulse check	<ul style="list-style-type: none"> ■ Opens and maintains open airway throughout primary assessment  <ul style="list-style-type: none"> ■ Looks, listens and feels for breathing and pulse for at least 5 seconds but no more than 10 seconds ■ For adult or child, feels for carotid pulse ■ For infant, feels for brachial pulse 	<ul style="list-style-type: none"> ■ Does not maintain an open airway throughout primary assessment ■ Does not look, listen and feel for breathing and/or pulse ■ Checks for breathing or pulse for less than 5 or more than 10 seconds ■ Checks an incorrect pulse location
Gives 2 ventilations (for any victim who is unresponsive as a result of a drowning)	<ul style="list-style-type: none"> ■ Gives 2 ventilations that make the chest clearly rise and last about 1 second each ■ Allows the chest to fall between ventilations 	<ul style="list-style-type: none"> ■ Gives ventilations that do not make the chest clearly rise and last 2 or more seconds each ■ Does not give ventilations ■ Gives fewer or more than 2 ventilations ■ Does not allow chest to fall between ventilations

RECOVERY POSITIONS

SKILL CHART: SIDE-LYING RECOVERY POSITION

1. Kneel at the victim's side.
2. Extend the victim's arm that is closest to you above the victim's head.
3. Roll the victim toward you so that they are on their side. The victim's head should rest on their extended arm.
4. Bend both of the victim's knees to stabilize their body.

Note: Use a side-lying recovery position when a victim is responsive and breathing and you do not suspect a head, neck or spinal injury. You should also use this recovery position if you have to leave for any reason, such as to get help, even if the victim has a head, neck or spinal injury.

SKILL CHART: INFANT RECOVERY POSITION (ALTERNATE)

1. Carefully position the infant face-down along your forearm.
2. Support the infant's head and neck with your other hand while keeping the infant's mouth and nose clear.

SKILL ASSESSMENT TOOL: RECOVERY POSITIONS

Criteria	Proficient	Not Proficient
SIDE-LYING RECOVERY POSITION		
Maintains an open airway	■ Rolls victim onto side	■ Victim is vomiting but left lying face-up
Support head, neck and spine	■ Rolls victim in a smooth motion until on their side	■ Lifts or pushes the head or neck
INFANT (ALTERNATE)		
Maintains an open airway	■ Mouth and nose are clear	■ Infant's mouth or nose is blocked by forearm or hand
Supports head and neck	■ Infant face-down along the rescuer's forearm ■ Head and neck supported by other hand	■ Infant's head or body is sideways or dangling from forearm

USING A RESUSCITATION MASK

SKILL CHART: HEAD-TILT/CHIN-LIFT TECHNIQUE

1. Kneel to the side of the victim's head.
2. Position the mask.
 - Place the rim of the mask between the victim's lower lip and chin.
 - Lower the mask until it covers the victim's mouth and nose.
3. Seal the mask.
 - Place the thumb and fingers of one hand around the top of the mask.
 - Place the thumb of your other hand on the bottom of the mask and slide your first two fingers onto the bony part of the victim's chin.
 - Press downward on the mask with your top hand and the thumb of your lower hand to seal the top and bottom of the mask.
4. Tilt the victim's head back and lift the chin to open the airway.
5. Blow into the mask.
 - Each ventilation should last about 1 second and make the chest clearly rise. The chest should fall before the next ventilation is given.

SKILL CHART: JAW-THRUST (WITH HEAD EXTENSION) MANEUVER

1. Position the mask.
 - Kneel above the victim's head.
 - Place the rim of the mask between the lower lip and chin.
 - Lower the resuscitation mask until it covers the victim's mouth and nose.
2. To seal the mask and open the airway:
 - Using the elbows for support, place your thumbs and index fingers along each side of the resuscitation mask to create a "C."
 - Slide your 3rd, 4th and 5th fingers into position to create an "E" on both sides of the victim's jawbone.
 - Hold the mask in place while you tilt the head back and lift the jaw into the mask.

SKILL CHART: JAW-THRUST (WITHOUT HEAD EXTENSION) MANEUVER

1. Position the mask.
 - Kneel above the victim's head.
 - Place the rim of the mask between the lower lip and chin.
 - Lower the resuscitation mask until it covers the victim's mouth and nose.
2. To seal the mask and open the airway:
 - Place your thumbs and index fingers along each side of the resuscitation mask to create a "C."
 - Slide your 3rd, 4th and 5th fingers into position to create an "E" on both sides of the victim's jawbone.
 - Without moving or tilting the head back, lift the lower jaw up with your fingers along the jawbone to seal the mask to the face.
3. Blow into the mask.
 - Each ventilation should last about 1 second and make the chest clearly rise. The chest should fall before the next ventilation is given.

SKILL ASSESSMENT TOOL: USING A RESUSCITATION MASK

Criteria	Proficient	Not Proficient
Open the airway: ■ Head-tilt/chin-lift or jaw thrust (with head extension) maneuver	■ Tilts the head back so that the jaw line is at an angle of 80° to 100° to the floor	■ Tilts head back so that jaw line is at an angle less than 80° or greater than 100° to the floor
■ Jaw thrust (without head extension) maneuver	■ Lifts the victim's jaw to open the airway	■ Tilts the victim's head back
■ Give ventilations	■ Gives ventilations that make the chest clearly rise and last about 1 second each	■ Ventilations do not make the chest clearly rise ■ Ventilation lasts 2 or more seconds

GIVING VENTILATIONS USING A BAG-VALVE-MASK RESUSCITATOR

SKILL CHART: GIVING VENTILATIONS USING A BAG-VALVE-MASK RESUSCITATOR—TWO RESCUERS

1. Rescuer 1 kneels behind the victim's head and positions the mask over the victim's mouth and nose.
2. Rescuer 1 seals the mask.
3. Rescuer 1 opens the airway using the jaw-thrust (with head extension) maneuver.
4. Rescuer 2 gives ventilations.
 - Squeeze the bag slowly with both hands.
 - For an adult, give 1 ventilation about every 5-6 seconds.
 - For a child or infant, give 1 ventilation about every 3 seconds.
 - Each ventilation should last about 1 second and make the chest clearly rise. The chest should fall before the next breath is given.
5. Rescuer 2 rechecks for breathing and a pulse about every 2 minutes.
 - Remove the mask and look, listen and feel for breathing and a pulse for at least 5, but no more than 10 seconds.

SKILL ASSESSMENT TOOL: GIVING VENTILATIONS USING A BVM—TWO RESCUERS

Criteria	Proficient	Not Proficient
Opens airway	■ Performs a jaw-thrust (with head extension) maneuver	■ Tilts the head from the side ■ Unable to open the airway
Delivers the appropriate volume of air with each ventilation	■ Squeezes the bag to give ventilations that make the chest	■ Victim's chest does not rise
Gives ventilations at the correct ratio for the victim	■ Adult ratio: Squeezes the bag to give 1 ventilation about every 5-6 seconds	■ Gives ventilations too slow or too fast ■ Gives ventilations at an inappropriate rate
Gives ventilations at the correct ratio for the victim	■ Child or Infant ratio: Squeezes the bag to give 1 ventilation about every 3 seconds	■ Gives ventilations too slow or too fast ■ Gives ventilations at an inappropriate rate

AIRWAY OBSTRUCTION

SKILL CHART: CONSCIOUS CHOKING—ADULT AND CHILD

If the victim cannot cough, speak or breathe:

1. Give 5 back blows.
 - Position yourself slightly behind the victim.
 - Place one arm diagonally across the victim's chest and bend the victim forward at the waist. The victim's upper airway should be at least parallel to the ground.
 - Firmly strike the victim between the shoulder blades with the heel of your hand.
 - Each thrust should be a distinct attempt to dislodge the object.
2. Give 5 abdominal thrusts.
 - Stand behind the victim.
 - For a child, stand or kneel behind the child, depending on the child's size. Use less force on a child than you would on an adult.
 - Place the thumb side of your fist against the middle of the abdomen, just above the navel.
 - Grab your fist and give quick, upward thrusts.
 - Each thrust should be a distinct attempt to dislodge the object.

SKILL ASSESSMENT TOOL: CONSCIOUS CHOKING—ADULT OR CHILD

Criteria	Proficient	Not Proficient
Bends the person forward at the waist for back blows	<ul style="list-style-type: none"> ■ Positions person with upper airway (person's head and neck) parallel to the ground or angled slightly downward 	<ul style="list-style-type: none"> ■ Positions person with upper airway (person's head and neck) angled upward
Gives 5 back blows	<ul style="list-style-type: none"> ■ Strikes the back with heel of one hand ■ Strikes the center of the back between shoulder blades ■ Each back blow is a separate and distinct attempt to dislodge the object 	<ul style="list-style-type: none"> ■ Strikes the back with closed hand ■ Strikes the back with palm ■ Strikes the back more than 2 inches from the center of both shoulder blades ■ Each back blow is not a separate and distinct attempt to dislodge the object
Gives 5 abdominal thrusts	<ul style="list-style-type: none"> ■ Places fist within 2 inches of navel ■ Places fist 1 inch or more away from lower tip of breastbone ■ Each abdominal thrust is a separate and distinct attempt to dislodge the object 	<ul style="list-style-type: none"> ■ Places fist more than 2 inches from navel ■ Places fist less than 1 inch from the lower tip of breastbone (too close to breastbone) ■ Each abdominal thrust is not a separate and distinct attempt to dislodge the object

SKILL CHART: CONSCIOUS CHOKING—INFANT

If the victim cannot cough, speak or breathe:

1. Carefully position the infant face-down along your forearm.
 - Support the infant's head and neck with your hand.
 - Lower the infant onto your thigh, keeping the infant's head lower than their chest.
2. Give 5 back blows.
 - Give back blows with the heel of your hand between the infant's shoulder blades.
 - Each back blow should be a distinct attempt to dislodge the object.
3. Position the infant face-up along your forearm.
 - Position the infant between both of your forearms, supporting the infant's head and neck.
 - Turn the infant face-up.
 - Lower the infant onto your thigh with the infant's head lower than their chest.
4. Give 5 chest thrusts.
 - Put two or three fingers on the center of the chest just below the nipple line and compress the chest about 1½ inches.
 - Each chest thrust should be a distinct attempt to dislodge the object.

SKILL ASSESSMENT TOOL: CONSCIOUS CHOKING—INFANT

Criteria	Proficient	Not Proficient
Keeps the head lower than the chest	<ul style="list-style-type: none"> ■ Positions infant with upper airway (infant's head and neck) angled downward, lower than chest 	<ul style="list-style-type: none"> ■ Positions infant with upper airway (infant's head and neck) parallel to ground or angled upward
Supports the head and neck securely	<ul style="list-style-type: none"> ■ Places thumb and fingers on infant's jaw 	<ul style="list-style-type: none"> ■ Places thumb on front of infant's neck ■ Places fingers on front of infant's neck
Maintains firm support	<ul style="list-style-type: none"> ■ Holds infant securely 	<ul style="list-style-type: none"> ■ Drops infant ■ Loses control of infant
Gives back blows	<ul style="list-style-type: none"> ■ Strikes the back with the heel of one hand ■ Strikes the center of the back between the shoulder blades 	<ul style="list-style-type: none"> ■ Strikes the back with a closed hand ■ Strikes the back with a palm ■ Strikes the back more than 1 inch from the center of both shoulder blades
Gives chest thrusts	<ul style="list-style-type: none"> ■ Places fingers in line with the breastbone (not across/perpendicular to the breastbone) ■ Places fingers in center of chest not more than 1 inch below nipple line 	<ul style="list-style-type: none"> ■ Places fingers perpendicular to breastbone ■ Places fingers outside center of chest ■ Places fingers more than 1 inch below nipple line ■ Places fingers more than 1 inch above nipple line

CARDIAC EMERGENCIES AND USING AN AUTOMATED EXTERNAL DEFIBRILLATOR

Lesson Length: 1 hour, 45 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Discuss all points in the topic Cardiac Arrest.
- Guide the discussion on CPR.
- Show the video segment and complete the skill practice for CPR—Adult and Child.
- Show the video segment and complete the skill practice for CPR—Infant.
- Discuss all points in the topic Two-Rescuer CPR.
- Complete the skill practice Two-Rescuer CPR—Adult and Child.
- Guide the discussion on Two-Rescuer CPR—Infant.
- Complete the skill practice Two-Rescuer CPR—Infant.
- Discuss all points in the topic When the Heart Stops and AEDs.
- Discuss all points in the topic Using an AED.
- Complete the skill practice for Using an AED.
- Discuss all points in the topic AED Precautions and AED Maintenance.
- Complete the activity Using an AED in Unique Situations—Fact or Fiction.
- Discuss all points in the topic CPR with Airway Obstruction.
- Complete the skill practice for CPR—Obstructed Airway.
- Show the video segment “Putting It All Together—Multiple-Rescuer Response.”
- Conduct the skill drills for Multiple-Rescuer Response.
- Conduct the Putting It All Together skill drills.
- Complete the Lifeguard Station Response Time Testing skill drills.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Recognizing and Caring for a Heart Attack
 - CPR
 - Using an AED
 - CPR with Airway Obstructions

LESSON OBJECTIVES

- Identify the five links in the Adult and Pediatric Cardiac Chain of Survival and identify the importance of each.
- Recognize the signs and symptoms of a heart attack.
- Identify the steps for caring for a victim of a heart attack.
- Identify signs and symptoms of cardiac arrest.
- Demonstrate how to safely and effectively perform one-rescuer CPR, two-rescuer CPR and multiple-rescuer response.
- Demonstrate how to use an automated external defibrillator (AED).
- Identify precautions for using an AED.
- Demonstrate how to perform a water rescue, extricate and provide the appropriate care in a multiple-rescuer response utilizing the AED and BVM.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Manikins (one adult and one infant manikin for every two participants, child manikins optional)
- Pediatric resuscitation masks (one per participant)
- Decontamination supplies
- Automated External Defibrillator (AED) training devices (one for every two participants)
- AED training pads (one set of adult and one set of pediatric training pads for every two participants)
- Rescue tubes (one for every two participants)
- Backboard (one for every three participants)
- Timing device such as a stop watch or smartphone with a stop watch feature (one per instructor)
- Adult and Pediatric bag-valve-mask (BVM) resuscitators
- Hip packs (one for each participant)
- Latex-free nitrile gloves
- Multiple-Rescuer Response Scenario Assessment Forms

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time. Each group of five participants needs one set of equipment for the multiple-rescuer response scenarios.
- Be prepared to answer questions participants may have about the eLearning content and review questions they completed.
- Have copies of the appropriate materials ready before the start of class.
 - Copy the appropriate number of the Multiple-Rescuer Response Scenario Assessment Tools.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 6: Cardiac Emergencies and Using an AED.
- Choose either the practice-while-you-watch or watch-then-practice method for the CPR skill practices.
- Participants need only demonstrate adult CPR and be able to point out how it differs from performing CPR on a child, such as compressing the chest to a depth less than that for an adult.
- Participants only need to demonstrate either adult two-rescuer CPR or child two-rescuer CPR and be able to point out how one differs from the other, such as depth of compressions and ratio of compressions to ventilations.
- Participants only need to demonstrate how to use an AED on either an adult, a child or an infant and be able to point out the differences in the use of an AED for the other two age groups.
- Participants only need to demonstrate CPR—Obstructed Airway on an adult and infant and be able to point out the differences in technique for a child.
- The purpose of the multiple-rescuer response drill is for participants to apply all the skills they have learned thus far about water rescues and CPR and gain experience in using decision-making skills, communicating with other group members in prioritizing care steps, and working together to provide CPR with BVM and AED after a water rescuer and extrication.
- During the multiple-rescuer response skill drill:
 - Assign the rescuing lifeguard (and assisting responder when specified in the scenario), but do not assign roles to additional responders. Instead allow them to prioritize and take action. For example, the first rescuer on the scene with gloves on should start the care step immediately, not wait for the other responder(s) to get ready. The responders must communicate and move into position to start the care step that should occur. The intent of the drill is to help participants apply their knowledge and decision-making skills while working as a team.
- See a video example about how to conduct a multiple-rescuer response drill on the Red Cross Learning Center.
- The final skills scenario will include Multiple-Rescuer Response Scenario 3.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.
- Arrange the manikins so the heads are facing the same direction to make it easier for you to observe and assess participant performance.
- When using the practice-while-you-watch method, do not interrupt this skill session to lecture or communicate anything other than guidance related to skill practice. In general, answering questions should occur after the video segment (and skill session) has ended.
- When practicing using the AED, guide participants through the skill without each group turning on their AED units so your unit is the only one audible. Once you have led them through the skill initially, have the groups repeat with their units turned on so they can follow the audible prompts of their unit(s). Ensure they turn the volume of each unit to a level their group can hear but not so loud as to disrupt other groups also trying to hear their unit.
- When practicing in-water skill drills, stagger the groups in a way that allows you to observe and give feedback of the groups and maximize practice time for all participants rather than having them watch another group (if you have enough participants in the class).
- For the multiple-rescuer response scenarios, ensure that participants are getting in the appropriate positions, changing positions for the skill they are performing and are allowing for a quick and effective change in position (i.e., not stepping over the victim, etc.). If you notice some participants acting unsure, help them and rotate them into positions in other scenarios that will require them to lead and demonstrate their skill and knowledge.

CARDIAC ARREST

LECTURE
AND GUIDED
DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 72-73

Participant's
Manual:
Chapter 9

- Ask participants: **What are some signs of cardiac arrest?**

Answers: Responses should include the following:

- Sudden collapse
- Unconsciousness
- Absence of breathing
- Absence of a pulse

- Ask participants: **What is the difference between a heart attack and cardiac arrest?**

Answers: Responses should include the following:

- A heart attack occurs when the heart muscle experiences a loss of oxygenated blood.
- Cardiac arrest occurs when the heart stops beating or the heart is beating too irregularly or too weakly to circulate blood effectively. The victim is unresponsive, is not breathing normally and does not have a pulse. A heart attack may cause cardiac arrest.

CPR

LECTURE
AND GUIDED
DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 75–78

Participant's
Manual:
Chapter 9

- Ask participants: **What is CPR?**
Answer: CPR is a combination of chest compressions and ventilations to circulate blood that contains oxygen to the brain and other vital organs of a person whose heart and breathing have stopped.
- Ask participants: **How can you make sure that your chest compressions are effective?**
Answers: Responses should include the following:
 - Placing the victim on a firm, flat surface
 - Correctly positioning the hands for compressions
 - Compressing the chest in a straight-down manner to the proper depth
 - Performing compressions at the proper rate
 - Making sure the chest is exposed to ensure that the chest recoils between each compression
 - Minimizing interruptions in CPR
- Ask participants: **Once started, do not stop CPR except in which of these situations?**
Answers: Responses should include the following:
 - You notice an obvious sign of life, such as normal breathing.
 - An AED is ready to analyze the victim's heart rhythm.
 - Another trained responder or EMS personnel takes over.
 - You are alone and too exhausted to continue.
 - The scene becomes unsafe.
- Ask participants: **What should you do if, at any time, you notice normal breathing?**
Answers: Responses should include the following:
 - Stop CPR and continue to monitor the victim's condition. Be prepared to resume care if necessary.



Science Note:

- **Chest Compressions:** Actual depth may be difficult to judge without the use of feedback devices, but it is critical to compress the chest **AT LEAST 2 inches** for an adult victim. Evidence shows that compression depths greater than 2.4 inches in the average adult lead to a higher incidence of non-life threatening injuries and should be avoided. Compression rates that exceed 120 compressions per minute also affect the quality of compressions. Evidence suggests that higher rates of compressions lead to inadequate compression depths.
- **High Performance CPR:** Evidence continues to build that the key to successful resuscitations is the delivery of high quality CPR, including uninterrupted chest compressions and ventilations.
- **CPR differences—Adult and Child:** The majority of pediatric cardiac arrests are a result of a respiratory cause such as a breathing problem (asthma/anaphylaxis), an obstructed airway, drowning or an injury. As such, ventilations and appropriate oxygenation are important for a successful resuscitation. In these situations, laryngeal spasm may occur, making passive ventilation during chest compressions minimal or non-existent.

CPR—ADULT AND CHILD

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 9

- Choose either the practice-while-you-watch or watch-then-practice method for this skill practice.
- Participants need only demonstrate adult CPR and be able to point out how it differs from performing CPR on a child, such as compressing the chest to a depth less than that for an adult.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: compressions that are too shallow or too deep, interrupting compressions for too long or too frequently, incorrect hand position, failure to allow full recoil after each compression or inappropriate rate (speed) of compressions, incorrect rate of compressions and ventilations, inadequate ventilations, not counting out loud.

SKILL PRACTICE:



REFERENCES:

Course
Presentation:
Slide 79
Participant's
Manual:
Chapter 9

PRACTICE-WHILE-YOU-WATCH

- Ask participants to take their disposable gloves and resuscitation masks to the practice area.
- Explain to the participants that, for this skill, they will follow along with and practice the steps for performing CPR as they are guided by the video segment.
- Show the video segment "CPR—Adult and Child."
- Do not interrupt this skill session to lecture or communicate anything other than guidance related to skill practice. In general, answering questions should occur after the video segment (and skill session) has ended.

WATCH-THEN-PRACTICE

- Tell participants that, for this segment, they will watch the video segment without practicing until you pause it, even though the narration may say to follow along.
- Show the video segment "CPR—Adult and Child."
- Ask participants to take their disposable gloves and resuscitation masks to the practice area.
- Guide participants through the steps of the skill and evaluate completion of the skill using the skill chart.

CPR—INFANT

VIDEO SEGMENT:



REFERENCES:

Course
Presentation:
Slide 80
Participant's
Manual:
Chapter 9

- If using the practice-while-you-watch method, move to the skill practice and show the video segment as you conduct the skill practice.
- Explain to participants that the video segment will demonstrate the procedures for one-rescuer CPR for an infant.
- Show the video segment "CPR—Infant."
- Answer participants' questions about the video segment.

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 9

- Follow the same steps as in the previous skill practice:
 - Have participants practice the skill.
 - Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
 - Examples of common errors to point out include: compressions that are too shallow or too deep, interrupting compressions for too long or too frequently, incorrect finger position and failure to allow full recoil after each compression, inappropriate rate (speed) of compressions, incorrect rate of compressions and ventilations, inadequate ventilations or not counting out loud.

TOPIC: **TWO-RESCUER CPR—ADULT AND CHILD**

Time: 15 minutes

TWO-RESCUER CPR

LECTURE
AND GUIDED
DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 82–84

Participant's
Manual:
Chapter 9

- Ask participants: **What is two-rescuer CPR?**
Answer: Two-rescuer CPR is when one rescuer gives ventilations while the other performs chest compressions.
- Ask participants: **How often should you switch positions?**
Answer: Rescuers switch positions about every 2 minutes.
- **When CPR is in progress by one rescuer and a second rescuer arrives, the second rescuer should confirm whether EMS personnel have been summoned. If not, the second rescuer does so before getting the AED or assisting with care.**

TWO-RESCUER CPR—ADULT AND CHILD

SKILL
PRACTICE:



REFERENCES:

Course
Presentation:
Slides 85

Participant's
Manual:
Chapter 9

- Ask participants: **What questions do you have about the “Two-Rescuer CPR—Adult and Child” video?**
- Pair up participants and, using a manikin and a resuscitation mask, conduct the skill practice.
- Participants only need to demonstrate either adult two-rescuer CPR or child two-rescuer CPR and be able to point out how one differs from the other, such as depth of compressions and ratio of compressions to ventilations.
- Guide participants through the steps of the skill.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: compressions that are too shallow or at an inappropriate rate, compressing and ventilating at the same time, failing to call for a position change or using an incorrect cycle of compressions and ventilations.

TWO-RESCUER CPR—INFANT

SKILL
PRACTICE:



REFERENCES:

Course
Presentation:
Slides 85

Participant's
Manual:
Chapter 9

- Ask participants: **What questions do you have about the “Two-Rescuer CPR—Infant” video?**
- Pair up participants and, using a manikin and a resuscitation mask, conduct the skill practice.
- Guide participants through the steps of the skill.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: compressions that are too shallow or at an inappropriate rate, compressing and ventilating at the same time, failing to call for a position change, or using an incorrect cycle of compressions and ventilations.

TOPIC: WHEN THE HEART STOPS

Time: 5 minutes

WHEN THE HEART STOPS

LECTURE
AND GUIDED
DISCUSSION:



REFERENCES:

Course
Presentation:
Slide 87-89

Participant's
Manual:
Chapter 9

- Ask participants: **What are the two most common treatable abnormal rhythms associated with sudden cardiac arrest?**
Answer: Ventricular fibrillation (V-fib) and ventricular tachycardia (V-tach).
- Ask participants: **What is an AED?**
Answer: An AED is a portable electronic device that analyzes the heart's rhythm and provides an electrical shock.
- **Each minute that CPR and defibrillation are delayed, the victim's chance for survival is reduced by about 10 percent.**

TOPIC: USING AN AED

Time: 10 minutes

USING AN AED

LECTURE
POINTS:



REFERENCES:

Course
Presentation:
Slides 91-92


Participant's
Manual:
Chapter 9

- **When cardiac arrest occurs, use an AED as soon as it is ready to use.**
- **If the AED advises that a shock is needed, follow protocols to provide 1 shock followed by about 2 minutes of CPR.**
- **If CPR is in progress, do not interrupt chest compressions until the AED is turned on, the AED pads are applied and the AED is ready to analyze the heart rhythm.**
- **AEDs may be equipped with pediatric AED pads; however, pediatric pads are appropriate only for use on infants and children up to 8 years of age or weighing less than 55 pounds.**
 - **If pediatric-specific equipment is not available and local protocols allow, you can use an AED designed for adults.**
 - **If the AED pads risk touching each other because of the smaller chest size, use the anterior (front)/posterior (back) method of pad placement.**






Science Note:

- *For every 1 minute of delayed defibrillation, the rate of survival drops 7 to 10 percent.*
- *AEDs allow for compressions post-analysis while the AED is charging. Lifeguards and professional rescuers may perform compressions from the time the shock advised prompt is noted through the time that the prompt to clear occurs, just prior to depressing the shock button. Emphasize the need to follow the manufacturer's recommendations and their local protocols and practices.*

<p>SKILL PRACTICE:</p>  <p>REFERENCES: Course Presentation: Slides 93 Participant's Manual: Chapter 9</p>	<ul style="list-style-type: none"> ■ Ask participants: What questions do you have about the video “Using an AED”? ■ Using manikins, resuscitation masks and training AEDs with the appropriately sized AED training pads, have participants work in pairs with their AED skill sheets to lead each other as they practice the skill. ■ Participants only need to demonstrate how to use an AED on either an adult, a child or an infant and be able to point out the differences in the use of an AED for the other two age groups. ■ Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice. ■ Examples of common errors to point out include: not wiping the victim's chest, using pediatric AED pads on an adult, failing to resume CPR after delivery of a shock or incorrect CPR performance.
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USING AN AED—CPR IN PROGRESS

<p>LECTURE POINTS:</p>  <p>REFERENCES: Course Presentation: Slide 95-96 Participant's Manual: Chapter 9</p>	<ul style="list-style-type: none"> ■ Ask participants: What questions do you have about the “Using an AED—CPR in Process” video? ■ When one rescuer is on the scene, that rescuer begins CPR and instructs someone to summon EMS personnel and obtain the AED, if one is available. ■ When the assisting rescuer arrives, they prepare the AED for use while the rescuing lifeguard continues CPR. ■ If at any time either rescuer notices an obvious sign of life, such as normal breathing, they should stop CPR and monitor the victim's condition and administer emergency oxygen, if it is available and rescuers are trained. ■ Explain to participants that they will practice using an AED while CPR is in progress at multiple times later in the course.
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CPR WITH AIRWAY OBSTRUCTION	
<p>LECTURE POINTS:</p>  <p>REFERENCES: Course Presentation: Slide 98 Participant's Manual: Chapter 9</p>	<ul style="list-style-type: none"> ■ If a victim who is choking becomes unresponsive, carefully lower them to a firm, flat surface, send someone to get an AED, and summon EMS if you have not already done so. ■ Immediately begin CPR starting with chest compressions. ■ As you open the airway to give ventilations, look in the person's mouth for any visible object. ■ If you can see it, use a finger sweep motion to remove it. If you don't see the object, do not perform a blind finger sweep, but continue CPR.
<p>SKILL PRACTICE:</p>  <p>REFERENCES: Course Presentation: Slide 99 Participant's Manual: Chapter 9</p>	<ul style="list-style-type: none"> ■ Ask participants: What questions do you have about the “CPR—Obstructed Airway” video? ■ Using manikins and resuscitation masks, have participants work in pairs using their CPR—Obstructed Airway skill sheets to lead each other as they practice the skill. ■ Participants only need to demonstrate CPR—Obstructed airway on an adult and infant and be able to point out the differences in technique. ■ Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice. ■ Examples of common errors to point out include: using abdominal thrusts instead of chest compressions, failing to check the mouth for an object, performing a blind finger sweep, compressing too little or too much, failing to give ventilations, using the wrong finger to clear the object from the mouth or incorrect compression to ventilation ratio, not counting out loud.

