

# Search and Rescue Council of New Jersey

## Guideline for the Evaluation and Accreditation of Technical Rescue Teams

As recommended by the SARCNJ Technical Rescue Committee 11/11/2009

1. **PURPOSE:** To establish a process for the evaluation and accreditation of SARCNJ technical rope rescue teams.
2. **REASON:** To provide criteria to:
  - a. Determine SARCNJ member teams technical rope rescue skills and practical application of those skills.
  - b. Provide the SARCNJ with the basis to represent those qualifying member teams as Technical Rope Rescue Teams.
3. **STANDARD:** Standards for evaluation include: NFPA 1670, NFPA 1006, ASTM, MRA, and recognized training manuals.
4. **DURATION OF QUALIFICATION:** 3 calendar years
5. **METHODS for EVALUATION:**
  - a. Evaluation is performance based as a team, utilizing established scenarios developed by the Technical Committee.
  - b. Scenarios are divided into low angle/slope and high angle/vertical situationals.
  - c. Evaluation is a timed event.
  - d. Credentialed SARCNJ evaluators evaluate performance of the entire team responding and resolving the situational.
  - e. Focus of evaluation is:
    - i. Safety of all concerned
    - ii. A timely resolution of the situation
    - iii. Efficiency and effectiveness of the method (s) chosen to resolve the situation
  - f. Team is evaluated in multiple categories with scoring of each component by at least three (3) evaluators.
6. **SCENERIO GUIDELINES**
  - a. The evaluation includes both low and high angle evacuation.
    - i. Low Angle (<50 degrees from horizontal) – Patient is mid-slope with injuries requiring cervical spine immobilization. Evolution is a raise only – no lower.

- ii. High Angle (>70 degrees from horizontal) – Patient is mid-face with injuries requiring cervical spine immobilization. Evolution is a raise only – no lower.
- b. General guidelines for the Low Angle or Semi-Tech Evacuation Evaluation include:
- i. The Semi-Tech Evacuation Evaluation is designed to examine the team's ability to access, stabilize, and evacuate an injured patient over rough and uneven terrain, utilizing rope belay/raise/lower systems, where appropriate.
  - ii. For the semi-tech evacuation the team must package a subject into a litter and transport the subject to a designated area, such as search base or road accessible by an ambulance. The carry out must be long enough to demonstrate competency to the evaluator team and must include transporting the litter both up and down a hill steep enough to require a roped belay or raise/lower system. The hill or hills must be at least one full rope pitch in length. A litter wheel may not be employed during this scenario.
  - iii. The team must demonstrate the following:
    - 1. Proper patient packaging
    - 2. Proper litter carrying technique, including rotating
    - 3. Providing medical care to patient during transportation
    - 4. Using belays or raise/lower systems as appropriate to terrain and conditions
    - 5. Safe belaying technique
    - 6. Choose appropriate anchors, correctly tie anchors, safe operation of belays and raise/lower systems
    - 7. At least one subject will have simulated injuries that require medical attention. The use of moulage, props, etc to help realistically simulate injuries is encouraged. Simulated injuries must include at least two of the following:
      - a. Hypothermia
      - b. Heat Stroke
      - c. Spinal injury, requiring immobilization
      - d. Extremity fracture or dislocation, requiring immobilization
      - e. Internal injury/bleeding
    - 8. The team must provide appropriate simulated medical care, actually performing the skills as realistically as possible (actually splinting extremities, performing C-spine immobilization, etc). The team may only simulate use medical equipment that they actually have. For example, if a medic would like to simulate administering oxygen, a functional O2 tank and mask must be on scene.
    - 9. The Lead Evaluator and Safety Officer must have a plan for how to deal with any real emergencies that occur during the

Semi-Tech Evaluation and communicate this plan to the testing team.

- c. General guidelines for the High Angle Rescue Evaluation include:
  - i. The High Angle Rescue Evaluation is designed to examine the team's ability to access, stabilize, and evacuate an injured patient from a high angle situation, utilizing rope belay/raise/lower systems, where appropriate.
  - ii. The team must demonstrate the following:
    - 1. Scene size-up and safety
    - 2. Patient access and stabilization
    - 3. Patient Pickoff
    - 4. Mid-face litter loading, packaging, and medical care
    - 5. Vertical raise and lower system design and operation
    - 6. Switching between Lower/Raise while under load
    - 7. Knot passing
    - 8. Over coming edge/lip
    - 9. Providing medical care to patient during transportation
    - 10. Safe belaying technique
    - 11. Choose appropriate anchors, correctly tie anchors, safe operation of belays and raise/lower systems
  - iii. At least one subject will have simulated injuries that require medical attention. The use of moulage, props, etc to help realistically simulate injuries is encouraged. Simulated injuries must include one of the following:
    - 1. Spinal injury, requiring immobilization
    - 2. Extremity fracture or dislocation, requiring immobilization
    - 3. Internal injury/bleeding
  - iv. The team must provide appropriate simulated medical care, actually performing the skills as realistically as possible (actually splinting extremities, performing C-spine immobilization, etc). The team may only simulate use medical equipment that they actually have. For example, if a medic would like to simulate administering oxygen, a functional O2 tank and mask must be on scene.
  - v. The Lead Evaluator and Safety Officer must have a plan for how to deal with any real emergencies that occur during the Evaluation and communicate this plan to the testing team.