TOPIC: IN-WATER SKILL SESSION: PUTTING IT ALL TOGETHER

Time: 45 minutes

RESCUE, EXTRICATION, PRIMARY ASSESSMENT AND BVM

SKILL DRILL:



Instructor's Note: *The purpose of this skill drill is for participants to gain experience with a scenario that includes a water rescue, extrication and providing ventilations using a BVM. Part 2 of the drill challenges participants to perform the scenario within 1 1/2 minutes.*

- Assemble the participants on the pool deck and explain they will be practicing team rescues for a submerged passive victim in deep water, extricating the victim from the water on a backboard, performing a primary assessment and providing care for a victim who is not breathing but has a pulse.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, participants will practice rescuing a submerged passive victim in shallow water.
- Divide the participants into groups of three and assign one rescuing lifeguard, one assisting responder and one victim for each group. Have each lifeguard and assisting responder wear a hip pack containing gloves and a resuscitation mask.
- Have a manikin available to substitute into the drill once the rescue and extrication are complete.
- Explain that for each group:
 - The rescuing lifeguard will simulate activating the EAP and enter the water.
 - The victim will get into position and submerge as the rescuing lifeguard gets near. The rescuing lifeguard will perform a submerged passive victim rescue.
 - The assisting lifeguard will bring the backboard and assist the rescuing lifeguard in extricating the victim, demonstrating team communication skills between the lifeguards.
 - Once removed from the water, the lifeguards should do a primary assessment on a manikin, give 2 ventilations and then provide care for a victim who is not breathing but has a pulse. The lifeguards should give ventilations using a BVM.
- Repeat the drill until each person in the group has performed as a rescuing lifeguard and an assisting responder.

LIFEGUARD STATION RESPONSE TIME TESTING

SKILL DRILL:



REFERENCES:

Course
Presentation:
Slide 101



Instructor's Note: *The purpose of this drill is to test response time, not victim recognition. Participants will know who the victim is and where they are positioned. This test is designed to assist supervisors at a facility and to evaluate each zone by getting an average time for different lifeguards, not to test individual lifeguard performance.*

- Assemble participants on the pool deck and explain they will be practicing lifeguard station response time testing.
- This drill helps managers evaluate the ability of a lifeguard to reach a victim from anywhere in a zone and to rescue a submerged, passive victim, extricate and provide 2 ventilations.
- Explain to participants that the goal of this drill is not to exceed 1½ minutes from any location within that zone, including the furthest and deepest spot.
- Divide participants into groups of three and assign one rescuing lifeguard, one assisting responder and one victim for each group. Have each lifeguard and assisting responder wear a hip pack containing gloves and a resuscitation mask.
- Have a manikin available to substitute into the drill once the primary assessment is complete.
- Place the lifeguard at a “station” and the assisting responder where they would normally be within the facility, such as in a break room or location as a back-up responder.



Instructor's Note: *A mock station can be used if an actual station is not available.*

- Initiate the drill:
 - Place the “victim” in the pre-arranged location (for example a submerged victim in the farthest corner of the zone). The zones should be a realistic size and shape. The victim should not submerge until the lifeguard nears the scene.
 - Start the drill by having the lifeguard activate the EAP.
- Time the response. Start timing at the whistle blast/EAP signal and stop when the victim has been extricated from the water and 2 ventilations have been given.
- Ask participants: **What adjustments could be made to reduce the time, if needed, and ensure that lifeguards at each zone are able to respond, extricate and begin ventilations?**

Answers: *Responses should include the following:*

 - *Moving the lifeguard station*
 - *Adjusting the zone coverage, such as splitting the zone*
 - *Adjusting the placement of emergency equipment or emergency back-up personnel*

TOPIC: **PUTTING IT ALL TOGETHER: MULTIPLE-RESCUER RESPONSE**

Time: 1 hour, 5 minutes

MULTIPLE-RESCUER RESPONSE

VIDEO SEGMENT:



- Explain to participants that the video segment will demonstrate the procedures for a multiple-rescuer response with CPR in progress.
- Show the video segment “Putting It All Together—Multiple-Rescuer Response.”
- Answer participant's questions about the segment.

REFERENCES:

Course
Presentation:
Slide 102

SKILL DRILL—MULTIPLE-RESCUER RESPONSE

SKILL DRILL:






REFERENCES:

Participant's
Manual:
Chapter 9



Instructor's Note: *The purpose of this drill is for participants to apply all the skills they have learned thus far about water rescues and CPR and to gain experience in using decision-making skills, communicating with other group members in prioritizing care steps and working together to provide CPR with BVM and AED after a water rescuer and extrication.*

- Assemble the participants on the deck and explain that they will now put their multiple-rescuer response skills into practice.
- Explain that they will begin with practice of multiple-rescuer scenarios for a victim on land (Scenarios 1 and 2) and then will practice scenarios that include a completion of a water rescue (Scenarios 3 and 4).
- Use the Scenario Flow Sheets in Appendix B to conduct the multiple-rescuer response scenarios and use the Multiple-Rescuer Response Assessment Tools in Appendix F to evaluate the individual and team performance.
- For all scenarios, ensure that all lifeguards are equipped with hip packs containing gloves and resuscitation masks and each team is equipped with a BVM and AED training unit. For scenarios 3 and 4, have a manikin available to substitute for the victim after the victim is extricated from the water. The victim for the water rescue should be submerged in deep water.
- For scenario 1:
 - Divide participants into groups of four and assign two lifeguards as the first responders on the scene and two lifeguards as the additional responders that will arrive when prompted with the BVM and AED.
- For scenario 2:
 - Divide participants into groups of four and assign four lifeguards that will all arrive on the scene at the same time. This scenario assumes the water rescue has already been completed and the scenario starts on land. Consent is implied for the drowning victim.
- For scenario 3:
 - Divide participants into groups of five and assign one victim and two lifeguards as the first responders on the scene (one rescuing lifeguard and one assisting lifeguard to assist with extrication) and two lifeguards as the additional responders that will arrive when prompted with the BVM and AED. Substitute a manikin for the victim after the victim has been extricated from the water.

<p>SKILL DRILL: <i>continued</i></p> 	<ul style="list-style-type: none"> ■ For scenario 4: <ul style="list-style-type: none"> ○ Divide participants into groups of five and assign one victim and four lifeguards as the first responders on the scene (one rescuing lifeguard, one assisting lifeguard to assist with extrication and two lifeguards to bring the BVM and AED). Consent is implied for the drowning victim. ■ Conduct scenarios 1, 2, 3 and 4. Ensure that each participant in the class has acted as the rescuing lifeguard at least once in scenarios 3 and 4. The intent is for participants to apply what they are learning through the class and gain experience in various roles. <div style="border: 1px solid #ADD8E6; padding: 10px; margin-top: 10px;"> <p> Instructor's Note:</p> <ul style="list-style-type: none"> ■ <i>Assign the rescuing lifeguard (and assisting responder when specified in the scenario), but do not assign roles to additional responders. For example: bring the AED, bring the BVM, etc. The intent is to help participants apply their knowledge and decision-making skills while working as a team.</i> ■ <i>See a video example of one of these drills on the Red Cross Learning Center.</i> ■ <i>The final skills scenario will include Multiple-Rescuer Response Scenario 3.</i> </div>
<p>ASSIGNMENT</p>	
<p>ACTIVITY:</p>  <p>REFERENCES: Course Presentation: Slide 103</p>	<ul style="list-style-type: none"> ■ When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session. <ul style="list-style-type: none"> ○ Complete eLearning Module 7: First Aid. ○ Read Chapter 10: First Aid in the <i>Lifeguarding Manual</i>.

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill. Assessment criteria that are general for the category of skills, as well as specific to the skill, must be met.

CPR

SKILL CHART: CPR—ADULT, CHILD AND INFANT

If the victim is not breathing and has no pulse:

1. Give 30 chest compressions.
 - Adult or Child: Place the heel of one hand in the center of the chest on the lower half of sternum with the other hand on top.
 - Keep your arms as straight as possible and shoulders directly over your hands.
 - Infant: Place one hand on the infant's forehead. Place two or three fingers from your hand closest to the infant's feet on the center of the chest just below the nipple line. The fingers should be oriented so they are parallel not perpendicular to the sternum.
 - Push hard, push fast.
 - Compress the chest at a depth of:
 - Adult: At least 2 inches but not more than 2.4 inches
 - Child: About 2 inches
 - Infant: About 1½ inches
 - Compress the chest at a rate of at least 100 per minute but no more than 120 per minute.
 - Let the chest fully recoil between each compression.
 - Give 2 ventilations.
2. Give 2 ventilations.
3. Perform cycles of 30 compressions and 2 ventilations.

Continue CPR until:

- You see an obvious sign of life, such as normal breathing or victim movement.
- An AED is ready to analyze the victim's heart rhythm.
- Another trained responder or responders take over, such as a member of your safety team or EMS personnel, and relieve you from giving compressions or ventilations.
- You are alone and too exhausted to continue.
- The scene becomes unsafe.

SKILL ASSESSMENT TOOL: CPR—ADULT OR CHILD

Criteria	Proficient	Not Proficient
Victim is on a flat, firm surface	■ If necessary, moves victim to a flat, firm surface	■ Attempts CPR on a soft surface
ADULT: Compresses chest at least 2 inches deep for an adult	■ Compresses the chest straight down at least 2 inches for at least 24 of the 30 compressions	■ Compresses the chest less than 2 inches for 7 or more times per 30 compressions
CHILD: Compresses chest about 2 inches deep for a child	■ Compresses the chest straight down about 2 inches for at least 24 of the 30 compressions	■ Compresses the chest less than 1¾ inches for 7 or more times per 30 compressions
Lets chest rise completely before pushing down again	■ Compresses and fully releases the chest without pausing or taking hands off chest for 24 of the 30 compressions	■ Pauses while compressing or releasing the chest for 7 or more times per 30 compressions

SKILL ASSESSMENT TOOL: CPR—ADULT OR CHILD, <i>CONTINUED</i>		
Compresses chest at a rate of at least 100 times per minute (30 compressions in about 18 seconds)	■ Compresses center of the chest 24–36 times in about 18 seconds	■ Compresses the chest less than 24 or more than 36 times in about 18 seconds
Give ventilations	■ Gives 2 ventilations that make the chest clearly rise and that last about 1 second each	■ Gives 2 ventilations that do not make the chest clearly rise and that last 2 or more seconds each
Return to compressions	■ Gives ventilations and returns to chest compressions within 3–6 seconds	■ Gives ventilations and returns to compressions but takes 7 or more seconds
SKILL ASSESSMENT TOOL: CPR—INFANT		
Criteria	Proficient	Not Proficient
Victim is on a flat, firm surface	■ If necessary, moves victim to a flat, firm surface	■ Attempts CPR on a soft surface
Compress chest about 1½ inches deep for an infant	■ Compresses the chest straight down at least 1½ inches for at least 24 of the 30 compressions	■ Compresses the chest less than 1¼ inches for 7 or more times per 30 compressions
Let chest rise completely before pushing down again	■ Compresses and releases the chest without pausing for 24 of the 30 compressions	■ Pauses while compressing or releasing the chest for 7 or more times per 30 compressions
Compress chest at a rate of at least 100 times per minute (30 compressions in about 18 seconds)	■ Compresses center of the chest 24–36 times in about 18 seconds	■ Compresses the chest less than 24 or more than 36 times in about 18 seconds
Give ventilations	■ Gives 2 ventilations that make the chest clearly rise and that last about 1 second each	■ Gives 2 ventilations that do not make the chest clearly rise and that last 2 or more seconds each
Return to compressions	■ Gives ventilations and returns to chest compressions within 3–6 seconds	■ Gives ventilations and returns to compressions but takes 7 or more seconds

TWO-RESCUER CPR

SKILL CHART: TWO-RESCUER CPR—ADULT, CHILD AND INFANT

If the victim is not breathing and has no pulse:

1. Rescuer 2 finds the correct hand position to give chest compressions.
 - Adult: Place two hands on the center of the chest.
 - Child: Place one or two hands on the center of the chest.
 - Infant: Use the encircling thumbs technique.
 - Place thumbs next to each other on the center of the chest just below the nipple line.
 - Place both hands underneath the infant's back and support the infant's back with your fingers.
 - Ensure that your hands do not compress or squeeze the side of the ribs.
2. Rescuer 2 gives chest compressions.
 - Push hard, push fast.
 - Compress the chest at a depth of:
 - Adult: At least 2 inches but not more than 2.4 inches
 - Child: About 2 inches
 - Infant: About 1 ½ inches
 - Compress the chest at a rate of at least 100 per minute but no more than 120 per minute.
3. Rescuer 1 gives 2 ventilations.
4. Perform about 2 minutes of compressions and ventilations.
 - Adult: Perform cycles of 30 compressions and 2 ventilations.
 - Child and Infant: Perform cycles of 15 compressions and 2 ventilations.
5. Rescuers change positions at least every 2 minutes (5 cycles of 30 compressions and 2 ventilations) and/or while the AED is analyzing the heart rhythm.
 - Rescuer 2 calls for a position change by using the word "change" at the beginning of the last compression cycle and again at the end of the last compression cycle:
 - Adult: Use the word "change" in place of the word "30."
 - Child: Use the word "change" in place of the word "15."
 - Rescuer 1 gives 2 ventilations.
 - Rescuer 2 quickly moves to the victim's head with their own mask.
 - Rescuer 1 quickly moves into position at the victim's chest and locates correct hand position on the chest.
 - Changing positions should take less than 5 seconds.
6. Rescuer 1 begins chest compressions.
 - Continue cycles of compressions and ventilations.

Continue CPR until:

- You see an obvious sign of life, such as normal breathing or victim movement.
- An AED is ready to analyze the victim's heart rhythm.
- Another trained responder or responders take over, such as a member of your safety team or EMS personnel, and relieve you from giving compressions or ventilations.
- You are alone and too exhausted to continue.
- The scene becomes unsafe.

SKILL ASSESSMENT TOOL: TWO-RESCUER CPR—ADULT, CHILD AND INFANT

Criteria	Proficient	Not Proficient
Change positions	<ul style="list-style-type: none"> Changes positions in 5 seconds 	<ul style="list-style-type: none"> Changes positions but takes more than 5 seconds
Compress the chest and give ventilations at the appropriate rate	<ul style="list-style-type: none"> ADULT: Cycles consist of 30 compressions and 2 ventilations CHILD AND INFANT: Cycles consist of 15 compressions and 2 ventilations 	<ul style="list-style-type: none"> ADULT: Cycles consist of less or more than 30 compressions and 2 ventilations CHILD AND INFANT: Cycles consist of less or more than 15 compressions and 2 ventilations

AED

SKILL CHART: USING AN AED

If the victim is not breathing and has no pulse:

1. Turn on the AED and follow the voice and/or visual prompts.
2. Wipe the victim's bare chest dry.

Tip: Remove any medication patches with a gloved hand.

3. Attach the AED pads to the victim's bare, dry chest.

- Place one pad on the victim's upper right chest and the other pad on the left side of the chest.
 - For a child or an infant: Use pediatric AED pads, if available. If the pads risk touching each other, place one pad in the middle of the child's chest and the other pad on the child's back, between the shoulder blades.

4. Plug in the connector, if necessary.

5. Stand clear.

6. Analyze the heart rhythm.

- Push the Analyze button, if necessary. Let the AED analyze the heart rhythm.

7. Deliver a shock or perform CPR based on the AED recommendation.

- If a shock is advised:
 - Make sure *no one*, including you, is touching the victim.
 - Say, "Everyone, stand clear!"
 - Deliver the shock by pushing the "Shock" button, if necessary.
 - After delivering the shock, perform about 2 minutes of CPR.
 - Continue to follow the prompts of the AED.
- If no shock is advised:
 - Perform about 2 minutes of CPR.
 - Continue to follow the prompts of the AED.

SKILL ASSESSMENT TOOL: USING AN AED

Criteria	Proficient	Not Proficient
Attach AED pads to bare chest	<ul style="list-style-type: none"> Places one pad on the upper right chest and one on the left side of the chest 	<ul style="list-style-type: none"> Places one pad on the upper left chest Places one pad on the lower right side of the chest
Make sure that pads do not touch (child or infant)	<ul style="list-style-type: none"> Places pads on the chest so that they are separated from each other Places one pad in the middle of the chest and one on the back centered between the shoulder blades Places pads so that the heart is between the two pads 	<ul style="list-style-type: none"> Places pads on the chest, but pads touch each other Places the center of one pad more than 2 inches from the center of the chest Places the center of one pad more than 2 inches from the center of both shoulder blades
Make sure that no one is touching the victim	<ul style="list-style-type: none"> Says, "Everyone, stand clear!" before pushing the "Analyze" button, if necessary Says, "Everyone, stand clear!" before pushing the "Shock" button, if necessary 	<ul style="list-style-type: none"> Does not say, "Everyone, stand clear!" Pushes the "Analyze" button if necessary, before saying, "Everyone, stand clear!" Pushes the "Shock" button, if necessary, before saying, "Everyone, stand clear!"
After delivering the shock, or if no shock is advised, perform about 2 minutes of CPR	<ul style="list-style-type: none"> Returns to chest compressions within 5 seconds 	<ul style="list-style-type: none"> Returns to chest compressions after 6 or more seconds

CPR WITH AIRWAY OBSTRUCTION

SKILL CHART: CPR WITH AIRWAY OBSTRUCTION

Note: If a person who is choking becomes unresponsive, summon EMS if you have not already done so then lower them to a firm, flat surface and immediately begin CPR, starting with chest compressions.

1. Give 30 chest compressions.
2. Before attempting ventilations, open the victim's mouth and look for the object.
 - If you see an object in the victim's mouth, carefully remove it using your finger.
 - Never perform a blind finger sweep.
3. Give 2 ventilations.

Continue to provide care by repeating this cycle until:

- The victim begins to breathe on their own.
- Another trained rescuer takes over.
- More advanced medical personnel, such as EMS personnel, take over.
- You are too exhausted to continue.
- The scene becomes unsafe.

Note: Continuing cycles of 30 compressions and 2 ventilations is the most effective way to provide care. Even if ventilations fail to make the chest rise, compressions may help clear the airway by moving the blockage to the upper airway where it can be seen and removed.

SKILL ASSESSMENT TOOL: CPR WITH AIRWAY OBSTRUCTION

Criteria	Proficient	Not Proficient
Victim is on flat, firm surface	<ul style="list-style-type: none"> ■ If necessary, moves victim to a flat, firm surface 	<ul style="list-style-type: none"> ■ Attempts CPR on a soft surface
ADULT: Compress chest at least 2 inches deep for an adult	<ul style="list-style-type: none"> ■ Exposes the chest ■ Compresses the chest straight down, at least 2 inches ■ Allows the chest to fully recoil between compressions (26 of 30 compressions) 	<ul style="list-style-type: none"> ■ Does not expose the chest ■ Compresses the chest less than 2 inches ■ Does not allow the chest to fully recoil between compressions
CHILD: Compress chest about 2 inches deep for a child	<ul style="list-style-type: none"> ■ Compresses the chest straight down about 2 inches ■ Exposes the chest ■ Allows the chest to fully recoil between compressions (26 of 30 compressions) 	<ul style="list-style-type: none"> ■ Compresses the chest less than or more than 2 inches ■ Does not expose the chest ■ Does not allow the chest to fully recoil between compressions
INFANT: Compress chest about 1 ½ inches deep for an infant	<ul style="list-style-type: none"> ■ Exposes the chest ■ Compresses the chest straight down, about 1 ½ inches 	<ul style="list-style-type: none"> ■ Does not expose the chest ■ Compresses the chest less than 1 ½ inches
Opens the victim's mouth to look for a visible object	<ul style="list-style-type: none"> ■ Opens the victim's mouth ■ If an object is visible, performs a finger sweep to remove the object 	<ul style="list-style-type: none"> ■ Does not open the victim's mouth ■ Performs a blind finger sweep
Gives ventilations	<ul style="list-style-type: none"> ■ Opens the airway and gives 2 ventilations that last about 1 second each 	<ul style="list-style-type: none"> ■ Does not open the airway or give ventilations ■ Gives ventilations that last 2 or more seconds each
Return to compressions	<ul style="list-style-type: none"> ■ Minimize interruptions to less than 5 seconds 	<ul style="list-style-type: none"> ■ Gives ventilations and returns to compressions but takes 5 or more seconds

FIRST AID

Lesson Length: 2 hours, 15 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Guide the discussion on Secondary Assessment.
- Discuss all points in the topic Responding to Injuries.
- Complete the skill practice session for Controlling Bleeding.
- Complete the activity Common Injuries.
- Complete the activity First Aid Scenarios.
- Complete the activity When Things Do Not Go as Practiced.
- Complete the activity Rescue Skills Review.
- Before attending the classroom session, participants should have completed the following content areas via eLearning:
 - Surveillance Activity 2
 - Secondary Assessment
 - Responding to Sudden Illnesses
 - Responding to Injuries
 - Head, Neck and Spinal Injuries on Land

LESSON OBJECTIVES

- Demonstrate how to perform a secondary assessment.
- Identify how to recognize and care for a victim of sudden illness, injuries and shock.
- Demonstrate how to control external bleeding.
- Demonstrate the ability to work as a team to implement an EAP, perform a secondary assessment and provide first aid care.
- Demonstrate how to perform front and rear head-hold escapes.
- Demonstrate how to give in-water ventilations.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Nitrile latex-free disposable gloves (one pair per participant)
- Chair
- Dressing and bandages (one per every two participants)
- Rescue tubes (one for every two participants)

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available ahead of time.
- Be prepared to answer questions participants may have about the eLearning content and review questions, the eLearning module they completed and the videos they watched.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 7: First Aid.
- When practicing in-water ventilations, remind participants not to give actual ventilations but rather to simulate ventilations on their partner.
- Participants are not required to participate in each role during the multiple-rescuer response scenario.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.

SECONDARY ASSESSMENT

LECTURE
AND GUIDED
DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 106–109
Participant's
Manual:
Chapter 10

- **After you have completed a primary assessment and determined that there are no life-threatening conditions, perform a secondary assessment to determine if there are any additional non-life-threatening conditions that would require you to provide care.**
- Ask participants: **What information should you check for when using SAMPLE to take a brief history related to the injury or illness?**
Answers: Responses should include the following:
 - **S** = Signs and symptoms
 - **A** = Allergies
 - **M** = Medications
 - **P** = Pertinent past medical history
 - **L** = Last oral intake
 - **E** = Events leading up to the incident
- Ask participants: **What should be included when performing a secondary assessment?**
Answers: Responses should include the following:
 - Visually inspect the person's body, looking carefully for any bleeding, cuts, bruises and obvious deformities.
 - Look for a medical identification (ID) tag, necklace or bracelet on the person's wrist, neck or ankle.
 - Check the person's ability to move body parts. Caution the person to not move any parts if they experience discomfort or pain. If the person is unable to move a body part or is experiencing dizziness or pain on movement:
 - Help the person rest in a comfortable position.
 - Keep the person from getting chilled or overheated.
 - Reassure the person.
 - Determine whether to summon emergency medical services (EMS) personnel.
 - Continue to watch for changes in the level of consciousness (LOC) and breathing.

CONTROLLING BLEEDING

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slide 111
Participant's
Manual:
Chapter 10

- Ask participants: **What are the four main types of open wounds?**

Answers:

- Abrasion
- Laceration
- Avulsion
- Puncture

SKILL PRACTICE:



REFERENCES:

Course
Presentation:
Slide 112
Participant's
Manual:
Chapter 10

- Ask participants: **What questions do you have about the “Responding to Sudden Illnesses” video?**
- Ask participants: **What questions do you have about the “Responding to Injuries” video?**
- Pair up participants. One participant will be the lifeguard and the other will be the victim; they will switch roles for the second scenario.
- Provide each participant with a pair of nitrile, latex-free disposable gloves.
- Provide a bandage and dressing for each pair of the participants.
- Guide participants through the steps listed on the Controlling External Bleeding skill sheet in Chapter 10, First Aid, in the *Lifeguarding Manual*.
- Have participants switch roles and repeat the skill practice.
- Clearly observe each participant's performance and provide corrective feedback.

SHOCK

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 113–115
Participant's
Manual:
Chapter 10

- Ask participants: **What are some signs and symptoms of shock?**

Answers: Responses should include the following:

- Restlessness or irritability
- Altered LOC
- Pale or ashen, cool, moist skin
- Nausea or vomiting
- Rapid breathing and pulse
- Excessive thirst

- Ask participants: **What are some ways to minimize the effects of shock?**

Answers: Responses may include the following:

- Make sure that EMS personnel have been summoned.
- Monitor the victim's condition and watch for changes in LOC.
- Control any external bleeding.
- Keep the victim from getting chilled or overheated.
- Have the victim lie flat on their back.
- Cover the victim with a blanket to prevent loss of body heat. Do not overheat the victim—your goal is to maintain a normal body temperature.
- Comfort and reassure the victim until EMS personnel take over.
- Administer emergency oxygen, if available and trained to do so.
- Do not give food or drink to a victim of shock, even if the victim asks for them.

COMMON INJURIES

ACTIVITY:



REFERENCES:

Participant's
Manual:
Chapter 10

- Explain that Chapter 10, First Aid, of the *Lifeguarding Manual* is a resource for first aid care for many specific types of injuries.
- Divide the participants into small groups. Assign each group one of the following types of injury:
 - Nosebleeds
 - Mouth and teeth injuries (no head, neck or spinal injury suspected)
 - Knocked-out tooth
 - Animal or human bites
 - Insect stings
 - Burns
- Ask participants to research and report their findings to the class as to what care should be provided for their assigned type of injury.
- Allow up to 3 to 5 minutes for the group work. Circulate among groups to monitor progress and provide assistance when necessary.
- Re-assemble the class and call on group leaders to share the group's findings.

INJURY OR ILLNESS

CARE STEPS

Nosebleeds

- Have the victim sit leaning slightly forward to prevent swallowing or choking on the blood.
- Pinch the nostrils together for about 5 to 10 minutes or until the bleeding stops.
- After the bleeding stops, have the victim avoid rubbing, blowing or picking the nose.
- Medical attention is needed if the bleeding persists or recurs or if the victim says the nosebleed was a result of high blood pressure.
- If the victim becomes unresponsive, perform a primary assessment. If the victim is breathing, place the victim on their side to allow blood to drain from the nose. Summon EMS personnel immediately.

Mouth and Teeth Injuries (No Head, Neck or Spinal Injury Suspected)

- Rinse the victim's mouth with cold tap water, if available.
- Have the victim lean slightly forward or place the victim on their side to prevent the victim from swallowing the blood, which could cause nausea or vomiting.
- Apply a dressing.

Knocked-Out Tooth

- Control any bleeding.
- Have the victim bite down on a rolled sterile dressing in the space left by the tooth (or teeth).
- Save any displaced teeth.
 - Carefully pick up the tooth by the crown (white part), not the root.
 - Do not scrub or attempt to clean the tooth or remove any tissue fragments.
 - Place the tooth in a Hank's Balanced Salt solution. If not available, place the tooth in egg white, coconut water or whole milk. If none of these solutions are available, place the tooth in the victim's saliva (not in the mouth).
- Advise the victim to get to an emergency department or dentist with the tooth as soon as possible. For the greatest chance to save the tooth, it needs to be re-implanted within 30-60 minutes.

Animal or Human Bites	<ul style="list-style-type: none"> ■ Summon EMS personnel if the wound bleeds severely or if the animal is suspected to have rabies. ■ For severe bleeding, control the bleeding first. Do not clean the wound. It will be properly cleaned at the hospital. ■ If the bleeding is minimal: <ul style="list-style-type: none"> ○ Wash the wound with soap and water, then rinse with clean water. ○ Apply a small amount of antibiotic wound ointment, cream or gel to the wound if the person has no known allergies or sensitivities to the ingredients. ○ Control the bleeding. ○ Cover with a sterile bandage.
Burns	<ul style="list-style-type: none"> ■ Stop the burning by removing the person from the source of the burn. ■ Cool the burned area with large amounts of cool or cold tap water for at least 10 minutes. If cool or cold water is not available, use a clean cool or cold compress. ■ Monitor the victim for hypothermia when cooling large burns. ■ Cover the burned area loosely with a sterile dressing. ■ Comfort and reassure the victim.
Insect Stings	<ul style="list-style-type: none"> ■ Examine the sting site to see if the stinger is in the skin. If a stinger is present, scrape it away with the edge of a plastic card, such as a credit card. ■ Wash the wound with soap and water. ■ Cover the site with a dressing to help keep the wound clean. ■ Apply a cold pack to the site to reduce pain and swelling. ■ Watch the victim for signs of a severe allergic reaction and care for life-threatening conditions. ■ Monitor the victim's condition (look for changes in LOC) and keep the victim comfortable.

TOPIC: **PUTTING IT ALL TOGETHER—FIRST AID SCENARIOS**

Time: 20 minutes

FIRST AID SCENARIOS

ACTIVITY:



REFERENCES:

Course
Presentation:
Slides 117–136

Participant's
Manual:
Chapter 10

- Tell participants that they will now participate in two first aid scenarios that will require them to perform a secondary assessment.
- Explain that they will work in groups of three for each scenario. Some of the scenarios require one lifeguard, a child victim and a parent, whereas others assume that two lifeguards are providing care to one victim.
- Assign the scenarios randomly, such as through a drawing. A total of six scenarios are provided. It is acceptable for more than one group to complete the same scenario.
- Allow a few minutes for those playing the role of victim to review the signs and symptoms of the condition assigned using the *Lifeguarding Manual*.
- Explain that lifeguards should perform a secondary assessment and provide care for the conditions found.
- Be sure to have the appropriate equipment and supplies available for use in the scenarios, including personal protective equipment (PPE) and first aid supplies.
- After they have completed two scenarios, re-assemble the group and discuss the activity. Each group should:
 - Explain the scenario.
 - Describe initial steps taken, such as calling for backup coverage if necessary.
 - Describe the injury or illness, including signs and symptoms.
 - Explain the care steps provided, including summoning EMS personnel if appropriate.
 - Explain any follow-up instructions given to the victim.

Scenario 1: You are on duty lifeguarding at an outdoor pool. A child comes to you saying that they were just in the concession area eating a snack when they were stung by a bee. The child's parent is swimming laps in the adult lap swim lane.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Signal to obtain backup coverage for your zone. ■ Get the attention of the child's parent and obtain consent. ■ Ask if the child has a known allergy to bee stings.
Signs and Symptoms	<ul style="list-style-type: none"> ■ Pain ■ Redness or swelling ■ Possible presence of a stinger ■ Signals of an allergic reaction: <ul style="list-style-type: none"> ○ Rash or hives ○ Feeling of tightness in the chest and throat ○ Shortness of breath ○ Swelling of the face, neck or tongue
Care Steps	<ul style="list-style-type: none"> ■ Examine the sting site to see if the stinger is in the skin. If it is still present, remove the stinger by scraping it away with the edge of a plastic card, such as a credit card. ■ Wash the wound with soap and water. ■ Cover the site with a dressing and keep the wound clean. ■ Apply a cold pack to the site to reduce pain and swelling. ■ Watch the victim for signals of an allergic reaction. ■ Monitor the victim's condition and look for changes in LOC. ■ Keep the victim comfortable. ■ Summon EMS personnel for any life-threatening conditions, such as a breathing emergency.
Follow-Up	<ul style="list-style-type: none"> ■ Have the child remain in the first aid area for a few minutes and watch the child for signs of an allergic reaction. ■ Tell the child and parent to alert a lifeguard or other safety team member if symptoms get worse.

Scenario 2: You are on break when an adult tells you that a friend is not feeling well and needs help. The patron tells you that they are wearing a diabetic ID bracelet.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Obtain consent from the patron who is not feeling well.
Signs and Symptoms	<ul style="list-style-type: none"> ■ The patron told you they are not feeling well and their medical ID bracelet tells you of the condition.
Care Steps	<ul style="list-style-type: none"> ■ If the person is awake and can safely swallow and follow simple commands, give them sugar. ■ If it is available, give 15 to 20 grams of sugar in the form of glucose tablets to the victim. If not available, 15 to 20 grams of sugar from several sources can be given, including glucose- and sucrose-containing candies, jelly beans, orange juice or whole milk. ■ Summon EMS personnel if: <ul style="list-style-type: none"> ○ The person is or becomes unresponsive. ○ The person is responsive but not fully awake and is unable to swallow. ○ The person does not feel better within about 10 to 15 minutes after taking sugar, or gets worse. ○ A form of sugar cannot be found immediately. Do not spend time looking for it.
Follow-Up	<ul style="list-style-type: none"> ■ Ask the patron to remain there until they clearly feel better, at least 5 minutes. ■ Tell the person to alert a lifeguard or staff member if symptoms recur.

Scenario 3: You are on a break in the lifeguard room. Through the window, you notice a patron on the deck who appears to be having a seizure.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Activate the EAP.
Signs and Symptoms	<ul style="list-style-type: none"> ■ May last 1 to 3 minutes and can produce a wide range of signs and symptoms. ■ May lose consciousness and fall. ■ May become rigid and then experience sudden, uncontrollable muscular convulsions lasting several minutes. ■ Breathing may become irregular and even stop temporarily.
Care Steps	<ul style="list-style-type: none"> ■ Protect the person from injury by moving nearby objects away from the person. ■ Position the person on their side, if possible, after the seizure passes so that fluids (saliva, blood, vomit) can drain from the mouth. ■ Check to see if the person was injured during the seizure. ■ Summon EMS personnel if: <ul style="list-style-type: none"> ○ The seizure occurs in the water. ○ This is the person's first seizure. ○ The seizure lasts more than 5 minutes. ○ The person has repeated seizures with no lucid period. ○ The person appears to be injured. ○ The cause of the seizure is unknown. ○ The person is pregnant. ○ The person is known to have diabetes. ○ The person fails to regain consciousness after the seizure. ○ The person is elderly and may have suffered a stroke.
Follow-Up	<ul style="list-style-type: none"> ■ Stay with the person until they are fully conscious and aware of their surroundings. ■ Offer to let the person remain in a first aid area to rest.

Scenario 4: You are hosing down a section of the deck as part of your secondary responsibilities. A regular patron approaches and tries to ask you a question. Their speech seems impaired and you cannot understand what they are saying.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Activate the EAP. ■ Obtain consent if able to do so.
Signs and Symptoms	<ul style="list-style-type: none"> ■ Sudden change in how the body is working or feeling, such as sudden weakness or numbness of the face, an arm or a leg; often only on one side of the body ■ Difficulty with speech (trouble speaking and being understood and difficulty understanding others) ■ Blurred or dimmed vision ■ Sudden, severe headache, dizziness or confusion ■ Loss of balance or coordination ■ Trouble walking ■ Ringing in the ears
Care Steps	<ul style="list-style-type: none"> ■ Summon EMS personnel immediately. ■ Think FAST: <ul style="list-style-type: none"> ○ Face—Ask the person to smile. This will show if there is drooping or weakness in the muscles on one side of the face. Does one side of the face droop? ○ Arm—Ask the person to raise both arms to find out if there is weakness in the limbs. Does one arm drift downward? ○ Speech—Ask the person to speak a simple sentence to listen for slurred or distorted speech. Example: “The sky is blue.” Can the victim repeat the sentence correctly? ○ Time—Note the time that the signs and symptoms began and summon EMS personnel immediately.
Follow-Up	<ul style="list-style-type: none"> ■ Comfort and reassure the person until EMS personnel arrive. ■ Collect any of the person's belongings and give to EMS.

Scenario 5: You are on duty as a lifeguard. Your guard station is on the deck at the shallow end of the pool. An adult is exiting the pool using the ladder, then slips and hits their mouth on the railing. When you approach the victim, you notice that they are missing a tooth, which the victim is holding in their hand, and bleeding from the mouth.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Activate the EAP.
Signs and Symptoms	<ul style="list-style-type: none"> ■ Tooth is missing and the patron has it in their possession. ■ The patron is bleeding from the mouth.
Care Steps	<ul style="list-style-type: none"> ■ Rinse the victim's mouth with cold tap water, if available. ■ Have the victim lean slightly forward, or place the victim on their side. ■ Try to prevent the victim from swallowing the blood, which could cause nausea or vomiting. ■ Have the victim bite down on a rolled sterile dressing in the space left by the tooth. ■ Save the displaced tooth. ■ Carefully pick up the tooth by the crown (white part), not the root. ■ Place the tooth in a Hank's Balanced Salt Solution. If not available, place the tooth (in order of preference) in egg white, coconut water or whole milk. If none of these solutions are available, place the tooth in the victim's saliva (not in the mouth).
Follow-Up	<ul style="list-style-type: none"> ■ Advise the victim to get to a dentist with the tooth as soon as possible.

Scenario 6: You are on break when a concession worker comes to you and tells you help is needed. Another concession worker has been burned by hot oil from the popcorn machine.

Answers: Responses should include the following:

Initial Steps	<ul style="list-style-type: none"> ■ Obtain consent.
Signs and Symptoms	<ul style="list-style-type: none"> ■ Burned area on an arm and hand—red skin with blisters beginning to form
Care Steps	<ul style="list-style-type: none"> ■ Stop the burning by removing the person from the source of the burn. ■ Cool the burned area with large amounts of cool or cold tap water for at least 10 minutes. If cool or cold water is not available, use a cool or cold compress that is clean. Monitor the victim for hypothermia when cooling large burns. ■ Cover the burned area loosely with a sterile dressing. ■ Comfort and reassure the victim.
Follow-Up	<ul style="list-style-type: none"> ■ Advise the person to follow up with a doctor.

WHEN THINGS DO NOT GO AS PRACTICED

VIDEO:



REFERENCES:

Course
Presentation:
Slide 137
Participant's
Manual:
Chapter 6

- Explain to participants that the video segment will provide important information regarding the techniques to use when things do not go as practiced. The skills in this video will be practiced later in the water. They include:
 - Front and Rear Head-Hold Escapes
 - In-Water Ventilations
- Refer participants to the skill sheets in Chapter 6, Rescue Skills, in the *Lifeguarding Manual*.
- Show the video segment "When Things Do Not Go as Practiced."
- Answer participants' questions about the video segment.

IN WATER SKILL SESSION—WHEN THINGS DO NOT GO AS PRACTICED

SKILL PRACTICE:



REFERENCES:

Participant's
Manual:
Chapter 6

- Explain to participants that during the skill session you will demonstrate skills and guide them through practice.
- Pair up participants and explain that they will take turns as a victim and a rescuer for each skill.
- For each skill, organize them so that they can clearly see and hear. Be sure to provide any instructions related to their position or how they should behave as victims.
- Lead them through a land demonstration and practice for the following skills:
 - Front Head-Hold Escape
 - Lifeguards: deep water, facing victim
 - Victims: deep water
 - Rear Head-Hold Escape
 - Lifeguards: deep water, back to victim
 - Victims: deep water
 - In-Water Ventilations—Shallow Water (simulate ventilations)
 - Lifeguards: standing in shallow water
 - Victims: passive
 - In-Water Ventilations—Deep Water (simulate ventilations)
 - Lifeguards: treading in deep water
 - Victims: passive

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, participants will practice the front and rear head-hold escapes in shallow water.
- Omit the in-water ventilations—deep water when teaching the Shallow Water Lifeguarding course.
- Participants should practice the skills until they are able to meet performance criteria.
- Observe each participant's performance of the skill and provide corrective feedback.

TOPIC: IN-WATER SKILL SESSION—RESCUE SKILLS REVIEW

Time: 45 minutes

IN-WATER SKILL SESSION—RESCUE SKILLS REVIEW

SKILL PRACTICE:



REFERENCES:
Participant's
Manual:
Chapter 6

- Designate three stations for review skills and divide participants into three groups.
- Count off participants as “ones” and “twos” so that you can easily assign roles at each station and for each skill practice.
- Participants will practice the rescues as many times as possible in about a 5-minute period.
- Rotate groups every 5 to 7 minutes.
- Observe participants and provide feedback as they practice the following skills:
 - Shallow Water
 - Submerged Passive Victim
 - Deep Water
 - Passive Victim on the Surface—Front Approach
 - Passive Victim on the Surface—Rear Approach
 - Deep Water
 - Submerged Passive Victim
 - Extrication Using a Backboard at the Pool Edge
 - Multiple-Rescuer Response Scenarios (Appendix B):
 - Scenario 5
 - Scenario 6



Instructor's Note: *Participants will not be required to participate in each role during the multiple-rescuer response scenario final skills evaluation.*

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, participants will practice the front and rear head-hold escapes in shallow water.
- Participants will practice the rescues as many times as possible in about a 5-minute period.
- Rotate groups every 5 to 7 minutes.
- Stations:
 - Passive Victim
 - Submerged Passive Victim
 - Passive Victim on the Surface—Rear Approach
 - Passive Victim on the Surface—Front Approach
 - Extrication Using a Backboard at the Pool Edge
 - Distressed Swimmer
 - Simple Assist for a Distressed Swimmer
 - Reaching Assist from the Deck for a Distressed Swimmer
 - Multiple-Rescuer Response Scenarios (Appendix B)
 - Scenario 5
 - Scenario 6

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slide 138

- When following the extended outline, instruct participants to complete the following assignments prior to the next in-person session.
 - Complete eLearning Module 8: Head, Neck and Spinal Injuries.
 - Read Chapter 10: Caring for Head, Neck and Spinal Injuries in the *Lifeguarding Manual*.
- Remind participants to prepare for the CPR/AED for Professional Rescuers and First Aid online exam by reviewing chapters 7 through 10 in the *Lifeguarding Manual*. The online exam is part of the eLearning conclusion module and must be completed prior to attending the last in-person session.
 - Participants will have two attempts to complete the exam before the conclusion module locks.
 - If participants are unsuccessful at both attempts, the conclusion module will lock and participants will be prevented from accessing the final exam for 24 hours. Participants should use this time to review the *Lifeguarding Manual* and eLearning Modules 7 through 10 prior to reattempting the CPR/AED for Professional Rescuers and First Aid Final Exam.

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill. Assessment criteria that are general for the category of skills, as well as specific to the skill, must be met.

SECONDARY ASSESSMENT

SKILL CHART: USING SAMPLE TO TAKE A BRIEF MEDICAL HISTORY

Take a brief history using SAMPLE:

1. Signs and symptoms:
 - What happened?
 - Where do you feel any pain or discomfort?
 - Do you have any numbness or loss of sensation? If so, where?
2. Allergies:
 - Do you have any allergies, such as to medications or food? If so, what type of reactions have you experienced when you were exposed?
3. Medications:
 - Do you have any medical conditions or are you taking any medications? If so, what conditions do you have or what medications are you taking?
 - Have you taken any medications in the past 12 hours?
4. Pertinent past medical history:
 - Have you recently been ill?
 - Do you have any medical conditions?
 - Have you experienced any recent falls, accidents or blows to the head?
 - Have you had surgery, been in a traumatic accident or had a medical emergency?
5. Last oral intake:
 - When did you last eat or drink?
 - What did you last eat or drink?
6. Events leading up to the incident:
 - What were you doing before the incident occurred?
 - What were you doing when the incident occurred?

SKILL CHART: CHECKING A RESPONSIVE PERSON

1. Check the head.
 - Look at the scalp, face, ears, eyes, nose and mouth for cuts, bumps, bruises and depressions.
 - Note if the victim has any changes in the level of consciousness, such as dizziness, or feels light-headed.
2. Check skin appearance and temperature.
 - Feel the victim's forehead with the back of your hand and note if the skin is cold or hot.
 - Look at the coloring of the victim's face and lips.
 - Look at the victim's skin and note if the skin is moist or dry or if it is red, pale, flushed or ashen.
3. Check the neck.
 - Ask the victim to move their head from side to side, if there is no discomfort and if an injury to the neck is not suspected.
 - Note pain, discomfort or inability to move.
4. Check the shoulders.
 - Ask the victim to shrug their shoulders.
5. Check the chest and abdomen.
 - Ask the victim to take a deep breath and blow air out.
 - Listen for difficulty or changes in breathing.
 - Ask the victim if they are experiencing pain during breathing.
6. Check the arms.
 - Check one arm at a time.
 - Ask the victim to move their hand and fingers and to bend the arm.
7. Check the legs.
 - Check one leg at a time.
 - Ask the victim to move their foot and toes and to bend the leg.
8. Provide care for any conditions found.
9. Have the victim rest in a comfortable position if they can move all body parts without pain or discomfort and have no other apparent signs or symptoms of injury or illness. Continue to watch for changes in consciousness and breathing.

SKILL ASSESSMENT TOOL: USING SAMPLE TO TAKE A BRIEF MEDICAL HISTORY

Criteria	Proficient	Not Proficient
Asks questions to determine a brief history	<ul style="list-style-type: none"> ■ Gathers information about what happened, possible signs and symptoms or brief medical history 	<ul style="list-style-type: none"> ■ Does not ask any questions ■ Does not ask questions about what happened, possible signs and symptoms or brief medical history
Checking a Conscious Person		
Checks for signs and symptoms of injuries or sudden illnesses	<ul style="list-style-type: none"> ■ Visual inspection from head to toe looking carefully for any bleeding, cuts, bruises and obvious deformities 	<ul style="list-style-type: none"> ■ Does not perform an assessment ■ Does not recognize obvious signs or symptoms
Checks for medical conditions that may need to be considered	<ul style="list-style-type: none"> ■ Visual inspection looking for a medical ID tag, necklace or bracelet 	<ul style="list-style-type: none"> ■ Does not look for medical ID tag, necklace or bracelet
Monitors the person's condition	<ul style="list-style-type: none"> ■ Watches for changes in consciousness or breathing 	<ul style="list-style-type: none"> ■ Does not look at victim

CONTROLLING EXTERNAL BLEEDING

SKILL CHART: CONTROLLING EXTERNAL BLEEDING

1. Control any bleeding.
2. Place a sterile dressing over the wound.
3. Apply direct pressure until bleeding stops.
4. Clean the wound thoroughly with soap (if available) and water. If possible, irrigate an abrasion with clean, warm, running tap water for about 5 minutes to remove any dirt and debris.
5. If bleeding continues, use a new sterile dressing and apply more pressure.
6. After bleeding stops, remove the dressing and apply wound gel or an antibiotic ointment to the wound, if one is available, the victim has no known allergies or sensitivities to the medication and local protocols allow you to do so.
7. Cover the wound with a sterile dressing and bandage (or with an adhesive bandage).
8. Wash your hands immediately after providing care.

SKILL ASSESSMENT TOOL: CONTROLLING EXTERNAL BLEEDING

Criteria	Proficient	Not Proficient
Uses personal protective equipment	<ul style="list-style-type: none"> ■ Puts on disposable gloves before covering wound 	<ul style="list-style-type: none"> ■ Does not put on disposable gloves ■ Puts on disposable gloves after covering wound
Covers the wound with a (sterile) dressing and applies direct pressure until bleeding stops	<ul style="list-style-type: none"> ■ Places dressing over wound ■ Applies pressure to wound ■ Secures dressing in place with roller gauze 	<ul style="list-style-type: none"> ■ Places dressing away from wound area ■ Does not apply pressure ■ Uses pressure points instead of direct pressure ■ Roller gauze does not stay in place
Applies additional dressings and more direct pressure (if bleeding does not stop)	<ul style="list-style-type: none"> ■ Visual inspection looking for a medical ID tag, necklace or bracelet 	<ul style="list-style-type: none"> ■ Does not look for medical ID tag, necklace or bracelet
Monitors the person's condition	<ul style="list-style-type: none"> ■ Adds additional dressings to initial dressing ■ Applies pressure to wound 	<ul style="list-style-type: none"> ■ Removes initial dressing ■ Does not add additional dressings ■ Does not apply pressure

WHEN THINGS DO NOT GO AS PRACTICED

SKILL CHART: FRONT HEAD-HOLD ESCAPE

1. As soon as the victim grabs hold, take a quick breath, tuck your chin down, turn your head to either side, raise your shoulders and submerge with the victim.
2. Once under water, grasp the victim's elbows or the undersides of the victim's arms just above the elbows.
3. Forcefully push up and away. Keep your chin tucked, your arms fully extended and your shoulders raised until you are free.
4. Quickly swim under water, out of the victim's reach. Surface and reposition the rescue tube and try the rescue again.

SKILL CHART: REAR HEAD-HOLD ESCAPE

1. Take a quick breath, tuck your chin down, turn your head to either side, raise your shoulders and submerge with the victim.
2. Once under water, grasp the victim's elbows or the undersides of the victim's arms just above the elbows.
3. Forcefully push up and away while twisting your head and shoulders. Keep your chin tucked, your arms fully extended and your shoulders raised until you are free.
4. Quickly swim under water out of the victim's reach. Surface and reposition the rescue tube and try the rescue again.

SKILL ASSESSMENT TOOL: ESCAPES

Criteria	Proficient	Not Proficient
Releases the victim's hold	■ Presses victim's arms up and pushes victim away	■ Does not release the victim's hold
Swims away to safety	■ Swims under water to a safe distance from the victim	■ Victim grabs rescuer again
Re-attempts the rescue	■ Repositions the rescue tube and attempts to rescue the victim again	■ Does not re-attempt a rescue

IN-WATER VENTILATIONS

SKILL CHART: IN-WATER VENTILATIONS

1. Ensure that the rescue tube is placed under the victim so the victim's head naturally falls back to an open-airway position.
2. From behind the victim's head, position the resuscitation mask, seal the mask and open the airway.
3. Give ventilations.
4. Remove the victim from the water as soon as conditions allow, then immediately resume providing care.



Instructor's Note: *Remind participants not to give ventilations but rather to simulate ventilations on their partner.*

Criteria	Proficient	Not Proficient
Opens the airway	■ Performs a jaw-thrust maneuver	■ Does not open the airway by using a jaw-thrust maneuver
Seals mask and gives simulated ventilations	■ Properly seals mask and simulates ventilations	■ Mask is not properly sealed ■ Simulated ventilations are not given

HEAD, NECK AND SPINAL INJURIES IN THE WATER

Lesson Length: 2 hours, 25 minutes

Shallow Water Lifeguarding Lesson Length: 2 hours, 15 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this session and meet the lesson objectives, you must:

- Discuss all points in the topic Caring for Head, Neck and Spinal Injuries in the Water.
- Complete the skill practice Spinal Injuries—Shallow Water.
- Complete the skill practice Spinal Injuries—Deep Water.

LESSON OBJECTIVES

- Demonstrate how to care for victims with head, neck and spinal injuries in shallow and deep water.
- Demonstrate how to care for victims with head, neck and spinal injuries in shallow water only (Shallow Water Lifeguarding and Aquatic Attraction Lifeguarding).

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Rescue tubes (one for every two participants)
- Backboards, each equipped with one strap and head immobilizer (one for every three participants)

LESSON PREPARATION

- To save time, have all equipment and supplies prepared and available on the pool deck.



INSTRUCTOR NOTES

- When following the extended outline, remind participants to present the eLearning component completion certificates they received when they completed eLearning Module 8: Head, Neck and Spinal Injuries.
- A facility with a low edge is preferred when practicing the spinal backboarding procedure, but if the facility has a large gap between the pool edge and the surface of the water, an additional participant may be used to stabilize the backboard by holding the backboard (on the opposite side of the rescuing lifeguard). This allows participants to simulate the technique for practice. Remind participants that this is not a different backboarding technique and that the additional participant is not in the role of an assisting rescuer and should not help to secure or extricate the victim.
- When practicing deep water spinal backboarding procedure, participants only need to practice as the rescuing lifeguard. There is no need to have participants rotate to different positions.

TEACHING TIPS

- You must be able to observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Set up groups so that you can observe each group, but allow enough room for the groups to conduct the skills and scenarios without disrupting each other or causing injury.

TOPIC: CARING FOR HEAD, NECK AND SPINAL INJURIES IN THE WATER

Time: 5 minutes

CARING FOR HEAD, NECK AND SPINAL INJURIES IN THE WATER

GUIDED DISCUSSION:



REFERENCES:

Course
Presentation:
Slides 141–144

Participant's
Manual:
Chapter 11



Science Note: Reassessment of protocols has shown that packaging a victim can be detrimental. They often will lie on spine boards for hours in the emergency room which causes anxiety and can cause physical damage. Research indicates that the damage has likely already occurred with the initial injury. The focus for lifeguards should be on safely extricating the person from the water while maintaining stabilization. Studies have shown that the application of cervical collars can cause further injury.

- **You should suspect a possible head, neck or spinal injury only if the activity was high-impact or high-risk and the signs or symptoms of injury are present.**
- **Ask participants: What are some examples of high-impact/high-risk activities in aquatic environments?**
Answers: Responses should include:
 - Entering head-first into shallow water.
 - Falling from greater than a standing height.
 - Entering the water from a height, such as a diving board, water slide, embankment, cliff or tower.
 - Striking a submerged or floating object.
 - Receiving a blow to the head.
 - Colliding with another swimmer.
 - Striking the water with high impact, such as falling while water skiing or surfing.
- **Ask participants: What signs and symptoms might indicate a possible head, neck or spinal injury?**
Answers: Responses should include:
 - Unusual bumps, bruises or depressions on the head, neck or back
 - Heavy external bleeding of the head, neck or back
 - Bruising of the head, especially around the eyes and behind the ears
 - Blood or other fluids in the ears or nose
 - Confusion or disorientation
 - Changes in level of consciousness
 - Seizures
 - Impaired breathing
 - Impaired vision
 - Nausea or vomiting
 - Partial or complete loss of movement of any body part
 - Loss of balance
 - Behavior similar to that of a person under the influence of alcohol or drugs (e.g., confusion, stumbling, repeatedly asking the same questions, memory loss, nausea or vomiting, speech problems)
 - Severe pain or pressure in the head, neck or back (reported by the person, or indicated by the person holding their head, neck or back)
 - Back pain, weakness, tingling or loss of sensation in the hands, fingers, feet or toes
 - Persistent headache

TOPIC: **IN-WATER SKILL SESSION: HEAD, NECK AND SPINAL INJURIES**

Time: 2 hours, 20 minutes

SKILL PRACTICE: SPINAL INJURIES—SHALLOW WATER

SKILL
PRACTICE—
SHALLOW
WATER:



REFERENCES:

Course
Presentation:
Slides 145
Participant's
Manual:
Chapter 11

- Ask participants: **What questions do you have about the “Head, Neck and Spinal Injuries in the Water” video?**
- Explain to participants that during the skill session you will demonstrate skills and guide them through practice.
- For the first three skills, pair up participants and explain that they will take turns as victim and rescuer for each skill. For the shallow water backboarding procedure, divide participants into groups of three—a rescuing lifeguard, assisting responder and victim. Each group should practice the backboarding procedure at least two times so that all participants have the opportunity be in the role of rescuing lifeguard.
- For each skill, organize participants so that they can clearly see and hear. Be sure to provide any instructions related to their position in the water or how they should behave as victims.
- Prior to the spinal backboarding procedure, remind participants that backboards, straps and head immobilizers may vary at different facilities. When employed as a lifeguard, they should expect to be trained on the use of the backboard as part of a new employee orientation and in-service training.
- Lead participants through the following Shallow water skills:
 - Over-Arm Head Splint—Face-Up Victim At or Near the Surface in Shallow Water
 - Lifeguards: in shallow water
 - Victims: face-up in shallow water, responsive
 - Head Splint—Face-Down Victim At or Near the Surface in Shallow Water
 - Lifeguards: in shallow water
 - Victims: face-down in shallow water, responsive once face-up at surface
 - Spinal Backboarding Procedure
 - Lifeguards: in shallow water
 - Victims: face-down in shallow water, responsive once face-up at surface
 - Spinal Backboarding Procedure—For Facilities with High Edges
 - Lifeguards: in shallow water
 - Victims: face-down in shallow water, responsive once face-up at surface
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: rescuers lose contact with the victim; fails to properly secure victim to the backboard; use of the improper head splint technique; for a submerged victim—not returning to the surface at an angle; check for breathing; incorrect strap placement; strap is too tight or too loose; not placing the victim's arms on their body; failure to communicate with the victim.

SKILL PRACTICE: SPINAL INJURIES—DEEP WATER

SKILL
PRACTICE—
DEEP WATER:



REFERENCES:

Participant's
Manual:
Chapter 11

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, omit the skill practice in deep water.

- Explain to participants that during the skill session you will demonstrate skills and guide them through practice.
- For the first two skills, pair up participants and explain that they will take turns as victim and rescuer for each skill. For the deep water backboarding procedure, divide participants into groups of three—a rescuing lifeguard, assisting responder and victim. Each group should continue to practice the backboarding procedure until all participants have had the opportunity to be in the role of rescuing lifeguard.
- Remind participants that the mechanics of the skills are essentially the same in deep water as in shallow water. The skills are more challenging because lifeguards are unable to stand to accomplish the skills. A rescue tube can be used to provide additional support to the rescuing lifeguard.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- For each skill, organize participants so that they can clearly see and hear. Be sure to provide any instructions related to their position in the water or how they should behave as victims.
- Lead participants through the following deep water skills:
 - Head Splint—Face-Down Victim at or Near the Surface in Deep Water
 - Lifeguards: in deep water
 - Victims: face-down in deep water, responsive once face-up at surface
 - Head Splint—Submerged Victim in Deep Water
 - Lifeguards: in deep water
 - Victims: submerged in deep water, responsive once face-up at surface
 - Spinal Backboarding Procedure
 - Lifeguards: in deep water
 - Victims: face-down in deep water, responsive once face-up at surface



Instructor's Note: A facility with a low edge is preferred when practicing the spinal backboarding procedure, but if the facility has a large gap between the pool edge and the surface of the water, an additional participant may be used to stabilize the backboard by holding the backboard (on the opposite side of the rescuing lifeguard). This allows participants to simulate the technique for practice. Remind participants that this is not a different backboarding technique and that the additional participant is not in the role of an assisting rescuer and should not help to secure or extricate the victim.

- Participants should practice the skills until they are able to meet performance criteria.
- Observe each participant's performance of the skill and provide global and individual feedback during skill practice to correct common mistakes or commend correct skill practice.
- Examples of common errors to point out include: rescuers lose contact with the victim; failure to properly secure victim to the backboard; using the improper head splint technique; for a submerged victim—not returning to the surface at an angle; check for breathing; incorrect strap placement; strap is too tight or too loose; not placing the victim's arms on their body; failure to communicate with the victim.

ASSIGNMENT

ACTIVITY:



REFERENCES:

Course
Presentation:
Slide 146

- Remind participants to prepare for the Lifeguarding Skills Final Written Exam by reviewing Chapters 1 to 6 and Chapter 11 of the *Lifeguarding Manual*.
- When following the extended outline, instruct participants to complete the eLearning conclusion which contains the CPR/AED for Professional Rescuers and First Aid Final Written Exam.

SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill. Assessment criteria that are general for the category of skills, as well as specific to the skill, must be met.

IN-LINE STABILIZATION—IN-WATER

SKILL CHART: HEAD SPLINT—FACE-UP VICTIM AT OR NEAR THE SURFACE

1. Approach the victim from the side.
 - In deep water, use the rescue tube under both of your arms for support.
2. Grasp the victim's arms midway between their shoulder and elbow. Grasp the victim's right arm with your left hand and the victim's left arm with your right hand. Gently move the victim's arms up alongside the head.
3. Slowly and carefully squeeze the victim's arms against their head to help hold the head in line with the body. Do not move the victim any more than necessary.
4. Quickly look, listen and feel to check for breathing if the victim is unresponsive.
 - If the victim is not breathing, immediately remove the victim from the water using the passive victim extrication method and provide resuscitative care. Do not delay removing the victim from the water by using the spinal backboarding procedure.
 - If the victim is breathing, hold the victim's the head in line with the body and move toward safety until the backboard arrives. In deep water, move the victim to shallow water, if possible.
5. Continuously monitor for responsiveness and breathing. If at any time the victim stops breathing, immediately remove the victim from the water and then provide appropriate care.

SKILL CHART: HEAD SPLINT—FACE-DOWN VICTIM AT OR NEAR THE SURFACE

1. Approach the victim from the side.
 - In deep water, use the rescue tube under both of your arms for support.
2. Grasp the victim's arms midway between the shoulder and elbow. Grasp the victim's right arm with your right hand and the victim's left arm with your left hand. Gently move the victim's arms up alongside the head.
3. Squeeze the victim's arms against their head to help hold the head in line with the body.
4. Glide the victim slowly forward.
 - Continue moving slowly and turn the victim until they are face-up. To do this, push the victim's arm that is closest to you under the water while pulling the victim's other arm across the surface toward you.
5. Quickly look, listen and feel to check for breathing if the victim is unresponsive.
 - If the victim is not breathing, immediately remove the victim from the water using the passive victim extrication method and provide resuscitative care. Do not delay removing the victim from the water by using the spinal backboarding procedure.
 - If the victim is breathing, hold the victim's the head in line with the body and move toward safety until the backboard arrives. In deep water, move the victim to shallow water, if possible.
6. Switch to an overarm head splint position as you near the backboard. Position the victim's head in the crook of your arm, with the head in line with the body. To switch to an overarm head splint:
 - Apply firm pressure with your outside arm to pull the victim toward your chest (hug them in against your chest).
 - Release your hand that is holding the arm against your chest and reach over the victim and grab the victim's outside arm, placing it next to your other hand.
 - Release your hand that is under the victim and move it to the victim's arm that is against your chest and continue to apply pressure.
7. Continue to check for breathing. If at any time the victim stops breathing, immediately remove the victim from the water, then provide appropriate care.

SKILL CHART: HEAD SPLINT—SUBMERGED VICTIM

1. Approach the victim from the side. In deep water, release the rescue tube if the victim is more than an arm's reach beneath the surface.
2. Grasp the victim's arms midway between the shoulder and elbow. Grasp the victim's right arm with your right hand and the victim's left arm with your left hand. Gently move the victim's arms up alongside the head.
3. Squeeze the victim's arms against their head to help hold the head in line with the body.
4. Turn the victim face-up while bringing the victim to the surface at an angle. To turn the victim face-up, push the victim's arm that is closest to you down and away from you while pulling the victim's other arm across the surface toward you. The victim should be face-up just before reaching the surface or at the surface.
5. Quickly look, listen and feel to check for breathing if the victim is unresponsive.
 - If the victim is not breathing, immediately remove the victim from the water using the passive victim extrication method and provide resuscitative care. Do not delay removing the victim from the water by using the spinal backboarding procedure.
 - If the victim is breathing, hold the victim's the head in line with the body and move toward safety until the backboard arrives. In deep water, move the victim to shallow water, if possible.
6. Switch to an over-arm head splint position as you near the backboard. Position the victim's head close to the crook of your arm with the head in line with the body. Another lifeguard can place a rescue tube under your armpits to help support you and the victim. To switch to an overarm head splint:
 - Apply firm pressure with your outside head to pull the victim toward your chest (hug them in against your chest).
 - Release your hand that is holding the arm against your chest and reach over the victim and grab the victim's outside arm, placing it next to your other hand.
 - Release your hand that is under the victim and move it to the victim's arm that is against your chest and continue to apply pressure.
7. Continue to check for breathing. If at any time the victim stops breathing, immediately remove the victim from the water, then provide appropriate care.

SKILL CHART: HEAD SPLINT—FACE-UP IN EXTREMELY SHALLOW WATER

1. Approach the victim's head from behind. Grasp the victim's right arm with your right hand and the victim's left arm with your left hand, trapping the victim's head between their arms.
2. Gently move the victim's arms up alongside their head.
3. Squeeze the victim's arms against their head to help hold the head in line with the body. Remain positioned above and behind the victim's head.
4. Quickly look, listen and feel to check for breathing if the victim is unresponsive.
 - If the victim is not breathing, immediately remove the victim from the water and provide resuscitative care.
 - If the victim is breathing, hold the victim in this position. Place a towel or blanket on the victim to keep them from getting chilled.
5. Continue to check for breathing. If at any time the victim stops breathing, immediately remove the victim from the water, then provide appropriate care.

Note: If you are unable to keep the victim from getting chilled and there are enough assisting lifeguards, follow the care steps for skill sheet, *Spinal Backboarding Procedure—Speed Slide*.

SKILL CHART: HEAD SPLINT—FACE-DOWN IN EXTREMELY SHALLOW WATER

1. Approach the victim from the side. Grasp the victim's right arm with your right hand and the victim's left arm with your left hand, holding the victim's head between their arms.
2. After the victim's head is secured between their arms, begin to roll the victim toward you.
3. While rolling the victim, step from the victim's side toward the victim's head and begin to turn the victim face-up.
4. Lower your arm on the victim's side that is closest to you so that the victim's arms go over the top of your arm as you step toward the victim's head. Maintain arm pressure against the victim's head, since your hand rotates during this maneuver. You are now positioned above and behind the victim's head.
5. Quickly look listen and feel to check for breathing if the victim is unresponsive.
 - If the victim is not breathing, immediately remove the victim from the water and provide resuscitative care.
 - If the victim is breathing, hold the victim in this position. Place a towel or blanket on the victim to keep them from getting chilled.
6. Continue to check for breathing. If at any time the victim stops breathing, immediately remove the victim from the water, then provide appropriate care.

Note: If you are unable to keep the victim from getting chilled and there are enough assisting lifeguards, follow the care steps for skill sheet, *Spinal Backboarding Procedure and Removal—Speed Slide*.

SKILL ASSESSMENT TOOL: HEAD SPLINT—IN-LINE STABILIZATION FOR A VICTIM IN THE WATER

Criteria	Proficient	Not Proficient
Check for responsiveness and breathing	<ul style="list-style-type: none"> ■ Quickly looks, listens and feels for breathing ■ If the victim is not breathing, removes the victim from water immediately to provide care using a passive victim extrication technique 	<ul style="list-style-type: none"> ■ Does not look, listen or feel for breathing ■ If the victim is not breathing, uses the spinal backboarding procedure to extricate the victim
Provide in-line stabilization	<ul style="list-style-type: none"> ■ Moves victim's arms to a secure position against the victim's head ■ Equal pressure on both arms is maintained throughout rescue ■ Transitions to an overarm head splint (for face-down victims) while maintaining in-line stabilization 	<ul style="list-style-type: none"> ■ Does not move victim's arms against the victim's head or maintain pressure ■ One arm is pressed against head and one is not ■ Does not transition to an overarm head splint (for face-down victims) or does not maintain in-line stabilization during the transition
Victim's face remains out of the water	<ul style="list-style-type: none"> ■ Victim's face does not submerge ■ Mouth and nose are above water 	<ul style="list-style-type: none"> ■ Victim's face submerges under water ■ Victim's mouth or nose is under water
Move victim to a safe location to prepare for backboarding	<ul style="list-style-type: none"> ■ Moves victim to shallow water if safe and possible ■ If rescue involves moving water, moves victim to a sheltered area 	<ul style="list-style-type: none"> ■ Does not move to shallow water to stand up if it is safe and possible ■ Remains in moving water when access to a sheltered area is possible

SPINAL BACKBOARDING AND EXTRICATION FROM WATER

SKILL CHART: SPINAL BACKBOARDING PROCEDURE

1. The rescuing lifeguard provides in-line stabilization using the head splint technique and swims with the victim toward the side of the pool.
 - Rotate the victim to a face-up position if necessary. Use the overarm head splint technique to maintain in-line stabilization before reaching the side of the pool.
2. The assisting responder(s) on deck brings the backboard to the edge of the water and removes the head immobilizer, placing it within reaching distance.
3. The assisting responder(s) on deck places the board at an angle in the water, submerging the head space of the board if possible.
4. The rescuing lifeguard now approaches the board and moves to the side of it. The rescuing lifeguard then places one foot (steps on) the end of the backboard to hold it down.
5. The rescuing lifeguard places the victim on the center of the backboard with the head on the designated head space.
6. With the head of the backboard resting on the pool edge, the assisting responder stabilizes the board by pressing down on it with both elbows and stabilizes the victim by placing both hands on the victim's arms and applying pressure, using the head splint and the rescuing lifeguard can release the arms.
 - A rescue tube may be quickly placed under the foot end of the board, if needed for support.
7. The rescuing lifeguard secures one strap across the victim's chest, under the armpits, and then stabilizes the victim by placing one hand and arm on the victim's chin and chest and the other hand and arm under the backboard. The assisting responder then releases the victim's arms and lowers the victim's arms down and secures the victim's head to the backboard using a head immobilizer and strap across the forehead.
 - The rescuers should place the victim's arms on the victim's torso to prevent discomfort or injury during extrication.
8. The rescuing lifeguard moves to the foot end of the board while the assisting responder holds the backboard at the head of the board from the pool deck.
9. The assisting responder lifts the head of the backboard so the runners are on the deck.
10. Working together, the lifeguards pull and push the backboard onto the deck, then begin to assess the victim's condition and providing the appropriate care.

SKILL CHART: SPINAL BACKBOARDING PROCEDURE—HIGH EDGES

1. The rescuing lifeguard provides in-line stabilization using the head splint technique and swims with the victim toward the side of the pool.
 - Rotate the victim to a face-up position if necessary.
 - Use the overarm head splint technique to maintain in-line stabilization before reaching the side of the pool.
2. The assisting responder(s) on deck brings the backboard to the edge of the water and removes the head immobilizer, placing it within reaching distance.
3. The assisting lifeguard enters the water, submerges the backboard and positions the board under the victim so that it extends slightly beyond the victim's head. The victim's head should be centered on the backboard's head space.
4. Once the backboard is in place, the assisting rescuer places a rescue tube under the head end of the backboard for support and then the assisting responder maintains stabilization of the victim's head by placing both hands on the victim's arms and applying pressure, using the head splint technique and the rescuing lifeguard can release the arms.
5. The rescuing lifeguard secures the victim to the backboard by securing the chest strap high across the victim's chest and under the victim's armpits. The rescuing lifeguard then stabilizes the victim by placing one hand and arm on the victim's chin and chest and the other hand and arm under the backboard.
6. The assisting responder then releases the victim's arms and lowers the victim's arms down and secures the victim's head to the backboard using a head immobilizer and strap across the forehead.
7. The rescuing lifeguard gets out of the water and grasps the handholds of the backboard while the assisting responder maintains control of the backboard from in the water.
8. Working together, the lifeguards pull and push the backboard onto the deck, then begin to assess the victim's condition and provide the appropriate care.

SKILL CHART: SPINAL BACKBOARDING PROCEDURE—SPEED SLIDE

1. The rescuing lifeguard (Lifeguard 1) approaches the victim's head from behind to stabilize the victim by performing a head splint:
 - Grasp the victim's right arm with your right hand and the victim's left arm with your left hand. Gently move the victim's arms up to trap the victim's head between their arms.
 - Squeeze the victim's arms against their head to help hold the head in line with the body. Remain positioned above and behind the victim's head.
2. Check for responsiveness and breathing.
 - If the victim is not breathing, immediately remove the victim from the water and give the appropriate care.
 - If the victim is breathing, hold the victim in this position. Place a towel or blanket on the victim to keep them from getting chilled.
3. Lifeguard 2 positions themselves at the side of the victim, even with the victim's waist and grasps the victim at the hip and knee while Lifeguard 3 takes the backboard to the opposite side of the victim.
4. Lifeguard 1 signals to Lifeguard 2 (by counting 1-2-3) to roll the victim to their side; when the victim is on their side, Lifeguard 3 places the backboard in line with the victim.
5. Lifeguard 1 counts to signal (by counting 1-2-3) and the victim is rolled on to the backboard.
6. Lifeguard 2 secures the victim to the backboard by securing the chest strap high across the victim's chest and under the victim's armpits. Lifeguard 2 then stabilizes the victim by placing one hand and arm on the victim's chin and chest and the other hand on the side of the backboard.
7. Lifeguard 1 releases the victim's arms, lowers the victim's arms down and secures the victim's head to the backboard using a head immobilizer and strap across the forehead.
 - Lifeguard 3 can assist by handing the head immobilizer to Lifeguard 1 and/or placing the forehead strap on the head immobilizer.
8. Lifeguards lift the backboard and victim out of the slide.
 - When available, additional rescuers can assist with lifting and moving the victim.

SKILL ASSESSMENT TOOL: SPINAL BACKBOARDING PROCEDURE

Criteria	Proficient	Not Proficient
Maintain in-line stabilization before victim is placed on backboard	<ul style="list-style-type: none"> Rescuing lifeguard maintains in-line stabilization while moving the victim toward the side of the pool 	<ul style="list-style-type: none"> Loss of in-line stabilization during the rescue Loss of contact with the victim
Victim's face remains out of the water	<ul style="list-style-type: none"> Victim's face does not submerge Mouth and nose are above water 	<ul style="list-style-type: none"> Victim's face submerges under water Victim's mouth or nose is under water
Position the victim on the backboard	<ul style="list-style-type: none"> Assisting responder(s) on deck bring the backboard to the edge of the water and removes head immobilizer Assisting responder(s) place the board in the water at an angle, submerging the head space of the board The rescuing lifeguard approaches the board and moves to the side of the board while placing the victim on the board The victim is placed on the center of the board with their head on the designated headspace 	<ul style="list-style-type: none"> Assisting responder(s) are not able to place the board in the water and keep it steady Assisting responder(s) do not remove the head immobilizer from the backboard before placing the board in the water Lifeguards fail to communicate Victim's head is not aligned on the backboard's head space Victim is not aligned and on the backboard
Maintain in-line stabilization after the victim is placed on the board	<ul style="list-style-type: none"> Assisting responder stabilizes the board and takes over in-line stabilization using the head splint 	<ul style="list-style-type: none"> Loss of contact with the victim or loss of in-line stabilization Loss of control of the board
Secure strap	<ul style="list-style-type: none"> Rescuing lifeguard secures one strap high across the victim's chest, under the victim's armpits 	<ul style="list-style-type: none"> Improper strap placement Straps are too loose or too tight
Immobilize the victim's head	<ul style="list-style-type: none"> Rescuing lifeguard takes over in-line stabilization Assisting responder secures the victim's head to the backboard using a head immobilizer and strap across the victim's forehead 	<ul style="list-style-type: none"> Loss of contact with the victim Head immobilizer is not used Head immobilizer is placed but moves victim's head or neck No strap is used across the victim's forehead
Extricate the victim from the water	<ul style="list-style-type: none"> Lifeguards communicate Rescuing lifeguard pushes from the foot of the board while assisting responder pulls 	<ul style="list-style-type: none"> Lifeguards fail to communicate Lifeguards are unable to remove the victim from the water Lifeguards lose control of the backboard

SKILL ASSESSMENT TOOL: SPINAL BACKBOARDING PROCEDURE—HIGH EDGES

Criteria	Proficient	Not Proficient
Maintain in-line stabilization before victim is placed on backboard	<ul style="list-style-type: none"> Rescuing lifeguard maintains in-line stabilization 	<ul style="list-style-type: none"> Loss of in-line stabilization during the rescue Loss of contact with the victim
Victim's face remains out of the water	<ul style="list-style-type: none"> Victim's face does not submerge Mouth and nose are above water 	<ul style="list-style-type: none"> Victim's face submerges under water Victim's mouth or nose is under water
Position the victim on the backboard	<ul style="list-style-type: none"> Assisting responder in the water removes head immobilizer from the backboard Assisting responder submerges the backboard under the victim so that it extends slightly beyond the victim's head The victim is placed on the center of the board with their head on the designated headspace 	<ul style="list-style-type: none"> Assisting responder does not remove the head immobilizer Assisting responder is not able to submerge the board in the water and keep it steady Victim's head is not aligned on the backboard's head space Victim is not aligned and on the backboard
Maintain in-line stabilization after the victim is placed on the board	<ul style="list-style-type: none"> Assisting responder stabilizes the board and takes over in-line stabilization 	<ul style="list-style-type: none"> Loss of contact with the victim or loss of in-line stabilization Loss of control of the board
Secure strap	<ul style="list-style-type: none"> Rescuing lifeguard secures one strap high across the victim's chest, under the victim's armpits 	<ul style="list-style-type: none"> Improper strap placement Straps are too loose or too tight
Immobilize the victim's head	<ul style="list-style-type: none"> Rescuing lifeguard takes over in-line stabilization Assisting responder secures the victim's head to the backboard using a head immobilizer and strap across the victim's forehead 	<ul style="list-style-type: none"> Loss of contact with the victim Head immobilizer is not used Head immobilizer is placed but moves victim's head or neck No strap is used across the victim's forehead
Extricate the victim from the water	<ul style="list-style-type: none"> Lifeguards communicate Assisting responder pushes from the foot of the board while the rescuing lifeguard pulls 	<ul style="list-style-type: none"> Lifeguards fail to communicate Lifeguards are unable to remove the victim from the water Lifeguards lose control of the backboard

SKILL ASSESSMENT TOOL: SPINAL BACKBOARD PROCEDURE—SPEED SLIDE		
Criteria	Proficient	Not Proficient
Lifeguards communicate as a team to remove the victim from the water	<ul style="list-style-type: none"> ■ Lifeguards communicate what, how or when actions happen 	<ul style="list-style-type: none"> ■ No verbal communication ■ Communication does not result in effective actions
Victim's face remains out of the water	<ul style="list-style-type: none"> ■ Victim's face does not submerge ■ Mouth and nose are above water 	<ul style="list-style-type: none"> ■ Victim's face submerges under water ■ Victim's mouth or nose is under water
Lifeguards remove the backboard and victim from the water	<ul style="list-style-type: none"> ■ Backboard removed from the water by sliding it along the edge ■ Backboard held steady during removal 	<ul style="list-style-type: none"> ■ Backboard is lifted in the air, causing the victim to move or slide ■ Backboard is near vertical, and victim is slipping or moving ■ Backboard is jerking or rocking from side to side

FINAL WRITTEN EXAM AND FINAL IN-WATER SKILL SCENARIOS

Lesson Length: 3 hours, 10 minutes
Add 30 minutes for optional review session

LESSON OBJECTIVES

- Demonstrate how to rescue a submerged passive victim in deep water and provide care.
- Demonstrate how to rescue a submerged passive victim in shallow water and provide care (Shallow Water Lifeguarding only).
- Demonstrate how to provide care during a multiple-rescuer response for a passive victim.

ADDITIONAL MATERIALS, EQUIPMENT AND SUPPLIES

- Final Written Exam: Section 2: Lifeguarding Skills, Exams A and B, and answer sheets—one for each participant
- Answer keys for Final Written Exam: Section 2
- Backboards—one for each test group
- Adult manikins—at least two so they can be rotated and decontaminated
- Decontamination supplies
- Adult BVMs—one for each test group
- Rescue tubes—one for each test group
- AED training unit with adult pads—one for each test group
- Timing device, such as a stopwatch or smartphone with a stopwatch feature

LESSON PREPARATION

- Be prepared to answer questions participants may have about the eLearning content and review questions they completed throughout the course.
- To save time, have all the appropriate copies and equipment and materials prepared and available ahead of time. Copy:
 - Final Exam Section 2—Lifeguarding Skills
 - Final Exam Answer Sheets Section 2—Lifeguarding Skills
 - Multiple-Rescuer Response Scenario Flow Sheets
 - Multiple-Rescuer Response Scenario Assessment Tool



INSTRUCTOR NOTES


- When following the extended outline, collect or view participants' eLearning completion certificates to ensure completion of all eLearning modules, including the CPR/AED for Professional Rescuers and First Aid eLearning exam.
- Participants must pass the CPR/AED for Professional Rescuers and First Aid eLearning exam in order for the progress report to show that they successfully completed the conclusion module of the eLearning.
- If a participant does not successfully complete the written exam, they should be counseled to study further before retaking another version of the written exam.
- For the Multiple-Rescuer Response Final Skill Scenario:
 - Each participant is only required to be evaluated successfully in the role of rescuing lifeguard. Although participants have successfully completed their scenario for evaluation, they may be needed to rotate into an additional team to have enough rescuers to participate in the scenario. It is not necessary to evaluate them in the additional role.
 - If an individual receives a "fail" in any skill of the scenario, they receive an overall "fail" rating. If the team receives a "fail" rating, each lifeguard on the team receives a "fail" rating. It is possible for the overall team to receive a "pass" rating but one of the lifeguards to receive a "fail." If a participant is unsuccessful, they are allowed to re-attempt the scenario.
- If a participant is unsuccessful in passing the course, have a private discussion with the participant about any course objectives that were not met.

TEACHING TIPS

- If you have enough equipment and supplies, allow participants to practice team response while you are conducting the final skills scenarios for other participants.
- If you have concerns about the ability of any of the participants to pass the skills scenarios, consider assigning them to participate in the first scenario in case they need additional practice to then participate in a retest.
- For tips on conducting Multiple-Rescuer Response Scenarios, and for an example of a scenario where the team is successful but an individual is unsuccessful, see the instructor videos on the Red Cross Learning Center.


TOPIC: **FINAL WRITTEN EXAM: SECTION 2—LIFEGUARDING SKILLS**

Time: 30 minutes

FINAL WRITTEN EXAM: SECTION 2—LIFEGUARDING SKILLS	
ACTIVITY: 	<ul style="list-style-type: none"> ■ Tell participants that they will now take Section 2 of the final written exam on the information covered in Chapters 1 through 6 and Chapter 11. They may not use their manual or notes to find the answers. ■ Hand out an exam and answer sheet to each participant. Tell participants to put away all belongings, including mobile devices, and to write only on the answer sheet and mark answers clearly.
	<p>SHALLOW WATER LIFEGUARDING</p> <ul style="list-style-type: none"> ■ If teaching the Shallow Water Lifeguarding course, hand out Final Written Exam: Section 2—Shallow Water Lifeguarding Skills and answer sheet to each participant. ■ Tell participants to come to you or raise their hand when they have finished the exam or if they have questions. ■ Once exams are completed, collect all exams and answer sheets. Grade the exam using the answer key. ■ Hand back the exam and review it with participants. Collect all exams again after the review, as the exam is a standard exam that participants should not be allowed to keep. Make arrangements for those participants who score less than 80 percent to review the material and retake the alternative version of the exam.

TOPIC: **IN-WATER SKILL SESSION: GENERAL WATER SKILLS (OPTIONAL)**

Time: 30 minutes

IN-WATER SKILL SESSION: GENERAL WATER SKILLS (OPTIONAL)	
ACTIVITY: 	<ul style="list-style-type: none"> ■ This time is allotted for an optional general skills review to meet the needs of each class. As the instructor, you should set up and facilitate a session to help participants practice skills before the final skill scenarios.

TOPIC: **FINAL IN-WATER SKILL SCENARIOS**

Time: 2 hours, 30 minutes

FINAL IN-WATER SKILL SCENARIOS

ACTIVITY:



- Tell participants that there are two final skill scenarios.
- All skills must be performed according to the proficiency requirements to meet the objective of the skills.
- Each participant has only two opportunities to complete each scenario successfully.
- If a participant does not successfully complete a scenario during the first attempt, options include:
 - Reattempting the scenario during the normal lesson after a brief consultation on the corrective actions needed to complete the scenario successfully.
 - If additional practice is needed and time and resources permit, asking the participant to see you after class to schedule a re-evaluation of the unsuccessful scenarios at a later time.
- To set up each scenario:
 - Assign one participant to simulate the victim behaviors as instructed.
 - Ensure that each lifeguard has a hip pack containing non-latex disposable gloves and a resuscitation mask.
 - Have a manikin available to substitute into the scenarios for a passive victim once the primary assessment is complete.

FINAL SKILL SCENARIO 1: SUBMERGED PASSIVE VICTIM IN DEEP WATER WITH EXTRICATION, PRIMARY ASSESSMENT AND CPR

ACTIVITY:



- Explain to participants that this is a timed scenario, not to exceed 1 minute and 30 seconds for the water rescue and extrication (with an assisting lifeguard who will bring the backboard) and the primary assessment with two ventilations, followed by 3 minutes of one-rescuer CPR.
 - The rescuing or assisting lifeguard must provide 2 ventilations within the 1 minute, 30 seconds. The rescuing lifeguard must start CPR chest compressions just after the ventilations (if he or she did not provide the ventilations) and continue with one-rescuer CPR.
- Divide the participants into groups of three and assign one rescuing lifeguard, one assisting responder, one victim and a manikin for each group.
- Tell the victim to get into position about 30 feet from the edge and submerge as the rescuing lifeguard gets near.
- Start the stopwatch once the EAP has been activated, and again once the rescuer begins CPR.
- Repeat the drill until each participant has performed as a rescuing lifeguard.
- The only participant being evaluated for Final Skills Scenario 1 is the lifeguard assigned to do the water rescue. It is expected this rescuer is evaluated on performing the water rescue, working with assisting responder on extrication, assessment and 2 ventilations, and then performing one-rescuer CPR.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, follow the directions for the Submerged Passive Victim in Deep Water—Timed Response with the exception of having the lifeguard and victim stationed in shallow water.

FINAL SKILL SCENARIO 2: MULTIPLE-RESCUER RESPONSE

ACTIVITY:



Instructor's Note: Each participant is only required to be evaluated successfully in the role of rescuing lifeguard. Although participants may have successfully completed their scenario for evaluation, they may need to rotate into an additional team to have enough rescuers to participate in the scenario. It is not necessary to evaluate them in the additional role.

- Explain to participants that this is a team scenario and that they are expected to work with other rescuers and demonstrate clear communication and critical thinking ability while providing the appropriate care as a part of a team of multiple rescuers.
- Divide participants into groups of five. Assign one person as the victim, but do not assign other roles such as primary or secondary responder. Instead, assign two participants as the first to arrive on scene and two participants as the assisting responders who arrive with the “crash kit” including a BVM and AED.
- Tell participants that they will be responsible for prioritizing care, communicating and taking action. For example, the first responder with gloves on should start to provide care immediately.
- Explain to participants that during this final skills scenario, they will be evaluated on both:
 - Individual performance and their ability to achieve skill competencies for the individual skills that they are responsible for.
 - Overall team response performance, demonstrating the ability to work effectively as part of a team to prioritize care, take action without following an assigned role and communicate with fellow responders.
- For each group, conduct Multiple-Rescuer Response Scenario 3 in Appendix B.
- Read the scenario and provide the appropriate prompts (per the scenario flow sheet) during the scenario.
- Use the Multiple-Rescuer Response Assessment Tool for Scenario 3 to evaluate each individual participant and team performance (Appendix F).
- Rotate teams so that each participant has the opportunity to act as the rescuing lifeguard for evaluation.



Instructor's Note: If an individual receives a “fail” in any skill of the scenario, they receive an overall “fail” rating. If the team receives a “fail” rating, each lifeguard on the team receives a “fail” rating. It is possible for the overall team to receive a “pass” rating but one of the lifeguards to receive a “fail.” If a participant is unsuccessful, they are allowed to re-attempt the scenario.

CLOSING

ACTIVITY:



- Thank all participants for attending the course.
- Congratulate participants on successful completion.
- Explain that they will receive an American Red Cross certificate that indicates Lifeguarding/First Aid/CPR/AED, valid for 2 years.

SHALLOW WATER LIFEGUARDING

- For the Shallow Water Lifeguarding course, explain that participants will receive a certificate that indicates Shallow Water Lifeguarding (up to 5 ft.)/First Aid and CPR/AED for Lifeguard, valid for 2 years.
- Make arrangements to retest any participants who did not pass the final written exam or scenario(s).

SECTION C | APPENDICES

Appendix A: Sample Letters to Course Participants

Appendix B: Activity Resources

Appendix C: Lifeguarding Video Segments

Appendix D: Common Participant Errors

Appendix E: Participant Progress Logs and Multiple-Rescuer Response Assessment Tools

Appendix F: About the Science

Appendix G: Written Exam Answer Keys and Answer Sheets

Appendix H: Participant's Manual Chapter Review Answer Keys

SAMPLE LETTERS

EMAIL TEMPLATE: NOTIFICATION FOR PARTICIPANTS TO COMPLETE ELEARNING CONTENT

LIFEGUARDING BLENDED LEARNING INTENSIVE COURSE

Date: _____

Dear Lifeguarding Course Participant:

We are excited to offer you American Red Cross Lifeguarding Blended Learning. Blended learning combines online learning with in-person skills sessions where you will practice skills and demonstrate competency. Please plan to complete all eLearning modules, including the CPR/AED for Professional Rescuers and First Aid final eLearning exam, at least two days prior to your first in-person skills session. Most participants complete the eLearning portion of the course in approximately 7 hours. Your experience may vary widely based on several factors including your PC, internet speed and previous training. I recommend beginning the online session as soon as possible to ensure that you are able to complete all eLearning modules prior to the first in-person skill session.

IN-PERSON SKILLS SESSION SCHEDULE	
Precourse Skill Session Date	
Precourse Skill Session Time	
Course Dates and Times	
Location	

Once enrolled in the course, you will receive an email from the American Red Cross with instructions to access and complete the online course content. To get started, log in to the Red Cross Learning Center, and from your home page click on the class.

All required materials listed below are available as hard copies for purchase at the Red Cross Store; the store is accessible via a link provided in the Red Cross Learning Center (redcrosslearningcenter.org). Or, you will be able to download these materials in digital format once you access the online course (at no cost).

PC/TABLET REQUIREMENTS FOR ONLINE COURSE:	
Processor	Dual-core processor speed greater than or equal to 2.3GHz
Memory	4 GB
Operating Systems	Desktop: Microsoft Windows 7/8/10, OS X Snow Leopard 10.6+ Tablet: iPad iOS 7+ (Safari), Android 4.0.3+ (Google Chrome) This course is not supported on smartphone devices.
Browsers	IE10+, Chrome 49+, Firefox 47+, Safari 9+ Cookies, JavaScript, images and HTML5 audio/video must be supported
Screen Resolution	1024x768
Color Depth	High Color, 32 bit
Bandwidth	2.0 mbps dedicated or faster; broadband Internet access recommended
Audio	Soundcard and either speakers or headphones for multimedia audio

Please be prepared to provide proof that you completed the required eLearning content prior to each in-person skill session using one of the following methods.

- Print your eLearning module completion record at the conclusion of each eLearning module and bring it to each in-person skill session.
- Be prepared to login to the eLearning course at the beginning of each in-person skill session to display the module completion status that appears above the “Launch Course” button.
- Once you complete the online course, the instructor can view your online completion status.

If you have questions, please contact me directly at () - .

Sincerely,

American Red Cross Instructor

EMAIL TEMPLATE: NOTIFICATION FOR PARTICIPANTS TO COMPLETE ELEARNING CONTENT

LIFEGUARDING BLENDED LEARNING EXTENDED COURSE

Date: _____

Dear Lifeguarding Course Participant:

We are excited to offer you American Red Cross Lifeguarding Blended Learning. Blended learning combines online learning with in-person skills sessions where you will practice skills and demonstrate competency. Please plan to complete the initial eLearning lessons of your training at least two days prior to your first on-site skills session.

IN-PERSON SKILLS SESSION SCHEDULE	
Precourse Skill Session Date	
Precourse Skill Session Time	
Location	

IN-PERSON SKILLS SESSION	IN-PERSON SKILLS SESSION DATE AND TIME	ELEARNING MODULES TO BE COMPLETED BEFORE ATTENDING THE IN-PERSON SKILL SESSION
Lesson 1		<ul style="list-style-type: none">IntroductionThe Professional Lifeguard
Lesson 2		<ul style="list-style-type: none">Facility Safety and Patron Surveillance
Lesson 3		<ul style="list-style-type: none">Injury Prevention
Lesson 4		<ul style="list-style-type: none">Water Rescue Skills
Lesson 5		<ul style="list-style-type: none">Before Providing Care and Breathing Emergencies
Lesson 6		<ul style="list-style-type: none">Cardiac emergencies and Using an AED
Lesson 7		<ul style="list-style-type: none">First Aid
Lesson 8		<ul style="list-style-type: none">Head, Neck and Spinal Injuries
Lesson 9		<ul style="list-style-type: none">Conclusion (includes CPR/AED for Professional Rescuers and First Aid final eLearning exam)

Once enrolled in the course, you will receive an email from the American Red Cross with instructions to access and complete the online course content. To get started, log in to the Red Cross Learning Center, and from your home page click on the class.

All required materials listed below are available as hard copies for purchase at the Red Cross Store; the store is accessible via a link provided in the Red Cross Learning Center (redcrosslearningcenter.org). Or, you will be able to download these materials in digital format once you access the online course (at no cost).

PC/TABLET REQUIREMENTS FOR ONLINE COURSE:	
Processor	Dual-core processor speed greater than or equal to 2.3GHz
Memory	4 GB
Operating Systems	Desktop: Microsoft Windows 7/8/10, OS X Snow Leopard 10.6+ Tablet: iPad iOS 7+ (Safari), Android 4.0.3+ (Google Chrome) This course is not supported on smartphone devices.
Browsers	IE10+, Chrome 49+, Firefox 47+, Safari 9+ Cookies, JavaScript, images and HTML5 audio/video must be supported
Screen Resolution	1024x768
Color Depth	High Color, 32 bit
Bandwidth	2.0 mbps dedicated or faster; broadband Internet access recommended
Audio	Soundcard and either speakers or headphones for multimedia audio

Please be prepared to provide proof that you completed the required eLearning content prior to each in-person skill session using one of the following methods.

- Print your eLearning module completion record at the conclusion of each eLearning module and bring it to each in-person skill session.
- Be prepared to login to the eLearning course at the beginning of each in-person skill session to display the module completion status that appears above the “Launch Course” button.
- Once you complete the online course, the instructor can view your online completion status.

If you have questions, please contact me directly at () - .

Sincerely,

American Red Cross Instructor

ACTIVITY RESOURCES

Multiple-Rescuer Response Scenario Flow Sheets

SCENARIO 1 FLOW SHEET

An adult has collapsed in the hallway. Two rescuers are on the scene. The EAP has been activated and EMS personnel have been called. Additional rescuers are on the way with additional equipment—an AED and a BVM. The victim appears to be unresponsive.

Description/Instructor Notes	Actions	Instructor Prompt
Read scenario #1 (above).		
The adult (manikin) is lying on the floor on their back and appears unresponsive.	<ul style="list-style-type: none"> One responder shouts-taps-shouts to see if person is responsive. 	“There is no response.”
	<ul style="list-style-type: none"> Both responders get gloves on and get resuscitation masks ready. 	
The first rescuer with gloves on should start the primary assessment.	<ul style="list-style-type: none"> One responder opens the airway and simultaneously checks for breathing and pulse no longer than 10 seconds. 	“There is no breathing and no pulse.”
	<ul style="list-style-type: none"> The responder then communicates that there's no pulse and starts CPR. 	
Responders perform two-rescuer CPR.	<ul style="list-style-type: none"> One responder begins CPR starting with 30 chest compressions. 	
	<ul style="list-style-type: none"> The other responder is in position with the resuscitation mask ready to give ventilations. 	
	<ul style="list-style-type: none"> After the 30th compression, the responder gives two quality ventilations. 	
	<ul style="list-style-type: none"> The two responders continue two-rescuer CPR. 	
<p>At the start of five cycles of CPR (approximately 2 minutes), two additional rescuers arrive with the “crash bag,” which contains a BVM and an AED.</p> <p>The first rescuer with gloves on attaches the BVM to the resuscitation mask.</p>	<ul style="list-style-type: none"> The responder doing compressions calls for a change on their fifth cycle of compressions. 	After a few compressions, prompt the two additional responders to arrive with additional equipment (BVM and AED).
	<ul style="list-style-type: none"> At the end of the fifth cycle, the compressor and ventilator change positions and continue CPR. 	
	<ul style="list-style-type: none"> One responder attaches the BVM to the mask and squeezes the bag during ventilations. 	
	<ul style="list-style-type: none"> One responder prepares and applies the AED while CPR is in progress. Once the AED is ready to analyze, the responder calls to clear for the AED to analyze. 	

SCENARIO 1 FLOW SHEET, CONTINUED		
Description/Instructor Notes	Actions	Instructor Prompt
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders pause CPR and clear out. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	“AED advises to shock.”
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“AED prompts ‘Continue CPR.’” (Responders should start CPR without waiting for the prompt.)
Continue CPR for five cycles (approximately 2 minutes).	<ul style="list-style-type: none"> One responder gives compressions and calls for a change at the beginning of the fifth cycle. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions as needed. 	
The AED analyzes and responders change positions. The position change should not take longer than 5 seconds.	<ul style="list-style-type: none"> At the end of the fifth cycle, once the AED is ready to analyze, the responder calls to clear for the AED to analyze. All responders pause CPR and clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	“AED prompts ‘No shock advised,’ followed by ‘Continue CPR.’” (Responders should start CPR without waiting for the prompt.)
Continue CPR for five cycles (approximately 2 minutes).	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and a good seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions with the compressor as needed. 	
EMS has arrived on scene and is ready to take over care of the victim.		“EMS is on scene and is ready to take over care of the victim.”

SCENARIO 2 FLOW SHEET

An infant victim has just been rescued from the water. The victim appears unresponsive. Four rescuers are on the scene with an AED and BVM. The EAP has been activated, EMS personnel have been called.



Instructor's Note: Consent is implied for a drowning victim. For this scenario, assume that the victim has already been rescued from the water. Participants are not required to complete a water rescue.

Description/Instructor Notes	Actions	Instructor Prompt
Four responders are on the scene with the "crash kit" as the infant has just been extricated from the water.	<ul style="list-style-type: none"> One responder shouts-taps-shouts to see if infant is responsive. Both responders get gloves on and get resuscitation masks ready. 	"There is no response."
The first responder with gloves on does a primary assessment and starts CPR.	<ul style="list-style-type: none"> One responder opens the airway and quickly checks for breathing and pulse simultaneously for no longer than 10 seconds. The responder communicates no pulse and no breathing. The responder then attempts ventilations. The responder re-tilts and attempts another ventilation; it does not go in. 	"There is no breathing and no pulse." "Air does not go in." "Air still does not go in."
Three responders do CPR and the fourth prepares the AED to analyze.	<ul style="list-style-type: none"> One responder starts compressions. One responder maintains the airway. One responder attaches the BVM to the mask and is prepared to operate the BVM. One responder is preparing the AED while CPR is in progress. 	
Responder checks for an object in the mouth. (Ideally, the responder who was squeezing the bag.)	<ul style="list-style-type: none"> One responder looks for an object in the mouth. 	"No object is seen."
Victim vomits after a ventilation attempt.	<ul style="list-style-type: none"> One rescuer gives a ventilation and the infant vomits. The responders roll the infant on to their side and clear the infant's mouth of vomit with a finger sweep (or suction if available). 	"Vomit in the mouth." "Mouth is clear."

SCENARIO 2 FLOW SHEET, CONTINUED		
Description/Instructor Notes	Actions	Instructor Prompt
Roll the victim on their back and continue CPR for one cycle.	<ul style="list-style-type: none"> One responder starts compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag during ventilations. One responder is preparing the AED while CPR is in progress. 	
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 	
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders are clear. The responder doing compressions changes positions with another responder. The “new compressor” prepares to take over compressions. 	
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“After the shock, AED prompts ‘Continue CPR.’” (Responders should start CPR without waiting for the prompt.)
Continue CPR for five cycles (approximately 2 minutes) then end the scenario.	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions as needed. 	
The infant begins to cough and opens their eyes.	<ul style="list-style-type: none"> Responders place the infant in a recovery position. 	“The infant begins to cough and opens their eyes.”

SCENARIO 3 FLOW SHEET

An adult victim is submerged in the deep end. Two rescuers are on the scene. The EAP has been activated, EMS personnel have been called and additional rescuers are on the way with additional equipment—an AED and a BVM.



Instructor's Note: For this scenario, assign the rescuing lifeguard and the assisting responder. The rescuing lifeguard should perform an entry, approach the victim, perform the appropriate passive victim rescue and work with the assisting responder to extricate the victim. The victim should get into position and submerge as the rescuing lifeguard approaches. Substitute a manikin for the victim after extricating the victim from the water.

Description/Instructor Notes	Actions	Instructor Prompt
An adult victim is submerged in the deep end.	<ul style="list-style-type: none"> One responder performs a submerged victim rescue. Another responder brings the backboard and assists with extricating the victim from the water. 	“Move to manikin.”
The adult is on their back on the backboard and appears unresponsive.	<ul style="list-style-type: none"> One responder shouts-taps-shouts to see if person is responsive. Both responders get gloves on and get resuscitation masks ready. 	“There is no response.”
The first rescuer with gloves on should start.	<ul style="list-style-type: none"> One responder opens the airway and quickly checks for breathing and pulse no longer than 10 seconds. The responder communicates no pulse and no breathing. The responder then gives two quality ventilations. The other responder starts CPR beginning with 30 chest compressions. The two responders continue two-rescuer CPR. 	“There is no breathing and no pulse.”
<p>At the start of two cycles of CPR, two additional rescuers arrive on the scene with the “crash bag” with a BVM and an AED.</p> <p>The first additional rescuer with gloves on assembles the BVM and assists with giving ventilations.</p>	<ul style="list-style-type: none"> CPR continues. One responder assembles the BVM and assists with giving ventilations. One responder prepares and applies the AED while CPR is in progress. 	After a few compressions, prompt the two additional rescuers to arrive with additional equipment (BVM and AED).

SCENARIO 3 FLOW SHEET, CONTINUED		
Description/Instructor Notes	Actions	Instructor Prompt
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 	
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders are clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“After the shock, the AED indicates to continue CPR.” (Responders should start CPR without waiting for the prompt.)
Continue CPR for five cycles (approximately 2 minutes).	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions as needed. 	
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders pause CPR and clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	“AED prompt indicates no shock advised and then to continue CPR.” (Responders should start CPR without waiting for the prompt.)
EMS has arrived on scene and is ready to assume care of the victim.		“EMS is on scene and is ready to take over care of the victim.”

SCENARIO 4 FLOW SHEET

A child victim is submerged in the deep end and appears to be unresponsive. Four rescuers are on the scene with an AED and BVM. The EAP has been activated and EMS personnel have been called.



Instructor's Note: Consent is implied for the drowning victim. For this scenario, assign the rescuing lifeguard and the assisting responder. The rescuing lifeguard should perform an entry, approach the victim, perform the appropriate passive victim rescue and work with the assisting responder to extricate the victim. The victim should get into position and submerge as the rescuing lifeguard approaches. Substitute a manikin for the victim after extricating the victim from the water.

Description/Instructor Notes	Actions	Instructor Prompt
A child victim is submerged in the deep end.	<ul style="list-style-type: none"> One responder performs a submerged victim rescue. Another responder brings the backboard and assists with extricating the victim from the water. 	“Move to manikin.”
Four responders are on the scene with the “crash kit” as the child has just been extricated from the water.	<ul style="list-style-type: none"> One responder shouts-taps-shouts to see if person is responsive. All responders get gloves on and prepare equipment (masks, BVM, AED). 	“No response.”
The first responder with gloves on does a primary assessment and starts CPR.	<ul style="list-style-type: none"> One responder opens the airway and simultaneously checks for breathing and pulse no longer than 10 seconds. The responder communicates no pulse and no breathing. The responder then gives two quality ventilations. 	“No breathing and no pulse.”
The other responders attach the BVM and assist with ventilations and prepare the AED to analyze.	<ul style="list-style-type: none"> One responder gives 15 chest compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder prepares and applies the AED while CPR is in progress. 	
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 	
The AED analyzes and change of positions.	<ul style="list-style-type: none"> All responders are clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“After the shock, the AED indicates to continue CPR.” (Responders should start CPR without waiting for the prompt.)

SCENARIO 4 FLOW SHEET, CONTINUED			
Description/Instructor Notes	Actions	Instructor Prompt	
Continue CPR for five cycles (approximately 2 minutes).	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions as needed. 	“AED prompt indicates no shock advised and then to continue CPR.” (Responders should start CPR without waiting for the prompt.)	
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders pause CPR and clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 		
No shock advised	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“AED prompt indicates no shock advised and then to continue CPR.” (Responders should start CPR without waiting for the prompt.)	
Continue CPR. During the first set of compressions, the victim vomits.	<ul style="list-style-type: none"> One responder gives compressions but stops when the victim vomits. The rescuers roll the victim on their side. One rescuer clears the mouth of vomit with a finger sweep. (Use suction if available.) 	When the compressor gets to their eighth compression, say: “The victim vomits.” After the rescuer clears the victim’s mouth, say: “The vomit has been cleared.”	
After the mouth is clear, the victim is rolled to their back to continue care.	<ul style="list-style-type: none"> The rescuers roll the victim on their back to continue CPR starting with compressions. 		
CPR continues starting with compressions. At the first attempt at ventilations, air does not go in. They retilt and air goes in; they continue CPR for another two cycles.	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and an adequate seal on the resuscitation mask and re-tilts the head when air doesn’t go in on the first attempt. One responder attempts a ventilation that does not go in. One responder attempts another ventilation and the air goes in. The team continues CPR. 	First attempt at ventilation, say: “Air does not go in.” After re-tilt, say: “Air goes in.”	
EMS arrives and assumes care for the victim.		“EMS arrives and assumes care for the victim.”	

SCENARIO 5 FLOW SHEET

A child is submerged in deep water and appears to be unresponsive. The lifeguard that assists with extrication will need to leave the scene to call 9-1-1 and call for additional responders and equipment.



Instructor's Note: Consent is implied for the drowning victim. For this scenario, assign the rescuing lifeguard and the assisting responder. The rescuing lifeguard should perform an entry, approach the victim, perform the appropriate passive victim rescue and work with the assisting responder to extricate the victim. The victim should get into position and submerge as the rescuing lifeguard approaches. Substitute a manikin for the victim after extricating the victim from the water.

Description	Actions	Instructor Prompt
One responder is on the scene—the other lifeguard has gone to go call 9-1-1 and call for more assistance (additional lifeguards) at the facility. The lifeguard on scene should start care alone.	<ul style="list-style-type: none"> ▪ The responder shouts-taps-shouts to see if the child is responsive. ▪ The responder gets gloves on. 	“There is no response.”
One responder checks for breathing and a pulse.	<ul style="list-style-type: none"> ▪ The responder opens the airway and checks for breathing and a pulse simultaneously for no more than 10 seconds. 	“There is no breathing and no pulse.”
One-responder CPR continues for 2 cycles and then an additional responder shows up on the scene and indicates that 9-1-1 has been called and additional responders are on their way with the AED and BVM.	<ul style="list-style-type: none"> ▪ The responder gives two quality ventilations. ▪ The responder continues one-rescuer CPR, giving 30 compressions and two ventilations for two cycles. 	Prompt one assisting rescuer to arrive.
Continue CPR and incorporate an additional rescuer.	<ul style="list-style-type: none"> ▪ The assisting responder gets their gloves on (if not already on). ▪ Both responders begin two-rescuer CPR, giving 15 compressions and two ventilations. ▪ The compressor calls for a change at the beginning of the fifth cycle. 	
Change of position and continue CPR.	<ul style="list-style-type: none"> ▪ The compressor moves to a position to do ventilations and the other responder is in position to give compressions. ▪ The two responders continue with two-rescuer CPR. 	
After a few compressions, two additional responders show up on the scene with the “crash kit” with a BVM and an AED. Continue CPR, incorporating the BVM while the AED is being prepared.	<ul style="list-style-type: none"> ▪ One responder gives 15 compressions. ▪ One responder maintains the airway and an adequate seal on the resuscitation mask. ▪ One responder attaches the BVM to the mask and is prepared to operate the BVM. ▪ One responder is preparing the AED while CPR is in progress. 	Prompt the two additional rescuers to arrive with the BVM and AED.

SCENARIO 5 FLOW SHEET, CONTINUED			
Description/Instructor Notes	Actions	Instructor Prompt	
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 		
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders are clear. The responder doing compressions changes positions with another responder. The "new compressor" hovers hands a few inches above the chest during analysis to prepare for CPR. 	"AED prompts to shock."	
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	"After the shock, the AED indicates to continue CPR." (Responders should start CPR without waiting for the prompt.)	
Continue CPR for 5 cycles (approximately 2 minutes) then end the scenario.	<ul style="list-style-type: none"> One responder gives compressions. One responder maintains the airway and an adequate seal on the resuscitation mask. One responder operates the BVM by squeezing the bag for ventilations. One responder is ready to operate the AED and to change positions as needed. 		
EMS arrives.		"EMS arrives and assumes care of the victim."	

SCENARIO 6 FLOW SHEET

A patron has run into the pool office to report an adult has collapsed in the locker room and is requesting help with the emergency. A lifeguard supervisor is the first to arrive on the scene and discovers that the victim is unresponsive.

Description/Instructor Notes	Actions	Instructor Prompt
The supervisor performs a primary assessment.	<ul style="list-style-type: none"> The supervisor gets gloves on. The supervisor opens the airway and checks for breathing and a pulse simultaneously for no more than 10 seconds. The responders get gloves on. 	“No breathing and no pulse.”
Two lifeguards have just responded with the “crash bag,” which includes an AED and BVM, and brought it to the locker room.		Prompt additional rescuers to arrive with the BVM and AED.
The supervisor determines that there is no breathing or pulse. One lifeguard leaves the scene to call 9-1-1 and the other prepares the AED.	<ul style="list-style-type: none"> Tells the lifeguards there is no breathing and no pulse and to go call 9-1-1 and report back. One lifeguard leaves to call 9-1-1. The supervisor begins CPR starting with 30 compressions. The other lifeguard prepares the AED. 	“There is no breathing and no pulse.”
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 	
The AED analyzes and change of positions is signaled.	<ul style="list-style-type: none"> Both responders are clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	
Shock is advised.	<ul style="list-style-type: none"> The supervisor (AED operator) pushes the shock button. 	“After the shock, the AED indicates to continue CPR.” (Responders should start CPR without waiting for the prompt.)

SCENARIO 6 FLOW SHEET, CONTINUED		
Description/Instructor Notes	Actions	Instructor Prompt
The other lifeguard arrives and indicates that EMS personnel are on the way.	<ul style="list-style-type: none"> One responder gives 30 compressions. The supervisor maintains the airway and an adequate seal on the resuscitation mask. One responder attaches the BVM to the mask and is prepared to operate the BVM. 	
Continue CPR for five cycles (approximately 2 minutes).		
The AED is ready to analyze.	<ul style="list-style-type: none"> One responder calls for and ensures all are clear for the AED to analyze. 	
The AED analyzes and responders change positions.	<ul style="list-style-type: none"> All responders are clear. The responder doing compressions changes positions with another responder. The “new compressor” hovers hands a few inches above the chest during analysis to prepare for CPR. 	“AED prompts to shock.”
Shock is advised.	<ul style="list-style-type: none"> One responder (AED operator) pushes the shock button. 	“After the shock, the AED indicates to continue CPR.” (Responders should start CPR without waiting for the prompt.)
EMS arrive.		“EMS arrives and assumes care of the victim.”

LIFEGUARDING VIDEO SEGMENTS

LIFEGUARDING VIDEO SEGMENTS

** Video is included in eLearning content.*

Lesson 1: The Professional Lifeguard and Facility Safety

- The Professional Lifeguard (3:38) *
- The Unprofessional Lifeguard (3:59) *
- Entries and Approaches (6:17) *

Lesson 2: Facility Safety, Patron Surveillance and Injury Prevention

- Not on Your Watch (3:55) *
- Surveillance (8:03) *
- Scanning (5:22) *
- Zones of Surveillance (8:06) *
- Injury Prevention (3:54) *

Lesson 3: Injury Prevention and Rescue Skills, Part 1

- Emergency Action Plans (5:45) *
- Water Rescue Skills—Rescues At or Near the Surface (9:20) *

Lesson 4: Rescue Skills, Part 2

- Review—Surveillance Activity 1 (3:22)*
- Water Rescue Skills—Submerged Victim Rescues (4:52) *
- Extrications (7:23) *

Lesson 5: Before Providing Care, Victim Assessment and Breathing Emergencies

- Standard Precautions (3:24) *
- Primary Assessment (6:42) *
- Giving Ventilations (4:03) *
- Using a Bag-Valve-Mask Resuscitator—Two Rescuers (1:34) *
- Conscious Choking—Adult and Child (2:01) *
- Conscious Choking—Infant (1:19) *

Lesson 6: Cardiac Emergencies and Using an Automated External Defibrillator

- Heart Attack and the Cardiac Chain of Survival (3:12) *
- CPR—Adult and Child (6:28) *
- CPR—Infant (2:16) *
- Two-Rescuer CPR—Adult and Child (2:42) *
- Two-Rescuer CPR—Infant (1:47) *
- Using an AED (2:19) *
- Using an AED—CPR in Progress (1:17) *
- CPR—Obstructed Airway (3:40) *
- Putting It All Together—Multiple Rescuer Response (2:07)

Lesson 7: First Aid

- Review—Surveillance Activity 2 (5:42) *
- Responding to Sudden Illnesses (7:46) *
- Responding to Injuries (7:47) *
- Head, Neck and Spinal Injuries on Land (1:49) *
- When Things Do Not Go as Practiced (2:46)

Lesson 8: Head, Neck and Spinal Injuries in the Water

- Head, Neck and Spinal Injuries in the Water (12:51) *

Waterfront Rescue Skills (13:21)

Waterpark Rescue Skills (7:01)

Aquatic Attractions Lifeguarding

- Extrications (7:10)
- When Things Do Not Go as Practiced (2:49)
- Head, Neck and Spinal Injuries in the Water (13:41)

Administering Emergency Oxygen

- Using a Resuscitation Mask (2:29)
- Using a Bag-Valve-Mask Resuscitator—Two Rescuers (1:34)
- Oxygen Delivery (3:47)
- Using a Manual Suctioning Device (0:57)
- Using a Mechanical Suctioning Device (1:59)

Bloodborne Pathogens Training: Preventing Disease Transmission

- How Infections Occur (5:26)
- The Exposure Control Plan (2:10)
- Personal Protective Equipment (2:01)
- Engineering and Work Practice Controls (3:47)
- Exposure Incidents (1:56)

Anaphylaxis and Epinephrine Auto-Injector Training

- Assisting with an Epinephrine Auto-Injector (4:11)

Asthma Inhaler Training

- Assisting with an Asthma Inhaler (2:57)

COMMON PARTICIPANT ERRORS

COMMON PARTICIPANT ERRORS

Lesson	Examples of Common Errors
3	Active Victim Front Rescue: <ul style="list-style-type: none"> ■ Not keeping straight arms throughout ■ Pushing the victim onto their back ■ Not having the victim lean forward on the tube to stay up
3	Active Victim Rear Rescue: <ul style="list-style-type: none"> ■ Not communicating with the victim after making contact ■ Trying to put the active victim into a vertical position ■ Trying to put them completely on their back
3	Passive Victim Front Rescue: <ul style="list-style-type: none"> ■ Grasping the victim's arm in the incorrect place (topside instead of underside) ■ Unable to easily turn the victim face-up by pulling and twisting the arm ■ Not pushing the tube (with a straight arm) under the victim's back during the turn ■ Letting go of one arm before in position to tow ■ Victim's head not in an open airway position during the tow ■ Not reaching over the tube for the tow ■ Not hooking the towing arm tight during the tow
3	Passive Victim Rear Rescue: <ul style="list-style-type: none"> ■ Victim's head not in an open airway position during the tow ■ Not reaching over the tube for the tow, not hooking the towing arm tight during the tow
3	Multiple Victim Rescue: <ul style="list-style-type: none"> ■ Not supporting the victim's head above water
4	Passive Submerged Victim—Shallow Water: <ul style="list-style-type: none"> ■ Taking the rescue tube off completely ■ Victim's head not in an open airway position during the tow ■ Not reaching over the tube for the tow ■ Not hooking the towing arm tight during the tow
4	Feet-First Surface Dive: <ul style="list-style-type: none"> ■ Positions that promote buoyancy rather than support submerging if the person is not submerging ■ Hold the breath ■ Looking straight ahead or up toward the surface ■ Using legs in a way to move to the surface such kicking ■ Movements that fight submerging—legs spread not streamlined ■ Not using sweeping arm movements to assist submerging
4	Head-First Surface Dive: <ul style="list-style-type: none"> ■ Positions that promote buoyancy rather than support submerging if the person is not submerging ■ Holding the breath ■ Not looking down toward the target ■ Looking up toward the surface ■ Not using sweeping arm movements to assist submerging

Lesson	Examples of Common Errors
4	<p>Passive Submerged Victim—Deep Water:</p> <ul style="list-style-type: none"> ■ Does not submerge to a position “standing” behind the victim (heel to toes) ■ Does not grasp arm around the victim’s chest ■ Does not feed the tube strap into their hand as they move toward the surface ■ Unable to get the tube under the victim’s back before breaking the surface ■ Victim’s head not in an open airway position during the tow ■ Not reaching over the tube for the tow ■ Not hooking the towing arm tight during the tow
4	<p>Extrication Using a Backboard at the Pool Edge:</p> <ul style="list-style-type: none"> ■ Does not submerge board deep enough ■ Does not angle board once submerged to assist loading the victim ■ Does not control the board and the victim ■ Loses contact with the victim ■ Does not keep the board low during removal ■ Drops the board after removal
5	<p>Performing a Primary Assessment:</p> <ul style="list-style-type: none"> ■ Failing to size up the scene ■ Failing to determine responsiveness (infant: shout-tap-shout by tapping the foot) ■ Failing to follow standard precautions ■ Improperly opening the airway ■ Checking an inappropriate pulse site (infant: not checking the brachial pulse site) ■ Not looking at the chest while checking for breathing
5	<p>Using a Resuscitation Mask:</p> <ul style="list-style-type: none"> ■ Improperly opening the airway ■ Not obtaining a seal with the resuscitation mask, or not making the chest rise and fall ■ Not looking at the chest while checking for breathing
5	<p>Giving Ventilations—Adult and Child:</p> <ul style="list-style-type: none"> ■ Not tilting the head ■ Tilting the head too far back ■ Failing to reassess for breathing and pulse ■ Not looking at the chest when assessing for breathing ■ Not noticing if the ventilations are inadequate (don’t cause the chest to rise) ■ Providing ventilations at the incorrect ratio ■ Breathing too hard or too soft ■ Not obtaining a seal with the resuscitation mask or using an improperly sized mask for the victim ■ Not counting out loud

Lesson	Examples of Common Errors
5	Giving Ventilations—Infant: <ul style="list-style-type: none"> ■ Not tilting the head ■ Tilting the head past a neutral position ■ Failing to recheck for breathing and a pulse ■ Checking an inappropriate pulse site ■ Giving ventilations that are too hard or at the wrong rate ■ Not properly sealing the resuscitation mask ■ Not looking at the chest when checking for breathing or not using a pediatric mask for the infant victim ■ Not counting out loud
5	Giving Ventilations Using a Bag-Valve-Mask Resuscitator—Two Rescuers: <ul style="list-style-type: none"> ■ Maintaining a seal with the resuscitation mask ■ Not squeezing the bag hard enough or squeezing the bag too hard
5	Conscious Choking: <ul style="list-style-type: none"> ■ Failing to obtain the victim's consent ■ Performing abdominal thrusts before back blows ■ Positioning the hands improperly ■ Not using the thumb side of the fist to give abdominal thrusts
6	CPR—Adult, Child and Infant: <ul style="list-style-type: none"> ■ Compressions that are too shallow or too deep ■ Interrupting compressions for too long or too frequently ■ Incorrect hand position ■ Failure to allow full recoil after each compression or inappropriate rate (speed) of compressions ■ Incorrect rate of compressions and ventilations ■ Inadequate ventilations ■ Not counting out loud ■ Not keeping straight arms/locking elbows
6	Two-Rescuer CPR—Adult and Child: <ul style="list-style-type: none"> ■ Compressions that are too shallow or at an appropriate rate ■ Compressing and ventilating at the same time ■ Failing to call for a position change or using an incorrect cycle of compressions and ventilations
6	Two-Rescuer CPR—Infant: <ul style="list-style-type: none"> ■ Compressions that are too shallow or at an inappropriate rate ■ Compressing and ventilating at the same time ■ Failing to use the encircling thumbs technique ■ Failing to call for a position change or using an incorrect cycle of compressions and ventilations

Lesson	Examples of Common Errors
6	Two-Rescuer CPR—Infant: <ul style="list-style-type: none"> ■ Compressions that are too shallow or at an inappropriate rate ■ Compressing and ventilating at the same time ■ Failing to use the encircling thumbs technique ■ Failing to call for a position change or using an incorrect cycle of compressions and ventilations
6	Using an AED: <ul style="list-style-type: none"> ■ Not wiping the victim's chest ■ Using pediatric AED pads on an adult or failing to resume CPR after delivery of a shock or incorrect CPR performance
6	CPR with Airway Obstruction: <ul style="list-style-type: none"> ■ Using abdominal thrusts instead of chest compressions ■ Failing to check the mouth for an object ■ Performing a blind finger sweep ■ Compressing too little or too much ■ Failing to give ventilations or using the wrong finger to clear the object from the mouth ■ Incorrect compression to ventilation ratio ■ Not counting out loud
8	Over-Arm Head Splint—Face-Up at the Surface: <ul style="list-style-type: none"> ■ Not keeping the head above water ■ Not firmly splinting the head ■ Allowing the head to fall backwards ■ Allowing the victim to run into swimmers or objects
8	Head Splint—Face-Down at or Near the Surface: <ul style="list-style-type: none"> ■ Not switching to an over-arm head splint when nearing the board
8	Head Splint—Submerged Victim: <ul style="list-style-type: none"> ■ Not returning to the surface at an angle ■ Allowing the airway to become submerged after returning to the surface
8	Spinal Backboarding—Deep Water: <ul style="list-style-type: none"> ■ Switching to the over-arm head splint too far away from the board and struggling ■ Assisting rescuer does not place the rescue tube under the rescuer's arms for support

Lesson	Examples of Common Errors
8	<p>Spinal Backboarding Procedure:</p> <ul style="list-style-type: none"> ■ Rescuers lose contact with the victim ■ Does not angle the board deep enough for easy loading ■ Does not switch to or use the over-arm head splint as nearing the board ■ Failure to properly secure victim to the backboard ■ No quick check for breathing ■ Incorrect strap placement ■ Not placing the victim's arms on their body ■ Failure to communicate with the victim ■ No access to, or too far away from, the head blocks and head strap ■ Failure to maintain stabilization throughout ■ Does not keep the board low to the ground during removal ■ Drops the board after removal
8	<p>Spinal Backboarding Procedure—High Edges:</p> <ul style="list-style-type: none"> ■ Both rescuers not in the water ■ Unable to submerge the board under the victim for loading ■ Rescuers lose contact with the victim ■ Does not switch to or use the over-arm head splint as nearing the board ■ Failure to properly secure victim to the backboard ■ No quick check for breathing ■ Incorrect strap placement ■ Not placing the victim's arms on their body ■ Failure to communicate with the victim ■ No access to, or too far away from, the head blocks and head strap ■ Failure to maintain stabilization throughout ■ Does not keep the board low to the ground during removal ■ Drops the board after removal
8	<p>Spinal Backboarding and Extrication—Speed Slide:</p> <ul style="list-style-type: none"> ■ Rescuers not lifting the victim at the same time during removal ■ Not calling for the slide to be turned off ■ Allowing the victim's airway to become submerged
8	<p>Waterfront/Rescue Board Skills:</p> <ul style="list-style-type: none"> ■ Allowing the victim's airway to remain submerged when flipping the board ■ Running into the victim with the board ■ Having the board on the wrong side when starting to move the victim onto the board

PARTICIPANT PROGRESS LOG

Participant Progress Log

Multiple-Rescuer Response Assessment Tool

Participant Progress Log

NAME OF PARTICIPANT											
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	
Skills											
Slide-In Entry and Walking Approach											
Slide-In Entry and Swimming Approach											
Stride Jump and Swimming Approach*											
Compact Jump and Swimming Approach											
Reaching Assist from the Deck											
Simple Assist											
Active Victim Front Rescue											
Active Victim Rear Rescue											
Passive Victim Front Rescue											
Passive Victim Rear Rescue											
Multiple Victim Rescue											
Passive Submerged Victim in Shallow Water											
Feet-First Surface Dive in Deep Water*											
Head-First Surface Dive in Deep Water*											

	NAME OF PARTICIPANT										
		1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
Skills											
Successfully Completed eLearning Content											
Submerged Victim in Deep Water*											
Extrication Using a Backboard at the Pool Edge											
Extrication Using a Backboard at the Steps (optional)											
Removing Disposable Gloves											
Performing a Primary Assessment and Recovery Position—Adult											
Using a Resuscitation Mask—Head-Tilt/Chin-Lift Technique											
Using a Resuscitation Mask—Jaw-Thrust (with Head Extension) Maneuver											
Using a Resuscitation Mask—Jaw-Thrust (without Head Extension) Maneuver											
Performing a Primary Assessment and Recovery Position—Infant											
Giving Ventilations—Adult											
Giving Ventilations—Infant											
Giving Ventilations Using a Bag-Valve-Mask—Two Rescuers											
Conscious Choking—Adult											
Conscious Choking—Infant											
One-Rescuer CPR—Adult											
One-Rescuer CPR—Infant											

	NAME OF PARTICIPANT									
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
Skills, continued										
Two-Rescuer CPR—Adult										
Two-Rescuer CPR—Infant										
Using an AED and Using an AED—CPR in Progress										
CPR with Airway Obstruction—Adult										
CPR with Airway Obstruction—Infant										
Controlling External Bleeding										
Front Head-Hold Escape										
Rear Head-Hold Escape										
In-Water Ventilations—Shallow Water										
In-Water Ventilations—Deep Water*										
Over-Arm Head Splint—Face-Up Victim in Shallow Water										
Head Splint—Face-Down Victim at or near the Surface in Shallow Water										
Spinal Backboarding Procedure (Shallow Water)										
Spinal Backboarding Procedure—High Edges										
Head Splint—Face-Down Victim at or near the Surface in Deep Water*										

NAME OF PARTICIPANT										
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
Skills, continued										
Head Splint—Submerged Victim in Deep Water*										
Spinal Backboarding Procedure (Deep Water)										
Putting It All Together: Multiple-Rescuer Response Scenarios 1–6										
FINAL WRITTEN EXAMS										
Final Written Exam: Section 1—CPR/AED for Professional Rescuers and First Aid (completed in eLearning conclusion for blended learning)										
Final Written Exam: Section 2—Lifeguarding Skills*										
Final Written Exam: Section 2—Shallow Water Lifeguarding										
FINAL SKILL SCENARIOS										
Submerged Passive Victim—Timed Response										
Multiple-Rescuer Response Scenario 3										

Items noted with an asterisk (*) are required for the Lifeguarding course only.

SCENARIO 1—MULTIPLE-RESCUER RESPONSE ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

AN ADULT HAS COLLAPSED IN A HALLWAY		Responder Names and Ratings			
Competencies		Name	Name	Name	Name
Teamwork and Communication	Communication:	Accurately and effectively communicated with fellow responders			
	Coordination:	Clearly and decisively rotated through roles throughout scenario			
	Feedback:	Able to clearly provide guidance to teammates to self-correct as needed			
	Overall—Teamwork and Communication				
	Location:	Hands centered on the lower half of the sternum			
Chest Compressions	Depth:	At least 2 inches			
	Recoil:	Allow full chest recoil between compressions			
	Rate:	30 compressions at a rate of 100 to 120 per minute			
	Overall—Chest Compressions				
	BVM:	Connects appropriate sized BVM and resuscitation mask			
Ventilations and BVM	Length:	Each ventilation should be 1 second in duration			
	Visual:	Chest should clearly rise			
	Ratio:	Two ventilations			
	Overall—Ventilations and BVM				
	Preparation:	Turn on the AED; plug in the connector, if necessary			
AED	Location:	Correct pad placement; place one pad on the victim's upper right chest and the other pad on the left side of the chest			
	Time:	Minimizes interruptions during rotation; should be less than 5 seconds			
	Compressor Position:	Hovers during AED analysis			
	Overall—AED				
	Overall Team Response				
Scenario 1					

SCENARIO 2—MULTIPLE-RESCUER RESPONSE ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants’ using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

AN INFANT HAS JUST BEEN RESCUED FROM THE WATER		Responder Names and Ratings			
Competencies		Name	Name	Name	Name
Teamwork and Communication	Communication: Accurately and effectively communicates with fellow responders				
	Coordination: Clearly and decisively rotates through roles throughout scenario				
	Feedback: Able to clearly provide guidance to teammates to self-correct as needed				
	Overall—Teamwork and Communication				
Primary Assessment and Chest Compressions	Initial Ventilations: Gives two successful ventilations for a victim who is unresponsive as a result of a drowning				
	Location: Two thumbs centered on the sternum just below the nipple line with fingers encircling the chest				
	Depth: About 1 ½ inches				
	Recoil: Allow full chest recoil between compressions				
	Rate: 15 compressions at a rate of 100 to 120 per minute				
	Overall—Chest Compressions				
Ventilations and BVM	BVM: Connects appropriate sized BVM and resuscitation mask				
	Length: Each ventilation should be 1 second in duration				
	Visual: Chest should clearly rise				
	Ratio: Two ventilations				
	Overall—Ventilations and BVM				
AED	Preparation: Turn on the AED; plug in the connector, if necessary				
	Location: Correct pad placement; place one pediatric pad on the center of the chest and one pad on the center of the infant's back				
	Time: Minimizes interruptions during rotation; should be less than 5 seconds				
	Compressor Position: Hovers during AED analysis				
	Overall—AED				
Scenario 2	Overall Team Response				

MULTIPLE-RESCUER RESPONSE SCENARIO 3—AND FINAL SKILL SCENARIO—ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants’ using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

AN ADULT VICTIM IS SUBMERGED IN THE DEEP END		Responder Names and Ratings			
Competencies		Name	Name	Name	Name
Water Rescue and Extrication	Water Rescue: Successfully rescues the victim and brings them to the wall				
	Extrication: Successfully extricates the victim from the water				
	Communication: Accurately and effectively communicates with fellow responders				
	Coordination: Clearly and decisively rotates through roles throughout scenario				
	Feedback: Able to clearly provide guidance to teammates to self-correct as needed				
Teamwork and Communication	Overall—Teamwork and Communication				
	Initial Ventilations: Gives two successful ventilations for a victim who is unresponsive as a result of a drowning				
	Location: Hands centered on the lower half of the sternum				
	Depth: At least 2 inches				
	Recoil: Allow full chest recoil between compressions				
Primary Assessment and Chest Compressions	Rate: 30 compressions at a rate of 100 to 120 per minute				
	Overall—Chest Compressions				
	BVM: Connects appropriate sized BVM and resuscitation mask				
	Length: Each ventilation should be 1 second in duration				
	Visual: Chest should clearly rise				
Ventilations and BVM	Ratio: Two ventilations				
	Overall—Ventilations and BVM				
AED	Preparation: Turn on the AED; plug in the connector, if necessary				
	Location: Correct pad placement; place one pad on the victim's upper right chest and the other pad on the left side of the chest				
	Time: Minimizes interruptions during rotation; should be less than 5 seconds				
	Compressor Position: Hovers during AED analysis				
	Overall—AED				
Scenario 3	Overall Team Response				

SCENARIO 4—MULTIPLE-RESCUER RESPONSE ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants’ using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

A CHILD VICTIM IS SUBMERGED IN THE DEEP END AND APPEARS TO BE UNRESPONSIVE		Responder Names and Ratings			
		Name	Name	Name	Name
Competencies	Water Rescue and Extrication				
	Teamwork and Communication				
Primary Assessment and Chest Compressions	Water Rescue: Successfully rescues victim and brings them to the wall				
	Extrication: Successfully extricates the victim from the water				
	Communication: Accurately and effectively communicates with fellow responders				
	Coordination: Clearly and decisively rotates through roles throughout scenario				
	Feedback: Able to clearly provide guidance to teammates to self-correct as needed				
	Overall—Teamwork and Communication				
	Initial Ventilations: Gives two successful ventilations for a victim who is unresponsive as a result of a drowning				
Ventilations and BVM	Location: Hands centered on the lower half of the sternum				
	Depth: About 2 inches				
	Recoil: Allow full chest recoil between compressions				
	Rate: 30 compressions during One-Rescuer CPR, 15 compressions during Two-Rescuer CPR				
	Overall—Chest Compressions				
	BVM: Connects appropriate sized BVM and resuscitation mask				
	Length: Each ventilation should be 1 second in duration				
AED	Visual: Chest should clearly rise				
	Ratio: Two ventilations				
	Overall—Ventilations and BVM				
	Preparation: Turn on the AED; plug in the connector, if necessary				
	Location: Correct pad placement; place one pad on the victim’s upper right chest and the other pad on the left side of the chest				
	Instructor’s Note: <i>If using a child manikin and pads are touching, place on pad on the chest and one pad on the back.</i>				
	Time: Minimizes interruptions during rotation; should be less than 5 seconds				
Scenario 4	Compressor Position: Hovers during AED analysis				
	Overall—AED				
	Overall Team Response				

SCENARIO 5—MULTIPLE-RESCUER RESPONSE ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants’ using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

A CHILD IS SUBMERGED IN DEEP WATER AND APPEARS TO BE UNRESPONSIVE		Responder Names and Ratings		
Competencies		Name	Name	Name
Water Rescue and Extrication	Water Rescue: Successfully rescues victim and brings them to the wall			
	Extrication: Successfully extricates the victim from the water			
	Communication: Accurately and effectively communicates with fellow responders			
	Coordination: Clearly and decisively rotates through roles throughout scenario			
	Feedback: Able to clearly provide guidance to teammates to self-correct as needed			
Teamwork and Communication	Overall—Teamwork and Communication			
	Initial Ventilations: Gives two successful ventilations for a victim who is unresponsive as a result of a drowning			
	Location: Hands centered on the lower half of the sternum			
	Depth: About 2 inches			
	Recoil: Allow full chest recoil between compressions			
Primary Assessment and Chest Compressions	Rate: 15 compressions at a rate of 100 to 120 per minute			
	Overall—Chest Compressions			
	BVM: Connects appropriate sized BVM and resuscitation mask			
	Length: Each ventilation should be 1 second in duration			
	Visual: Chest should clearly rise			
Ventilations and BVM	Ratio: Two ventilations			
	Overall—Ventilations and BVM			
	Preparation: Turn on the AED; plug in the connector, if necessary.			
	Location: Correct pad placement; place one pad on the victim's upper right chest and the other pad on the left side of the chest			
	Instructor's Note: <i>If using a child manikin and pads are touching, place on pad on the chest and one pad on the back.</i>			
AED	Time: Minimizes interruptions during rotation; should be less than 5 seconds			
	Compressor Position: Hovers during AED analysis			
	Overall—AED			
	Overall Team Response			
	Scenario 5			

SCENARIO 6—MULTIPLE-RESCUER RESPONSE ASSESSMENT TOOL

Lifeguard Multiple-Rescuer Response Scenarios includes a rating of “Pass” or “Fail” for each lifeguard participating. Evaluate participants’ using this tool to help them prepare for the final skills scenario.

- During the final skills scenario, a “Pass” rating indicates that during the skills evaluation, the lifeguard successfully completed the skills they performed. A “Pass” rating for the team indicates the team met the objective for the overall team response.
- A “Fail” rating indicates that the lifeguard did not successfully complete one or more of the skills they performed. If a lifeguard receives a “Fail” rating in any skill of the scenario, they receive an overall “Fail” rating. If the overall team response receives a “Fail” rating, each lifeguard on the team receives a “Fail” rating. It is possible for the overall team response to pass but one of the individual lifeguards to fail.

AN ADULT HAS COLLAPSED IN THE LOCKER ROOM		Responder Names and Ratings			
Competencies					
Teamwork and Communication	Communication: Accurately and effectively communicates with fellow responders				
	Coordination: Clearly and decisively rotates through roles throughout scenario				
	Feedback: Able to clearly provide guidance to teammates to self-correct as needed				
	Overall Teamwork and Communication				
Primary Assessment and Chest Compressions	Initial Ventilations: Gives two successful ventilations for a victim who is unresponsive as a result of a drowning	N/A	N/A	N/A	N/A
	Location: Hands centered on the lower half of the sternum				
	Depth: At least 2 inches				
	Recoil: Allow full chest recoil between compressions				
	Rate: 30 compressions at a rate of 100 to 120 per minute				
	Overall—Chest Compressions				
Ventilations & BVM	BVM: Connects appropriate sized BVM and resuscitation mask				
	Length: Each ventilation should be 1 second in duration				
	Visual: Chest should clearly rise				
	Ratio: Two ventilations				
	Overall—Ventilations and BVM				
	Preparation: Turn on the AED; plug in the connector, if necessary				
AED	Location: Correct pad placement; place one pad on the victim’s upper right chest and the other pad on the left side of the chest				
	Time: Minimizes interruptions during rotation; should be less than 5 seconds				
	Compressor Position: Hovers during AED analysis				
	Overall—AED				
Scenario 6	Overall Team Response				

ABOUT THE SCIENCE

ABOUT THE SCIENCE

LESSON AND TOPIC	SCIENCE NOTES
PRECOURSE: SWIM GOGGLES	<p>Swim goggles should only be worn for the prerequisite swim for a variety of reasons:</p> <ul style="list-style-type: none"> ■ Swim goggles are not part of any standard issue lifeguarding equipment protocol used in making a land or water rescue. ■ Swim goggles are designed for preventing water entry and irritation and not to protect from trauma to the eye. Swim goggles present a greatly reduced surface area at the point of contact with tissue around the eye. The potential for serious eye injury is greatly increased by the swim goggle being contacted by an external object (or another participant) during the course. ■ Submerging to a depth of 5 feet or greater has the potential to cause barotraumas to the eye of an individual wearing swim goggles that cannot be pressure equalized.
LESSON 2: THE DROWNING PROCESS	<ul style="list-style-type: none"> ■ During the drowning process, a victim may gasp for air but instead inhales water into the airway causing reflexive shutting of the larynx or water aspirated into the lungs. After a period of time with no air entering the lungs, inadequate oxygenation of body tissues and eventually cardiac arrest may occur. This can happen in as little as 3 minutes after submerging. Brain damage or death can occur in as little as 4 to 6 minutes. The sooner the drowning process is stopped by getting the victim's airway out of the water, opening the airway and providing resuscitation (with ventilations or CPR), the better the chances are for survival without permanent brain damage. Adequate ventilation and CPR can be performed without the need to remove water from the lungs. ■ There are many intervening variables that can affect the outcome of a drowning victim, such as any underlying medical conditions of the victim or the time until advanced medical care intervenes. However, in general, evidence suggests that if the victim is rescued within 1 1/2 to 2 minutes of submerging, giving ventilations may resuscitate the victim.
LESSON 2: EFFECTIVE SURVEILLANCE	<p>Hyperventilation Preceding Underwater Swimming: Voluntary hyperventilation dangerously deregulates brain's control of breathing and lowers the blood's carbon dioxide level. Hyperventilation does not increase the oxygen level in the blood. After a person takes a series of rapid and deep breaths and then attempts to swim a long distance, oxygen is quickly used up. The person will then become unconscious before the carbon dioxide level raises to the level that triggers the urge to breath. Drowning then occurs if the person is not rescued.</p>
LESSON 5: PRIMARY ASSESSMENT	<ul style="list-style-type: none"> ■ Checking for responsiveness: When checking a person for responsiveness, sometimes a tapping of the shoulder does not provide enough physical stimuli to elicit a response to pain. Therefore, a trained responder could employ a "shout-tap-pinch" approach with a pinch to the muscle between the neck and shoulder in order to provide a stronger physical stimulus to a sensitive area. It is important that "shout-tap-pinch" does not delay patient care by adding extra time to determine a response to verbal or painful stimuli.

LESSON AND TOPIC	SCIENCE NOTES
<p>LESSON 5: PRIMARY ASSESSMENT</p> <p><i>continued</i></p>	<ul style="list-style-type: none"> ■ Recovery Positions: Based on the available evidence, it is important to turn a person who is responsive and breathing normally but not fully awake onto their side to lower the risk for choking and aspiration. There is little evidence to suggest an optimal recovery position. However, turning the victim towards the rescuer, rather than away from the rescuer, allows for more control over the movement and facilitates monitoring the victim's airway. ■ Ventilations for Drowning Victims: Due to the hypoxic nature of drowning, lifeguards and professional responders should alter the initial treatment for victims with no breathing and no pulse as a result of a drowning and provide two initial ventilations during the primary assessment prior to beginning CPR with chest compressions.
<p>LESSON 5: RECOGNIZING AND CARING FOR BREATHING EMERGENCIES</p>	<ul style="list-style-type: none"> ■ Respiratory Arrest: Hyperventilation most commonly occurs when victims are being ventilated in respiratory arrest or when an advanced airway is placed during cardiac arrest. It is critical to avoid hyperventilation of the victim because it leads to increased pressure and a subsequent decrease in cardiac filling and cardiac perfusion pressures by putting pressure on the vena cava (the main chest vein). ■ Opioid Overdose: With a growing epidemic of opioid (commonly heroin and oxycodone) overdoses in the United States, local and state departments of health have increased access to the medication naloxone, which can counteract the effects of overdose including respiratory arrest. Naloxone (also referred to by its trade name Narcan™) has few side effects and can be administered intranasally (through the nose). Trained responders should administer the drug when the patient is in respiratory arrest and an opioid overdose is suspected. Lifeguards and professional responders should follow local medical protocols and regulations to determine dosing and timing of naloxone administration.
<p>LESSON 5: GIVING VENTILATIONS USING A BVM</p>	<p>BVM: Ventilation with a BVM is reserved for when multiple rescuers are available to treat the victim: One to perform chest compressions and two others to manage the airway and provide ventilations. While a BVM may often be used in some situations by a single responder (advanced medical personnel), the evidence supports the use of a BVM with two responders: One to maintain an adequate seal and one to squeeze the bag to deliver the ventilations.</p>
<p>LESSON 5: AIRWAY OBSTRUCTION</p>	<p>Choking: Evidence suggests that it may take more than one technique to clear the airway, and that back blows, abdominal thrusts and chest thrusts are all effective.</p>
<p>LESSON 6: RECOGNIZING AND CARING FOR A HEART ATTACK</p>	<p>There is strong evidence that suggests that when a person is experiencing signs and symptoms of a heart attack, outcomes are improved when cardiac catheterization is performed within 90 minutes of the onset of signs and symptoms and within 60 minutes of arrival to the hospital, which is why advanced life support provided by advanced medical personnel is critical. When cardiac catheterization is not readily available, the administration of certain medications, including aspirin, within the first few hours of the onset of signs and symptoms has also been shown to be of benefit.</p>

LESSON AND TOPIC	SCIENCE NOTES
LESSON 6: CPR	<ul style="list-style-type: none"> ■ Chest Compressions: Actual depth may be difficult to judge without the use of feedback devices, but it is critical to compress the chest AT LEAST 2 inches for an adult victim. Evidence shows that compression depths greater than 2.4 inches in the average adult lead to a higher incidence of non-life threatening injuries and should be avoided. Compression rates that exceed 120 compressions per minute also affect the quality of compressions. Evidence suggests that higher rates of compressions lead to inadequate compression depths. ■ High Performance CPR: Evidence continues to build that the key to successful resuscitations is the delivery of high quality CPR, including uninterrupted chest compressions and ventilations. ■ CPR Differences–Adult and Child: The majority of pediatric cardiac arrests are a result of a respiratory cause such as a breathing problem (asthma/anaphylaxis), an obstructed airway, drowning or an injury. As such, ventilations and appropriate oxygenation are important for a successful resuscitation. In these situations, laryngeal spasm may occur, making passive ventilation during chest compressions minimal or non-existent.
LESSON 6: AED	<ul style="list-style-type: none"> ■ For every 1 minute of delayed defibrillation, the rate of survival drops 7 to 10 percent. ■ AEDs allow for compressions post-analysis while the AED is charging. Lifeguards and professional rescuers may perform compressions from the time the shock advised prompt is noted through the time that the prompt to clear occurs, just prior to depressing the shock button. Emphasize the need to follow the manufacturer's recommendations and their local protocols and practices.
LESSON 8: CARING FOR HEAD, NECK AND SPINAL INJURIES IN THE WATER	Reassessment of protocols has shown that packaging a victim can be detrimental. They often will lie on spine boards for hours in the emergency room, which causes anxiety and can cause physical damage. Research indicates that the damage has likely already occurred with the initial injury. The focus for lifeguards should be on safely extricating the person from the water while maintaining stabilization. Studies have shown that the application of cervical collars can cause further injury.

WRITTEN EXAM ANSWER KEYS AND ANSWER SHEETS

ANSWER SHEET: LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam **A** **B**

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ANSWER KEY: LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam **A**

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ANSWER KEY: LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam **B**

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ANSWER SHEET: SHALLOW WATER LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam **A** **B**

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ANSWER KEY: SHALLOW WATER LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam (A)

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| 3. | (a) | (b) | ● | (d) | 21. | (a) | ● | (c) | (d) |
| 4. | (a) | ● | (c) | (d) | 22. | ● | (b) | (c) | (d) |
| 5. | (a) | (b) | (c) | ● | 23. | (a) | (b) | ● | (d) |
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| 15. | ● | (b) | (c) | (d) | 33. | (a) | (b) | ● | (d) |
| 16. | (a) | (b) | ● | (d) | 34. | (a) | ● | (c) | (d) |
| 17. | ● | (b) | (c) | (d) | 35. | (a) | ● | (c) | (d) |
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ANSWER KEY: SHALLOW WATER LIFEGUARDING SKILLS

Name: _____ Date: _____

Exam (B)

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| 3. ● (b) (c) (d) | 21. (a) (b) ● (d) |
| 4. (a) ● (c) (d) | 22. (a) ● (c) (d) |
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PARTICIPANT'S MANUAL CHAPTER REVIEW ANSWER KEYS

PARTICIPANT'S MANUAL CHAPTER REVIEW

ANSWER KEYS



Chapter 1 Review

1. What is the primary responsibility of a lifeguard?

- A** | To encourage patrons to participate in water safety educational programs
- B** | To prevent drowning and other injuries from occurring at their aquatic facility
- C** | To schedule and participate in frequent in-service trainings
- D** | To deliver patron safety orientations and administer swim tests

2. Provide three examples of how lifeguards fulfill their primary responsibility:

Answers should include three of the following:

- Monitoring activities in and near the water through patron surveillance.
- Preventing injuries by minimizing or eliminating hazardous situations or behaviors.
- Enforcing facility rules and regulations and educating patrons about them.
- Recognizing and responding quickly and effectively to all emergencies.
- Administering first aid and CPR, including using an automated external defibrillator (AED) and, if trained, administering emergency oxygen when needed.
- Working as a team with other lifeguards, facility staff and management.

3. List five examples of secondary responsibilities that should never interfere with patron surveillance:

Answers should include:

- Testing pool water chemistry.
- Assisting patrons, such as performing safety orientations, administering swim tests and fitting for life jackets.
- Cleaning or performing maintenance.
- Completing records and reports.
- Performing opening duties, closing duties, or facility safety checks and inspections.



Chapter 1 Review (continued)

4. List five characteristics of a professional lifeguard:

Answers should include:

- Knowledgeable and Skilled
- Reliable
- Mature
- Courteous and Consistent
- Positive
- Professional
- Healthy and Fit

5. Lifeguards should:

- | | |
|---|--|
| A Keep a cell phone in their hip packs at all times, in case of emergency. | C Always be attentive and sit or stand upright when on surveillance duty. |
| B Stay alert by eating at the lifeguard stand. | D Assist patrons with swim testing when on surveillance duty. |

6. A lifeguard is texting while on surveillance duty and fails to recognize a swimmer in distress. What legal principle could be a problem for this lifeguard?

- | | |
|------------------------|----------------------------|
| A Negligence | C Refusal of care |
| B Abandonment | D Consent |



Chapter 1 Review (continued)

7. List the five steps that a lifeguard should take when obtaining consent from an injured or ill person before providing first aid or emergency care:

- 1) State your name.
- 2) State your level of training.
- 3) Ask if you may help.
- 4) Explain that you would like to assess them to find out what you think may be wrong or what you can do to help.
- 5) Explain what you plan to do.

8. What is the validity period of an American Red Cross Lifeguarding certification? How does an American Red Cross certified lifeguard get recertified?

The American Red Cross Lifeguarding/First Aid/CPR/AED Certification is valid for 2 years. Additional training may be required to meet state and local regulations or facility-specific policies.

- To re-certify, American Red Cross certified Lifeguards with a current certification may participate in a review course.
- Individuals with an expired American Red Cross Lifeguarding/First Aid/CPR/AED certification may participate in the full Lifeguarding course.

9. Why is it important to attend a pre-season orientation and training?

- A** | To ensure that lifeguards understand their responsibilities and know how to perform their job
- B** | To ensure that lifeguards get practice with their facility's safety and rescue equipment and emergency action plans
- C** | To ensure lifeguards understand codes, rules and regulations of the facility
- D** | All of the above



Chapter 1 Review (continued)

10. What does EAP stand for?

Emergency Action Plan

11. Why is it important for lifeguards and other team members to understand and practice the EAP?

Answers include:

- Lifeguards and other staff members must practice the facility's EAPs together until everyone knows their responsibilities and can perform them effectively.
- Conditions can change throughout the day, so the EAP may need to be adapted to particular situations (e.g., number of lifeguards on duty, availability of other safety team members on duty, types of activities occurring, etc.).

12. What is the best practice for the frequency of in-service training participation at well-managed aquatic facilities?

- A** | At least 1 hour of in-service training each month
- B** | At least 4 hours of in-service training each year
- C** | At least 1 hour of in-service training each day
- D** | At least 4 hours of in-service training each month

13. What are the benefits of regular, frequent in-service training?

Answer should include:

- Helps lifeguards maintain knowledge and skills as a professional rescuer.
- Skills degrade quickly and regular practice and feedback keeps skills fresh.
- Gives lifeguards a chance to practice with lifeguards at their facility.
- Helps lifeguards work with the safety team to efficiently respond in an emergency.



Chapter 1 Review (continued)

14. List four topics that could be discussed during in-service training:

Answers should include four of the following:

- Address surveillance and recognition issues.
- Practice rescue skills.
- Understand and practice decision-making protocols.
- Review facility rules and regulations.
- Review facility protocols including records and reports.
- Practice customer service skills.
- Physical conditioning for lifeguards.



QUESTION FOR FUTURE GUIDED DISCUSSION

Being a professional lifeguard is about more than blowing a whistle and wearing a uniform. A lifeguard must be mentally, physically and emotionally prepared at all times to do their job. So, how should a lifeguard prepare for working at an aquatic facility? What personal lifestyle commitments should a lifeguard make?

Responses should include:

To fulfill the responsibilities of a professional lifeguard, you must be mentally, physically and emotionally prepared at all times to do your job. As a professional lifeguard you must:

- Have the appropriate knowledge and skills to help prevent and respond to emergencies.
- Be reliable; arrive to work on time and accept assignments willingly.
- Be mature, act responsible, take initiative and lead by example.
- Show a positive attitude in all job activities.
- Look professional and be prepared to respond appropriately to any situation.
- Stay healthy and fit, including regular exercise, good nutrition and a balanced diet, proper hydration, adequate rest and protection from sun exposure.



Chapter 2 Review

1. What items are considered to be personal protective equipment for a lifeguard?

Responses should include:

- Gloves
- Resuscitation Masks
- Gowns
- Shields
- Protective Eyewear

2. What equipment should be worn or carried by a lifeguard at all times while on duty? List at least two and include the reason(s) why this equipment should be worn or carried.

Responses should include:

- **A Rescue Tube** should be worn at all times when performing patron surveillance. Rescue tubes are capable of keeping multiple victims afloat and they are the primary piece of equipment used to perform a water rescue.
- **Hip-Packs** containing gloves and resuscitation mask(s) should be worn by lifeguards at all times, even when not on surveillance duty, so that equipment is instantly available in an emergency.
- **Resuscitation Mask(s)** allow lifeguards to breathe air into a victim without making mouth-to-mouth contact. Resuscitation mask(s) should be carried in the Lifeguard's hip pack at all times, even when not on surveillance duty, so that it is available instantly in an emergency.
- **A Whistle** is a signaling device for lifeguards used to activate the facility's EAP and to get attention of other members of the safety team as well as patrons for policy enforcement. Whistles should be loud, made of material that will not rust and have breakaway lanyards. Lifeguards should wear whistles at all times.
- **Disposable Gloves** are used to protect lifeguards that may be exposed to blood or other potentially infectious material (OPIM). Gloves should be carried in the Lifeguard's hip pack at all times, even when not on surveillance duty, so that they are available instantly in an emergency.



Chapter 2 Review (continued)

3. What safety equipment/items should be easily accessible for a lifeguard while on duty? List at least two and describe how/when each item is used.

Responses should include:

- **Backboards** are a standard piece of equipment used at aquatic facilities to remove victims from the water when they are unable to exit the water on their own or they have a possible head, neck or spinal injury.
- **Automated External Defibrillators (AEDs)** are used to analyze the hearts rhythm and deliver an electrical shock (when needed) to help re-established an effective heart rhythm. AEDs are used in conjunction with CPR.
- **First aid kits** include supplies used to treat common injuries at aquatic facilities including bleeding and wounds and help stabilize injuries to muscles, bones and joints.
- **Bag-Valve-Mask (BVM)** resuscitators are used to ventilate a victim in respiratory arrest or when performing CPR with more than one rescuer.
- **Personal Protective Equipment (PPE)** is used to prevent lifeguards from coming into direct contact with a victim's body fluids. PPE includes gloves, resuscitation masks, gowns, masks, shields and protective eyewear.
- **Rescue boards (for waterfront facilities)** are used as standard equipment at waterfront facilities and are designed to accommodate a lifeguard plus one or more victims. Rescue boards may be used during rescues to quickly paddle out long distances or as a patrolling device for lifeguards.



Chapter 2 Review (continued)

4. As a lifeguard, you are responsible for:

- A** | Ensuring that your facility is in compliance with local, state and federal regulations.
- B** | Creating and reviewing your facility's policies and procedures manual.
- C** | Consistently enforcing your facility's rules and regulations.
- D** | Creating rules, regulations and emergency action plans.

5. List five common rules and regulations often posted at an aquatic facility.

Answers should include five of the following:

- Swim only when a lifeguard is on duty.
- Swim diapers are required for small children or people with incontinence.
- No swimming with open or infected wounds.
- Obey lifeguard instructions at all times.
- No running, pushing or rough play.
- No hyperventilating before swimming underwater or breath-holding contests.
- No sitting or playing near or with drains or suction fittings.
- Dive only in designated areas.
- No glass containers in the pool area and locker rooms.
- No alcoholic beverages or drug use allowed.

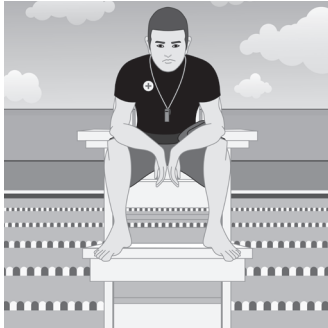
6. Explain what it means to be “equipped and rescue-ready.”

Equipped and rescue-ready means that you are wearing or carrying the appropriate rescue equipment for your facility and ready to enter the water to perform a rescue.



Chapter 2 Review (continued)

7. Identify at least two reasons why each lifeguard in the images below is not equipped and rescue-ready and indicate what can be done to improve each situation.



- Lifeguard does not have a rescue tube.
- Lifeguard has no sun protection (no hat, sunglasses or umbrella).



- Lifeguard is sitting with crossed legs.
- Lifeguard is wearing sneakers.



- Lifeguard in the chair is not wearing a hip pack.
- Lifeguard on the ground is not looking at the pool.



Chapter 2 Review (continued)



QUESTION FOR FUTURE GUIDED DISCUSSION

Effective surveillance includes several elements. What are these elements and why are they instrumental to keeping patrons safe?

Responses should include:

Elements of effective surveillance include:

- Recognition of dangerous behaviors
- Victim recognition
- Effective recognition
- Zone of surveillance responsibility
- Lifeguard stations

With effective surveillance, lifeguards can recognize behaviors or situations that might lead to life-threatening emergencies (such as drownings or injuries to the head, neck or spine) and act quickly to modify the behavior or control the situation.



Chapter 2 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERFRONT LIFEGUARDS:



1. Which list of typical safety checklist items, along with others, applies to a lakefront swimming area?

- A** | Water chemistry, circulation system, drain covers, starting blocks
- B** | Bottom conditions, pier attachments, buoys, safety lines
- C** | Emergency shut-offs, tubes, communication between ride dispatch and landing
- D** | Wave height, tide charts, rip currents, beach flags

2. Which list of typical rules, along with others, applies to a lakefront swimming area?

- A** | No diving in shallow water, no running on pool deck, shower before entering the water
- B** | Ride slides feet-first, stay on tubes, observe minimum height or weight requirements
- C** | No swimming under piers, no fishing near swimming area
- D** | Shower before entering, limit time in high temperature water, remove swim caps



Chapter 2 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS



1. In a waterpark setting, what additional items might be included in a safety checklist?

Answers should include:

- Shoreline is clean and free of sharp objects
- Bottom conditions are free from hazards
- Water conditions are safe for swimming
- Piers are anchored, stable, free from trip or injury hazards
- Lifeguard stands and surrounding areas are clear of objects

2. Why should waterparks have signs posted at every attraction stating the water depth?

Answer:

- To prevent patrons from finding themselves in what is deeper or shallower water than expected.

3. What rules are typically covered for waterpark attractions?

Answers should include:

- The minimum or maximum number of people allowed on an attraction or a tube at a time.
- The maximum height or age requirements in areas designated for small children.
- The minimum height or weight requirements for patrons using an attraction.
- Life jacket requirements.
- Health restrictions.
- Proper riding position for a slide or ride vehicle.

4. What are some factors that make lifeguarding waterparks different than a typical pool?

Answers should include:

- Various attractions (winding rivers, water slides, wave pools, splash castles, etc.)
- Ride vehicles
- Currents on attractions
- Potentially larger crowds
- Different rules and EAPs



Chapter 3 Review

1. In general, there are three types of swimmers in distress or drowning victims. List each type with three observable characteristics for each.

Answers should include:

1) **Distressed Swimmer**

- May be able to keep their face out of the water
- May be able to call or wave for help
- Horizontal, vertical or diagonal, depending on what they use to support themselves
- Floating, sculling or treading water

2) **Drowning Victim—Active**

- Not able to call out for help because their efforts are focused on getting a breath
- Works to keep the face above water in an effort to breathe
- May be in a horizontal face-down position during the struggle because they are unable to lift their face out of the water (for example: a toddler)
- Has extended the arms to the side or front, pressing down for support
- Is positioned vertically in the water with an ineffective kick; a young child may tip into a horizontal face down position
- Might continue to struggle underwater once submerged
- Eventually will lose consciousness and stop moving

3) **Drowning Victim—Passive**

- Might float face-down at or near the surface or might sink to the bottom
- May be limp or have slight convulsive-type movements
- Has no defined arm or leg action, no locomotion and no breathing
- May appear to be floating, if at the surface of the water
- May be face-down, on one side or face-up, if at the bottom

2. Match each station type with its general use:

- | | |
|--------------------------------|--|
| <u>D</u> Roving Stations | A. Puts you close to the patrons to easily make assists |
| <u>C</u> Elevated Stations | B. Used in waterfront facilities to patrol the outer edge of a swimming area |
| <u>A</u> Ground-Level Stations | C. Ideal for a single guard facility |
| <u>B</u> Floating Station | D. Good to use with a crowded zone |



Chapter 3 Review (continued)

3. A lifeguard on duty should be able to recognize and reach a drowning victim within:
30 seconds.

4. The size of a zone should allow for a lifeguard to recognize an emergency, reach the victim, extricate and provide ventilations within _____. Explain why.

1 ½ to 2 minutes

In general, if you can provide ventilations within 1 ½ to 2 minutes, you might be able to resuscitate the victim.

5. What is the difference between total and zone coverage?

Total coverage:

Total coverage means that you are the only lifeguard conducting patron surveillance while on duty. Some facilities, such as a small pool, assign their lifeguards total coverage. When only one lifeguard is conducting patron surveillance, that lifeguard has to scan the entire area, control the activities of patrons in and out of the water and recognize and respond to emergencies.

Zone coverage:

Zone coverage means that the swimming area is divided into separate zones, with one zone for each lifeguard station. Zones can be designated by markers, such as ladders, lane lines, lifelines, buoys or the shape of the pool.

6. Lifeguards should be actively _____ their zones.

A | Changing

C | Creating

B | Watching

D | Searching

Why? Lifeguards should search their assigned zones for behaviors that indicate a patron is
in need of immediate assistance. Lifeguards should be searching for behaviors of a
drowning victim or swimmer in distress.



Chapter 3 Review (continued)

7. You are guarding a lap swim with only two patrons. All of the following will help you deal with the monotony EXCEPT for which?

- A** | Stay fully engaged and do not let attention drift.
- B** | Change body position and posture periodically.
- C** | Swing your whistle lanyard.
- D** | Sit upright and slightly forward.

8. It is very hot in your facility and you are starting to doze on the stand. All of the following can help you stay alert EXCEPT for which?

- A** | Stay in a cooler area during breaks.
- B** | Stay hydrated while drinking plenty of water.
- C** | Rotate more frequently.
- D** | Jump in the pool while on surveillance duty to cool off.

9. You are distracted by the glare of the lights on the water and the water movements are making it hard to see all areas of your zone. Circle all acceptable options.

- A** | Wear polarized sunglasses.
- B** | Adjust your body position; stand up to look around and through the glare spots.
- C** | Reposition the lifeguard station with the permission of your supervisor.
- D** | Be aware of the normal appearance of the bottom of the pool; know the appearance of drains, colored tiles or painted depth markings.
- E** | Do not change your position as the lifeguard stations are placed to be aesthetically pleasing.

10. Why is it important for lifeguard managers to conduct drills to test zones?

Lifeguard zones should be set up for success—the lifeguard must be able to clearly see all parts of the zone as well as be able to quickly respond in an emergency.



Chapter 3 Review (continued)

11. Fill in the blank:

Voluntary hyperventilation, which can be described as rapid, deep breathing, is a dangerous technique used by some swimmers to try to swim long distances underwater or to hold their breath for an extended period while submerged in one place. If you see these dangerous activities, you must intervene.

12. RID stands for

R: Recognition

I: Intrusion

D: Distraction

13. During rotation, both lifeguards must ensure there is no lapse in patron surveillance, even for a brief moment. To ensure this, what should each lifeguard do?

The incoming lifeguard should:

Search the zone and activity level of the zone that you will be guarding. Begin searching your zone as you are walking toward your station, checking all areas of the water from the bottom to the surface.

The outgoing lifeguard should:

Inform the incoming lifeguard of any situations that need special attention. The exchange of information should be brief, and patron surveillance must be maintained throughout the entire rotation. Once in position, with the rescue tube strapped in place, the incoming lifeguard should make any adjustments needed, such as removing shoes or adjusting an umbrella before confirming to you that they own the zone. Confirm and signal that the zone is clear and transfer responsibility for the zone. You should continue scanning as you are walking toward the next station.



Chapter 3 Review (continued)



QUESTION FOR FUTURE GUIDED DISCUSSION

What are some common injuries at a pool? How can a lifeguard treat and prevent them?

Responses should include:

- Fractures
- Dislocations
- Abrasions (scrapes)
- Superficial burns (sunburns)
- Muscle cramps
- Heat exhaustion
- Dehydration
- Sprains and strains

Lifeguards can help prevent these injuries by:

- Understanding how most injuries occur
- Increasing awareness of risks and hazards
- Helping patrons avoid risky behavior, including educating patrons about the consequences of risky behavior
- Developing a safety-conscious attitude

Lifeguards can treat these injuries by providing appropriate emergency care according to their level of training.



Chapter 3 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERFRONT LIFEGUARDS:



1. Which scanning challenge often occurs at waterfronts but should not exist at pools?

A | Distractions

C | Murky water

B | Heavy patron loads

D | High air temperature

2. Who normally provides training for watercraft used at some waterfront facilities?

A | The lifeguard's training agency

C | Facility management

B | The lifeguard figures it out

D | The U.S. Coast Guard



Chapter 3 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK LIFEGUARDS:



1. In a waterpark setting, which type of lifeguard stations might you encounter in a rotation?

Answers should include:

- Elevated stations
- Ground-Level stations
- Roving stations
- Dispatch stations
- Landing zone stations

2. What are lifeguards guarding at dispatch stations responsible for?

Assessing each potential rider to ensure that they meet all of the requirements for riding the attraction. Verifying that each rider wishing to ride the attraction is capable of holding themselves in the proper riding position.

3. What are some characteristics unique to waterpark features that may make it more difficult to see a drowning victim?

Answers should include:

- Current, moving water or waves of an attraction
- Unexpected changes in depth
- Floating play structures
- Tubes or other ride vehicles from which patrons may fall

4. What are some scanning challenges that you may encounter when guarding a play structure? What tactics can you use to counteract them?

Answers should include:

- Overcrowding. Be aware of your facility guidelines regarding the number of patrons allowed on the play structure and be prepared to restrict that number or summon additional help.
- Features such as towers, sprayers or climbing structures; be sure to move around your zone or change body position so you are able to see all areas of your assigned zone.



Chapter 4 Review

1. List the three major strategies a lifeguard can use to help prevent injuries at an aquatic facility.

Answers should include:

- Communicating with patrons
- Informing and educating patrons
- Enforcing rules

2. List three things that can help determine if a life jacket is appropriate for use.

Answers should include:

- The life jacket is U.S. Coast Guard Approved.
- The life jacket is in good condition; no rips, tears, holes or shrinkage of the buoyant materials.
- The life jacket is appropriately sized for the patron; life jackets are sized by weight. Check the U.S. Coast Guard label to be sure the fit is matched to the weight range of the patron.
- The life jacket is properly worn. A properly fitted life jacket should feel snug, keep the person's chin above the water and allow the person to breathe easily. The life jacket should not ride up on the patron's body in the water. Completely secure any straps, buckles or ties associated with the life jacket.
- The patron(s) are properly using the life jacket. Correct any improper wearing or use of life jackets. Do not allow patrons to wear multiple life jackets or stack multiple life jackets on top of each other to be used as floats.



Chapter 4 Review (continued)

3. Many facilities have unique challenges that demand different kinds of surveillance. For each situation listed below, list two guidelines you should keep in mind when providing surveillance for patrons.

Guarding areas for young children:

Answers include:

- Older children might be too large for some structures, or their play might be too rough for young children.
- Toddlers who are still learning to walk may fall easily. If they fall down in water, they usually cannot lift themselves to an upright position, even if the water is ankle or knee deep.
- Children often get lost. Remind adults to supervise their children at all times.
- You must watch out for young children using the pool as a toilet. The facility should have procedures for preventing and addressing the situation, including handling fecal incidents, which follow local health department guidelines.
- Children usually do not think about overexposure to the sun or hypothermia. If a child is becoming sunburned or overly cold, immediately inform the child's parent or guardian.

Play structures:

Answers should include:

- Do not let a play structure become overcrowded. Be prepared to restrict the number of patrons using it at one time.
- Do not allow patrons to swim underneath structures.
- Watch that patrons return to the surface after dropping into the water from a floating feature. Swimmers can be surprised by the fall or become disoriented, especially if they do not realize they will be dropping into deep water.
- Pay close attention to children playing in and around sprays, fountains and interactive water-play structures. These attractions usually are in shallow water. Excited children may run and fall. A very young child who falls might not be able to get back up or may strike their head.
- Pay close attention to patrons in moving water. Moving water can surprise people. They might lose their balance and be unable to stand up again.
- Watch for overcrowding and horseplay on floating structures. These structures are tethered to the bottom of the pool; some allow patrons to walk from one floating structure to another while holding onto an overhead rope.
- Keep play safe and orderly.
- Patrons may climb onto floating toys and jump back into the water. They may not notice what is around them and jump onto other swimmers or into water that is over their heads.
- Patrons may throw balls and other toys and hit unsuspecting swimmers, resulting in injury.



Chapter 4 Review (continued)

4. Identify three strategies for ensuring safe group visits.

Answers include:

- **Booking procedure.** Before the visit, group leaders should provide the aquatic facility with information about how many group members and supervisors will be visiting, including swimmer characteristics such as percentage of swimmers and non-swimmers.
- **Safety orientation.** Conducted when the group first arrives at the facility.
- **Classification of swimming abilities/Swim testing.** Swim tests are administered to determine if a visitor has the minimum level of swimming ability required to participate safely in activities, such as swimming in water over their head or riding on certain slides.
- **Designation of swimming areas.** Swimming areas should be clearly marked and defined according to swimmers' abilities and intended use.
- **Identification of group leaders or adult chaperones.** Your facility should use an identification system so that lifeguards and other facility staff can easily locate group leaders or adult chaperones.
- **Buddy systems and buddy checks.** Provide an additional layer of protection, specifically with larger groups including camps.

5. Why is it important to educate your patrons about safety in, on and around the water?

Answers should include:

- Patrons need to know about the risks that can cause injury.
- Patron education and instruction on how to use equipment and follow rules can prevent behaviors that lead to injury.
- Patrons may be unfamiliar with facility features, or be so excited that they do not read signs or pay attention to rules.

6. You are in the lifeguard office taking a break from surveillance duty and a camp counselor requests a swim test for a new camper. You use the Red Cross water competency sequence to conduct a swim test. Describe these steps in order:

- 1) Enter the water and completely submerge.
- 2) Recover to the surface and remain there for at least 1 minute (floating or treading).
- 3) Rotate 360 degrees and orient to the exit.
- 4) Level off and propel yourself on the front or the back through the water for at least 25 yards.
- 5) Exit from the water.



Chapter 4 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERFRONT LIFEGUARDS:



1. At waterfront facilities using swim tests for group visits, areas for nonswimmers should:

- A** | Begin in shallow water and grade seamlessly into deep water appropriate for swimmers.
- B** | Be separated from the swimmer area with a continuous barrier, such as a pier or buoyed lifeline.
- C** | Extend slightly into deep water for practice.
- D** | Include designated deep water areas for diving.



Chapter 4 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS:



1. Many facilities have unique challenges that require different guarding strategies. For each situation listed below, list two guidelines you should keep in mind when guarding patrons at the following attractions.

Aquatic attractions:

Answers should include two of the following:

- Watch patrons as they enter and exit an attraction. Dispatch patrons safely on a ride at set intervals. Dispatching is the method of informing patrons when it is safe for them to proceed on a ride.
- Carefully watch both the water below and the activities overhead.
- Keep patrons in view as long as possible. Keeping patrons in view can be a problem on some attractions. Structures, such as caves, enclosed tubes, bridges and buildings might prevent you from seeing patrons at all times. When a patron goes out of sight, watch to make sure that they emerge safely on the other side.
- Ensure that patrons who submerge return to the surface. The excitement may cause weak swimmers or non-swimmers to overestimate their abilities or underestimate the water's depth.
- Be aware of special risks. Structures designed to have patrons sit or climb on them, or swim over or under them, pose hazards. Supervise patrons carefully. Someone who falls off of a mat, raft or tube might be injured or pose a hazard to another patron.

Wave pools:

Answers should include two of the following:

- Ensure that patrons enter only in the shallow end.
- When the waves are on, stand up to get a better view of patrons.
- Watch for swimmers who get knocked over by the waves or carried into deeper water by the undercurrent. Inexperienced swimmers may go to where the waves break because of the excitement.
- Do not let patrons dive into the waves or dive through inner tubes.
- Keep the areas around ladders and railings clear so that patrons can exit from the pool quickly.
- Keep other swimmers out of the pool during special activities like surfing. The surfboards or boogie boards in the wave pool can present a hazard to others.
- Before performing an emergency rescue, turn the waves off using the emergency stop (E-stop) button at the lifeguard chair.
- Rotate positions only when the waves are off.



Chapter 4 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS:



2. What additional challenges might you face when enforcing rules in a waterpark?

Answers should include:

- Background music
- Loud patrons
- Large crowds
- Movement/current of a winding river

3. What are some responsibilities of a lifeguard assigned the landing zone of a slide?

Answers should include:

- Helping riders exit the ride.
- Ensuring that the landing zone is clear.
- Communicating with the dispatching lifeguard.
- Moving ride vehicles onto a conveyor or stacking them to be used by other patrons.

4. What are some examples of rules or policies that might be found in a waterpark setting?

Answers should include:

- Height or weight requirements for attractions
- Specific rules for ride vehicles
- Proper ride positions
- No forming chains on a winding river



Chapter 5 Review

1. Why should an EAP be facility specific?

So that all staff know their responsibilities as it relates to that facility. Factors such as the facility's layout, number of staff on duty at a time, location of backup lifeguards and other safety team members, equipment used and typical response times of the local emergency medical services (EMS) system are included in the plan and depend on the facility.

2. Provide three examples of situation-based EAPs.

Answers should include three of the following:

- Water emergency—Drowning victim—active
- Water emergency—Drowning victim—passive
- Water emergency—Spinal injury victim
- Water emergency—Missing person
- Land emergency—Injury or illness
- Evacuations
- Sheltering in place
- Severe weather
- Chemical spills or leaks
- Power failures
- Violence
- Thefts in progress

3. Place the following EAP actions in order for a situation where the victim is responsive and does not require additional care:

2 Rescue

4 Equipment check/corrective action

1 Signal

5 Return to duty

3 Report, advise, release



Chapter 5 Review (continued)

4. Describe the actions of the additional safety team members listed below during a rescue where the victim is unresponsive and requires additional emergency care.

Other lifeguards:

- 1) Assist with the rescue by providing emergency care.
- 2) Provide backup zone coverage or clear the area.

Additional safety team members:

(Front desk staff, maintenance staff or others as designated by the EAP)

- 1) Summon EMS Personnel.
- 2) Bring additional equipment if necessary.
- 3) Clear the area or facility.
- 4) Control the crowd.
- 5) Meet EMS personnel.
- 6) Assist the lifeguards by providing emergency care (if trained and outlined in the EAP).

5. When completing a report, you should:

- | | |
|---|---|
| A Include all details about the incident, including your opinion about how the incident happened. | C Collect all factual information about what was seen, what was heard and what actions were taken. |
| B Allow witnesses to discuss their thoughts about the incident before compiling their statement onto one report. | D Not allow the victim to leave until you have completed the report and your supervisor has signed it. |



Chapter 5 Review (continued)

6. Who should deal with questions from the media after an incident? Select all that apply.

- A** | The lifeguard who performed the rescue **D** | The company spokesperson
B | The front desk attendant who called 9-1-1 **E** | EMS personnel
C | The facility manager

Why? Only management or a designated spokesperson should talk to the media or others about an incident. Sharing details about an incident could violate a victim's privacy, which is protected by confidentiality laws. Failure to follow facility procedures for dealing with the media could lead to legal action.

7. Why might a supervisor choose NOT to re-open a facility that was closed during an emergency? Provide one example.

Answers may include:

- Not enough lifeguards ready to return to surveillance duty.
- Missing or damaged equipment.
- Spills involving blood or other potentially infectious materials have to be cleaned.
- Power failure.

8. Members of the safety team, including non-lifeguard personnel, should be:

- A** | Trained and certified in first aid and CPR/AED at the same level of the lifeguard team (for professionals). **C** | Trained in CPR if they are interested in receiving training.
B | Trained in first aid and CPR for non-professionals. **D** | Trained to follow the other EAP duties that do not involve providing care.



Chapter 5 Review (continued)

9. After an emergency has been resolved, there are still three important tasks to complete. Explain each task.

Report:

Fill out the appropriate incident report form as quickly as possible after providing care.

Advise:

Give the victim safety instructions to prevent a similar incident from recurring or recommend that the person follow up with a health care provider.

Release:

In some cases, you will release the person under their own care or to a parent, guardian, camp counselor, group leader, instructor or other staff member.

10. You must be prepared to respond to emergencies that are outside of the immediate aquatic environment and not part of your zone of responsibility. Describe three areas where these emergencies could occur.

Answers should include three of the following:

- Locker rooms
- Concession areas
- Entrance and lobby areas
- Mechanical rooms
- Playgrounds and play areas
- Parking lots



Chapter 5 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERFRONT LIFEGUARDS:

1. An EAP for a missing person includes quickly checking if the person is in the water. Checking for a submerged victim is most difficult for which area?

- A** | Spa with the bottom obscured by water jets
- B** | Lap swimming area in a pool with lane lines
- C** | Underneath play structures in a swimming pool
- D** | Underneath play structures at a waterfront with murky water



Chapter 5 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS:



1. What additional steps might be included in the EAP for a wave pool, a winding river and the landing zone of a speed slide?

Answers should include:

- Pressing the emergency stop (E-stop) button to turn off the waves in a wave pool.
- Shutting off the flow of water in a slide or winding river.
- Stopping the dispatch of riders at a speed slide.

2. What additional actions must be taken after signaling an emergency in the following attractions?

Wave pool:

Pushing the emergency stop (E-stop) button is required to stop the waves before attempting a rescue.

Slides:

The signal must alert the lifeguard stationed at the top to stop dispatching more riders.

3. What signals would you most likely use to activate the EAP in a waterpark setting?

Answers should include:

- Whistle blast.
- Call box (pushing a button or dropping a phone).
- Pressing an E-stop button.



Chapter 6 Review

1. List the general procedures, in order, for situations involving a water rescue.

- 1) Activate the emergency action plan (EAP).
- 2) Enter the water, if necessary.
- 3) Perform an appropriate rescue.
- 4) Move the victim to a safe exit point.
- 5) Remove the victim from the water.
- 6) Provide emergency care as needed.
- 7) Report, advise and release.

2. What are some factors that should be considered when deciding how to enter the water? Select all that apply.

- | | |
|---------------------------------------|-----------------------------------|
| A Location of the victim | E Water temperature |
| B Location of other swimmers | F Your location |
| C Size of the victim | G Facility design/set-up |
| D Condition of the victim | H Type of equipment used |

3. In addition to the correct answer(s) above, what additional factors should be considered when deciding how to enter the water and why?

Answers may include:

- **Water depth and/or design of the lifeguard station**; different entries are recommended for different water depths and various lifeguard stations/positions:
 - The slide-in entry is safest in most conditions, including shallow water.
 - The stride jump should only be used if the water is at least 5-feet deep and you are no more than 3 feet above water.
 - The compact jump should only be used when the water is at least 5-feet deep and can be used from the deck or from a height, such as on a lifeguard stand.
 - The run-and-swim entry should be used to enter the water from a zero-depth entry, gradual slope facility.
- **Obstacles in the water** (including people and lane lines); it may not be safe to enter the water using a compact jump or stride jump if your zone is crowded or contains obstacles.
 - The slide in-entry is useful in a crowded pool or in an area with obstacles.



Chapter 6 Review (continued)

4. Identify the appropriate entry for each scenario listed below:

SCENARIO	ENTRY
You are seated on an elevated lifeguard stand in the deep end during recreational swim and spot a passive-drowning victim. The area surrounding your station is clear of patrons and objects.	Compact Jump
You are searching your zone from an elevated station when you spot a patron who appears to have a head injury as a result of diving in shallow water.	Slide-In Entry
You spot an active drowning victim while searching your zone from a ground-level station located in the middle of the pool where the water is 4' deep.	Slide-In Entry
You are searching your new zone as you walk toward the elevated lifeguard stand in the deep end before a rotation and you spot an active drowning victim.	Stride Jump
You have just rotated to a roving station during open swim at a crowded waterfront and spot a swimmer in distress.	Run-and-Swim

5. What are the two most common assists and when should each be used?

- 1) **Simple assist.** A simple assist can be used in shallow water and may be merely helping a person to stand. The simple assist also may be used to rescue a victim who is submerged in shallow water and is within reach.
- 2) **Reaching assist from the deck.** To assist a distressed swimmer who is close to the side of the pool or a pier, use a reaching assist from the deck by extending a rescue tube within the victim's grasp.



Chapter 6 Review (continued)

Select the appropriate rescue or extrication method for the scenarios below:

6. You are approaching a victim who is vertical in the water, near the surface in 4 feet of water. The victim is facing you and appears to be unconscious.

- A** | Active Victim Front Rescue
- B** | Passive Victim Front Rescue
- C** | Passive Victim in Extreme Shallow Water–Face-Up
- D** | Submerged Victim in Shallow Water

7. You are approaching a child who is facing away from you and struggling to keep their head above water.

- A** | Active Victim Rear Rescue
- B** | Active Victim Front Rescue
- C** | Passive Victim Rear Rescue
- D** | Passive Victim Front Rescue

8. You are approaching a victim from behind who appears to be unconscious.

- A** | Passive Victim Front Rescue followed by Extrication Using a Backboard
- B** | Passive Victim Rear Rescue followed by a Two-Person Extrication
- C** | Passive Victim Front Rescue followed by a Walking Assist
- D** | Passive Victim Rear Rescue followed by Extrication Using a Backboard

9. A victim in the water is not breathing.

- A** | Always remove a victim who is not breathing from the water as soon as possible to provide care. However, if doing so will delay care, then perform in-water ventilations until you can remove the victim.
- B** | Give ventilations in the water, then remove the victim from the water.
- C** | Give ventilations and CPR in the water for 1 minute, 30 seconds and then remove them from the water.
- D** | Wait for additional assistance to remove the victim from the water.



Chapter 6 Review (continued)

10. What are four core objectives in any rescue situation?

Answers should include the following:

- Ensure the safety of the victim, yourself and others in the vicinity. This includes the entry, approach, rescue, removal and care provided.
- Use a rescue technique that is appropriate and effective for the situation.
- Provide an appropriate assessment, always treating life-threatening conditions first.
- Handle the rescue with a sense of urgency.



Chapter 6 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS



1. What should you consider when deciding what entry to use at a wave pool?

Answers should include:

- The number of patrons.
- The height of your station.
- The depth of the water at your station.
- The mechanism of injury of the victim.
- The location of your station.

2. What attraction features might impact the removal of the victim from the water?

Answers should include:

- Type of exit from attraction (stairs, high edges, ladder, zero entry, etc.).
- Ride vehicles.
- Water movement (current or waves).
- Shape of the attraction (e.g., walls of a speed slide).



Chapter 7 Review

1. Touching soiled dressings that are contaminated with potentially infectious material is an example of:

- A | Indirect contact**
- B | Direct contact**
- C | Droplet contact**
- D | Vector-borne contact**

2. Examples of work practice controls include:

- A | Disposing of sharp items in puncture resistant, leak-proof, labeled container**
- B | Removal and proper disposal of soiled protective clothing as soon as possible**
- C | Cleaning/disinfecting all equipment and work surfaces possibly soiled by blood or other potentially infectious material**
- D | All of the above**

3. The OSHA recommended solution to use for disinfecting contaminated or soiled equipment and surfaces is:

- A | 4 cups of bleach per gallon of water**
- B | 1 cup of ammonia per gallon of water**
- C | 1/4 cup of antibacterial soap per gallon of water**
- D | 1 part bleach per 9 parts water**

4. Place the following general procedures for injury or sudden illness on land in order:

- 2** Perform a primary assessment.
- 5** Provide care for the conditions found.
- 3** Summon EMS, if needed and not already done.
- 1** Size up the scene.
- 6** Report, advise and release.
- 4** Perform a secondary assessment.



Chapter 7 Review (continued)

5. Describe six actions you should take or determinations that you should make while performing a scene size-up:

- 1) Use your senses to check for hazards that could present a danger to you or the victim.
- 2) Use appropriate PPE.
- 3) Determine the number of injured or ill victims.
- 4) Determine what caused the nature of the illness; look for clues to what may have caused the emergency and how the victim became injured or ill.
- 5) Form an initial impression that may indicate a life-threatening emergency.
- 6) Determine what additional resources may be needed.

6. Provide a situation and specific example of when you should move a victim who is on land.

Answers may include:

- You are faced with immediate danger. Examples include but are not limited to:
 - Fire or immediate risk of fire
 - Severe weather
 - Chemical spills
- You need to get to other victims who have more serious injuries or illnesses such as an unresponsive victim who is not breathing or has no pulse.
- It is necessary to provide appropriate care. Examples include but are not limited to:
 - Moving a victim to the top or bottom of a flight of stairs to perform CPR.



Chapter 7 Review (continued)

7. If you are alone when responding to someone who is ill, you must decide whether to Call First or Care First.

When should you Call First?

Call 9-1-1 or the designated emergency number first, before providing care for:

1. Any adult or child about 12 years of age or older who is unresponsive.
2. A child or an infant who you witnessed suddenly collapse.
3. An unresponsive child or infant known to have heart problems.

When should you Care First?

Care First (provide 2 minutes of care, then call 9-1-1 or the designated emergency number) for:

1. An unresponsive child (younger than about age 12) who you did not see collapse.
2. Any victim suspected of drowning.

8. How do you tell the difference between an adult, a child and an infant?

Adult: Puberty and older.

Child: 1-year to puberty (development of breasts in girls and underarm hair in boys).

Infant: Up to 1 year.

9. During the primary assessment, you find the victim is not breathing and has no pulse. When would you give 2 ventilations before starting CPR?

For a drowning victim pulled from the water.



Chapter 8 Review

1. Fill in the blanks: Lack of oxygen can eventually stop the heart (cardiac arrest) and prevent blood from reaching the brain and other vital organs in as little as 3 minutes after submerging. Brain cell damage or death begins to occur within 4 to 6 minutes.

2. Describe the two types of respiratory emergencies:

Respiratory distress: A condition in which breathing becomes difficult.

Respiratory arrest: A condition in which breathing stops.

3. List five possible causes of respiratory distress.

Answers should include five of the following:

- A partially obstructed airway
- Illness
- Chronic conditions, such as asthma and emphysema
- Congestive heart failure
- Electrocution, including lightning strikes
- Heart attack
- Injury to the head, chest, lungs or abdomen
- Allergic reactions
- Drug overdose
- Poisoning
- Emotional distress
- Anaphylactic shock

4. When caring for a person in respiratory distress:

- | | |
|---|---|
| A Ask the victim to stand and lean back to make breathing easier. | C Do not allow the victim to take their prescribed medication. |
| B Determine the exact cause of respiratory distress before providing initial care. | D Maintain an open airway and summon EMS personnel. |



Chapter 8 Review (continued)

5. List five possible causes of respiratory arrest.

Answers should include five of the following:

- Drowning
- Obstructed airway (choking)
- Injury to the head, chest, lungs or abdomen
- Illness, such as pneumonia
- Respiratory conditions, such as emphysema or asthma
- Congestive heart failure
- Heart attack
- Coronary heart disease (such as angina)
- Allergic reactions (food or insect stings)
- Electrocution, including lightning strikes
- Shock
- Poisoning
- Drug overdose
- Emotional distress

6. When checking to see if someone is breathing (circle all that apply):

- | | |
|---|---|
| A Look to see if the victim's chest clearly rises and falls. | D Look away from the victim's chest. |
| B Check for breathing before checking for a pulse. | E Keep the victim's mouth closed. |
| C Check for breathing and a pulse simultaneously. | F Listen and feel for air against the side of your face. |

7. Fill in the blanks. The normal breathing rate for an adult is between 12 and 20 breaths per minute.

8. What is a lifeguard's objective when caring for a drowning victim who is not breathing?

To get the victim's mouth and nose out of the water, open the airway and give ventilations as quickly as possible.



Chapter 8 Review (continued)

9. When giving ventilations to an adult who is not breathing but has a definitive pulse, you should give ventilations:

A | 2 every 5 to 6 seconds

C | 1 every 3 seconds

B | 2 every 3 seconds

D | 1 every 5 to 6 seconds

10. When giving ventilations to a child who is not breathing but has a definitive pulse, you should give ventilations:

A | 2 every 5 to 6 seconds

C | 1 every 3 seconds

B | 2 every 3 seconds

D | 1 every 5 to 6 seconds

11. What should you do if you are giving ventilations and the victim's chest does not rise after the first breath?

When giving ventilations, if the chest does not rise after the first breath, reopen the airway, make a seal and try a second breath. If the breath is not successful, move to compressions and check the airway for an obstruction before attempting subsequent ventilations. If an obstruction is found, remove it and attempt ventilations. However, never perform a blind finger sweep.

12. All of the following describe appropriate care for a conscious person with an airway obstruction (choking) EXCEPT:

A | Check the victim for breathing and a pulse for no more than 10 seconds.

C | Obtain consent; if the victim is a child, get consent from a parent or guardian.

B | Perform a combination of 5 back blows followed by 5 abdominal thrusts.

D | If the victim cannot cough, speak or breathe, activate the EAP and have someone summon EMS.



Chapter 8 Review (continued)

13. If a conscious choking victim becomes unresponsive, what should you do?

- Carefully lower the victim to a firm, flat surface.
- Send someone to get an AED, and summon additional resources if appropriate and you have not already done so.
- Immediately begin CPR with chest compressions.



Chapter 9 Review

1. Describe the five links in the Cardiac Chain of Survival for adults:

- Recognition of cardiac arrest and activation of the emergency response system.
- Early CPR to keep oxygen-rich blood flowing and to help delay brain damage and death.
- Early defibrillation to help restore an effective heart rhythm and significantly increase the patient's chance for survival.
- Advanced life support using advanced medical personnel who can provide the proper tools and medication needed to continue the lifesaving care.
- Integrated post-cardiac arrest care to optimize ventilation and oxygenation and treat hypotension immediately after the return of spontaneous circulation.

2. Fill in the blank: For each minute CPR and defibrillation are delayed, the victim's chance for survival is reduced by about ____ percent.

3. What should you do if you think someone is having a heart attack?

- Take immediate action and summon EMS personnel.
- Have the victim stop any activity and rest in a comfortable position.
- Loosen tight or uncomfortable clothing.
- Closely monitor the victim until EMS personnel take over. Note any changes in the victim's appearance or behavior.
- Comfort the victim.
- Be prepared to perform CPR and use an AED.

4. Signs of cardiac arrest include (circle all that apply):

A | Sudden collapse

D | Unresponsiveness

B | Vomiting

E | Rapid pulse

C | No pulse



Chapter 9 Review (continued)

5. What is the objective of CPR?

To perform a combination of effective chest compressions and ventilations to circulate blood that contains oxygen to the victim's brain and other vital organs.

6. Fill in the blanks: Compressions given at the correct rate are at least 100 per minute to a maximum of 120 per minute.

7. What is the appropriate compression depth when providing CPR on an adult?

- A** | At least 2 inches but no more than 2.4 inches
- B** | At least 2.4 inches but no more than 3 inches
- C** | 2 inches
- D** | 1½ inches

8. When providing two-rescuer CPR, when should rescuers change positions?

- A** | At least every 2 minutes
- B** | After 5 cycles of 30 compressions and 2 ventilations
- C** | During the analysis of the AED
- D** | All of the above

9. You arrive on the scene when another lifeguard is performing CPR. What should you do first?

Confirm that EMS personnel have been summoned. If EMS personnel have not been summoned, do so before getting the AED or assisting with care.



Chapter 9 Review (continued)

10. When performing two-rescuer CPR on an infant, describe how lifeguards should modify the following:

Compression-to-ventilation ratio:

Change from (30:2) to (15:2). This provides more frequent ventilations for infants.

The compression technique:

Use the encircling thumbs technique.

11. Provide three examples why a lifeguard could or should stop CPR:

Answers should include three of the following:

- You see an obvious sign of life, such as normal breathing or victim movement.
- An AED is ready to analyze the victim's heart rhythm.
- Other trained responders, such as a member of your safety team or EMS personnel, take over and relieve you from compression and ventilation responsibilities.
- You are alone and too exhausted to continue.
- The scene becomes unsafe.

12. True or False: It is not appropriate to use an AED on a victim who is pregnant.

False

Why?

Defibrillation shocks transfer no significant electrical current to the fetus. The mother's

survival is paramount to the infant's survival.



Chapter 10 Review

1. When completing a secondary assessment, lifeguards use **SAMPLE** to gather a brief history of the responsive victim. What does the mnemonic **SAMPLE** stand for?

S Signs and Symptoms

A Allergies

M Medications

P Pertinent past medical history

L Last oral intake

E Events leading up to the incident

2. List five symptoms of sudden illnesses:

Answers should include five of the following:

- Changes in LOC, such as feeling light-headed, dizzy or becoming unconscious
- Nausea or vomiting
- Difficulty speaking or slurred speech
- Numbness or weakness
- Loss of vision or blurred vision
- Changes in breathing; the person may have trouble breathing or may not be breathing normally
- Changes in skin color (pale, ashen or flushed skin)
- Sweating
- Persistent pressure or pain
- Diarrhea
- Paralysis or an inability to move
- Severe headache



Chapter 10 Review (continued)

3. List the general precautions for injury or sudden illness on land:

- 1) Care for any life-threatening conditions first.
- 2) Monitor the victim's condition and watch for changes in LOC.
- 3) Keep the victim comfortable and reassure them.
- 4) Keep the victim from getting chilled or overheated.
- 5) Do not give the victim anything to eat or drink unless the victim is awake, able to swallow and follow simple commands and intake is indicated based on the treatment recommendations.
- 6) Care for any other problems that develop, such as vomiting.

4. How should you provide care for a victim experiencing a diabetic emergency?

If it is available, give 15 to 20 grams of sugar in the form of glucose tablets to the victim. If not available, 15 to 20 grams of sugar from several sources can be given including glucose- and sucrose-containing candies, jelly beans, orange juice or whole milk.

5. When would you summon EMS personnel for a victim of a diabetic emergency? Provide two examples.

Answers should include two of the following:

- The person is unresponsive.
- The person is responsive but not fully awake and unable to swallow.
- The person does not feel better within about 10 to 15 minutes after taking sugar or gets worse.
- A form of sugar cannot be found immediately. Do not spend time looking for it.



Answers should include three of the following:

- 7. You are lifeguarding at a crowded facility and recognize a patron in the water who appears to be having a seizure. Place the following response and care steps in order.**

Remove the person from the water.	3
Perform a primary assessment.	4
Support the person with their head above water until the seizure ends.	2
Summon EMS personnel.	1
If breathing normally, position the victim on their side and monitor airway and breathing.	5

A | Cardiac arrest

C | Seizure

B | Diabetic emergency

D | Stroke



Chapter 10 Review (continued)

9. What does FAST stand for?

- F** Face
- A** Arms
- S** Speech
- T** Time

When would you use it?

Use this stroke screening scale to identify and care for a victim of stroke.

10. What are a lifeguard's objectives while waiting for EMS personnel to arrive?

- 1) Care for any life-threatening conditions first.
- 2) Help the victim rest in a comfortable position and reassure them. If there are signs and symptoms of shock, lie the person flat.
- 3) Monitor the victim's condition and watch for any changes in LOC.
- 4) Keep the victim from getting chilled or overheated (care for shock).
- 5) Care for other problems that develop, such as vomiting.



Chapter 10 Review (continued)

11. The following are signs and symptoms of shock, EXCLUDING:

- | | |
|---|---|
| A Altered level of consciousness | C Restlessness or irritability |
| B Warm or dry skin | D Nausea or vomiting |

12. Fill in the blank. Heat stroke is a life-threatening condition that occurs when the body's systems are overwhelmed by heat and stop functioning.

List three signs and symptoms of the condition described above:

Answers should include three of the following:

- Changes in LOC
- Skin that is hot to the touch
- Skin that is wet or dry or appears red or pale
- Vision disturbances
- Seizures
- Vomiting
- Rapid and shallow breathing
- Rapid and weak pulse
- Lack of sweating



Chapter 11 Review

1. Head, neck or spinal injuries often are caused by high-impact/high-risk activities. List three examples of high-impact/high-risk activities in an aquatic environment.

Answers should include three of the following:

- Entering head-first into shallow water
- Falling from greater than a standing height
- Entering the water from a height, such as a diving board, water slide, an embankment, cliff or tower
- Striking a submerged or floating object
- Receiving a blow to the head
- Colliding with another swimmer
- Striking the water with high impact, such as falling while water skiing or surfing

2. Place the general rescue procedures for caring for a head, neck or spinal injury in the water in order:

Check for responsiveness and breathing.	4
Activate the EAP.	1
Perform a rescue providing manual in-line stabilization.	3
Re-assess the victim's condition and provide appropriate care.	6
Safely enter the water.	2
Remove the victim from the water using the appropriate spinal backboarding procedure.	5



Chapter 11 Review (continued)

3. Fill in the blank. The _____ head splint _____ technique is used for performing manual in-line stabilization for victims in the water.

4. Backboards are a standard piece of rescue equipment used at aquatic facilities for immobilizing and removing the victim from the water. Backboards work best when they are equipped with:

- 1) A chest strap to secure the victim to the board.
- 2) A head-immobilizer device that can be attached to the top, or head-end, of the board.

5. You enter the water to rescue a victim with a suspected spinal injury. You determine that the victim is not breathing. What should you do next?

- | | |
|--|---|
| A <u>Remove the victim from the water using the Passive Victim Extrication technique.</u> | C Remove the victim water using a Modified Spinal Backboarding procedure. |
| B Remove the victim from the water using the Spinal Backboarding procedure. | D Delay removal from the water and provide 2 minutes of in-water ventilations. |

6. The following statements describe appropriate rescue techniques for a victim with a suspected spinal injury, EXCEPT:

- | | |
|---|---|
| A If the victim is in shallow water, you do not need to use a rescue tube to support yourself. | C <u>If the victim is small and is in shallow water, you do not need to use a backboard to extricate the victim.</u> |
| B If the victim is submerged, you should not use the rescue tube when submerging and bringing the victim to the surface. | D If the victim is at the surface in deep water, you may need a rescue tube to support yourself and the victim. |



Chapter 11 Review (continued)

7. When rescuing a victim of a suspected head, neck or spinal injury using the spinal backboarding procedure, communication with the victim is important. What should lifeguards tell the victim?

Answers include:

- Let the victim know what you are doing.
- Reassure the victim along the way.
- Tell the victim not to nod or shake their head but instead say “yes” or “no” to answer questions.

8. Describe four ways that additional lifeguards can help during spinal backboarding and extrication from the water.

Answers should include four of the following:

- Helping to submerge, position and stabilize the backboard on deck
- Supporting the in-water rescuer in deep water
- Supporting the backboard while the chest strap and head-immobilizer are secured.
- Securing the chest strap or the head-immobilizer device
- Communicating with and reassuring the victim
- Guiding the backboard as it is being removed from the water
- Removing the backboard from the water
- Providing care after the victim has been removed from the water



Chapter 11 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERFRONT LIFEGUARDS:



1. Special considerations for spinal injuries at a facility with a beach or other zero-depth entry may include:

- A** | Injury from board diving and extrication from deep water onto a pier high above the water.
- B** | Injury from exiting a slide and dealing with current in a catch pool.
- C** | Injury from plunging during a running entry, in-line stabilization and extrication from extremely shallow water.
- D** | Injury from fall from play structure, dealing with victim's life jacket during stabilization and extrication.

2. How should lifeguards extricate a suspected spinal injury victim who is secured to a backboard from a zero-depth or sloping entry waterfront?

After reaching the zero-depth entry, the lifeguards slightly lift the head-end of the backboard, carefully pulling the backboard and victim out of the water. Gently lower the backboard and victim to the ground once out of water using proper lifting techniques to prevent injury.



Chapter 11 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS:



1. How should lifeguards extricate a suspected spinal injury victim who is secured to a backboard from a zero-depth entry wave pool?

After reaching the zero-depth entry, the lifeguards slightly lift the head-end of the backboard, carefully pulling the backboard and victim out of the water. Gently lower the backboard and victim to the ground once out of water using proper lifting techniques to prevent injury.

2. When rescuing a suspected head, neck or spinal injury victim from a winding river or other moving water attraction, moving water and objects in the water can pull or move the victim. What should be done to help minimize movement and protect the victim?

Answers include:

- Push the emergency stop button.
- Ask other lifeguards or patrons for help in keeping objects and people from floating into the rescuer while they are supporting the victim.
- Keep the victim's head pointed upstream.
- Place the victim on a backboard by following the facility's spinal backboarding procedure.



Chapter 11 Review (continued)

ADDITIONAL REVIEW QUESTIONS FOR WATERPARK & AQUATIC ATTRACTION LIFEGUARDS:



3. What actions should lifeguards take when responding to a victim with a suspected head, neck or spinal injury in a catch pool?

- Immediately signal to other lifeguards or dispatchers to stop sending riders.
- If possible, stop the flow of water by pushing the emergency stop button.
- Once in-line stabilization is achieved and the victim is turned face-up, move the victim to the calmest water in the catch pool if water is still flowing. If several slides empty into the same catch pool, calmer water usually is between two slides.
- Place the victim on a backboard by following the facility's spinal backboarding procedure.

4. What challenges might you encounter when responding to a head, neck or spinal injury in a waterpark? Consider different attractions such as a wave pool, winding river, speed slide, etc.

Answers include:

- Water movement (current or waves)
- Ride vehicles
- Tight spaces such as steps on a tower or walls on a speed slide

AQUATIC ATTRACTION LIFEGUARDING (WATER ≤ 3') SKILL CHARTS AND ASSESSMENT TOOLS

In addition to performing the steps listed in the skill chart in the correct order, participants must meet the criteria listed at the proficient level to be checked off for this skill.

This outline includes the skill charts and skill assessment tools for the Aquatic Attraction Lifeguarding (Water ≤ 3') specific skills:

- Passive Victim at or Near the Surface In Water ≤ 3', Face-Up
- Passive Victim at or Near the Surface In Water ≤ 3', Face-Down

Use the skill charts and skill assessment tools at the end of each lesson (in Section B) when conducting and evaluating all other skills in this course.

SKILL CHART: PASSIVE VICTIM AT OR NEAR THE SURFACE IN WATER ≤ 3', FACE-UP

1. Swim or quickly walk to the victim's side. If you are using a rescue tube, let go of it but keep the strap around your shoulder.
2. Reach down to grasp the victim's arms midway between the elbows and shoulders. Move the victim's arms up alongside the victim's head.
3. Grab the rescue tube, if you are using one, and position it under the victim's shoulders. The victim's head should naturally fall back into an open-airway position. If the victim is unresponsive, quickly check for breathing.
 - If an assisting responder is available to assist with extrication, remove the victim from the water without positioning the rescue tube under the victim's shoulders.
4. Move the victim to a safe exit point, remove the victim from the water, assess the victim's condition and provide appropriate care.

SKILL CHART: PASSIVE VICTIM AT OR NEAR THE SURFACE IN WATER ≤ 3', FACE-DOWN

1. Swim or quickly walk to the victim's side. If you are using a rescue tube, let go of it but keep the strap around your shoulder.
2. Reach down to grasp the victim's arms midway between the elbows and shoulders. Move the victim's arms up alongside the victim's head.
3. Glide the victim forward and roll the victim face-up by pushing the victim's arm that is closest to you under the water while pulling the victim's other arm across the surface toward you.
 - If the water is too shallow to glide the victim forward without causing further injury, roll the victim to a face-up position by simultaneously lifting and rolling the victim over.
4. Grab the rescue tube, if you are using one, and position it under the victim's shoulders. The victim's head should naturally fall back into an open-airway position. If the victim is unresponsive, quickly check for breathing.
 - If an assisting responder is available to assist with extrication, remove the victim from the water without positioning the rescue tube under the victim's shoulders.
5. Move the victim to a safe exit point, remove the victim from the water, assess the victim's condition and provide appropriate care.

SKILL ASSESSMENT TOOL: PASSIVE VICTIM AT OR NEAR THE SURFACE IN WATER ≤ 3'

Criteria	Proficient	Not Proficient
Victim's mouth and nose remain above water	<ul style="list-style-type: none"> ■ Maintains victim's mouth and nose above water 	<ul style="list-style-type: none"> ■ Does not maintain victim's mouth or nose above water
Victim is moved to a safe exit point	<ul style="list-style-type: none"> ■ Moves victim to a safe exit point using the rescue tube or a backboard to support the victim 	<ul style="list-style-type: none"> ■ Is unable to move the victim to a safe exit point. ■ Victim is not supported by the rescue tube or backboard (if used) and slips off or submerges ■ Releases contact with the victim
Victim's head is maintained in an open-airway position at the surface.	<ul style="list-style-type: none"> ■ Places rescue tube under the victim's shoulders so that the victim's head falls back to an open airway position* 	<ul style="list-style-type: none"> ■ Victim's head is tilted forward (chin toward chest)