

CENTRE FOR OCCUPATIONAL HEALTH AND SAFETY TRAINING (COHST)
**Recognition of Prior Learning (RPL) &
 Recognition of Current Competencies (RCC)**
Application Form



Student's Name

Student No.

UNIT: HLTF302B Provide first aid in remote situation

Unit Structure:

This unit of competency describes the skills and knowledge required to provide first aid to a casualty in a remote and/or isolated situation.

This unit should be assessed either after or in conjunction with achievement of the following related competency unit:

- HLTF301C Apply first aid

If you can answer yes to all the performance criteria below for this unit then you might be eligible for RPL/RCC.

Note: RPL/RCC can only be granted for whole units (Please note that some assignments have multiple units, so you might have to complete part of an assignment which contains units you have not received RPL for)

Nominal hours for this unit

Element 1		Prepare to respond to emergency in a remote situation	Assessor OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
1.1	Prepare for isolated travel or work, accounting for expected contingencies			
1.2	Assess casualty's condition and determine appropriate response in order to minimise hazards and determine need for medical assistance			
1.3	Evaluate options for transporting casualty or waiting for medical assistance in relation to environmental issues, transport availability and casualty's condition			

Element 2	Provide first aid in a remote situation	Assessor
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			OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
2.1	Determine and explain the nature of casualty's injury/condition and relevant first aid procedures to provide comfort			
2.2	Seek consent from casualty prior to applying first aid management			
2.3	Provide first aid response to address casualty's condition and in accordance with effective first aid principles			
2.4	Respond to the casualty in a culturally aware, sensitive and respectful manner			
2.5	Monitor casualty's condition and undertake ongoing first aid procedures as required			
2.6	Calmly provide information to reassure casualty during the wait for medical assistance, adopting a communication style to match the casualty's level of consciousness			
2.7	Provide shelter from elements in accordance with environmental conditions			
2.8	Document condition of casualty over time to assist in on-going management			

Element 3			Assessor OFFICE USE ONLY	
Work in conjunction with medical and emergency services support				
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
3.1	Establish communication links to medical services, using relevant communication equipment to ensure prompt control action is undertaken			
3.2	Request ambulance support or appropriate medical assistance according to relevant circumstances			
3.3	Administer medication under direct instruction from an <i>authorised health worker</i> as required			
3.4	Assist in the evacuation of the casualty by following directions given by emergency services as required			

Element 4			Assessor OFFICE USE ONLY	
Evaluate the incident				

	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
4.1	Evaluate management of the incident and where required develop an action plan in consultation with relevant parties			
4.2	Participate in debriefing/evaluation in order to improve future operations and address individual's needs			
4.3	Formulate and review contingency planning to identify and select improved or alternative management principles and procedures as required			

APPLICANTS PLEASE CHECK:

- That you have ticked off each element and performance criterias for this unit
- Written in each element **HOW YOU HAVE GAINED THAT EXPERIENCE**
- Attached evidence summary sheet
- Attached evidence to support your claim for each element (including 3 examples of your work)
- Ensured that any qualification transcripts have been certified

UNIT: HLTFA302B Provide first aid in remote situation

Element	Element	√ RPL/RCC CLAIM	√Attach supporting evidence
1	Prepare to respond to emergency in a remote situation	<input type="checkbox"/>	<input type="checkbox"/>
2	Provide first aid in a remote situation	<input type="checkbox"/>	<input type="checkbox"/>
3	Work in conjunction with medical and emergency services support	<input type="checkbox"/>	<input type="checkbox"/>
4	Evaluate the incident	<input type="checkbox"/>	<input type="checkbox"/>

NEXT

Complete the **RPL Tracking Record Form** and **Assessment Outcome Form** on the following pages

- 1 Write in your details and contact information
- 2 Sign the **RPL Tracking Record Form** and **Assessment Outcome Form** where indicated on both pages.
- 3 Send this completed application form and **ALL EVIDENCE** to :

RPL APPLICATIONS, COHST, Swinburne University, Mail No H71, PO Box 218, Hawthorn, VIC 3122

- Once COHST has received your application for RPL allow up to 5 weeks for RPL to be processed.
- If the COHST assessor is **NOT SATISFIED** with the evidence provided you will be asked, to submit additional information or asked to come in for a **Presentation of Evidence Interview** and be assessed on your claims.
- If COHST finds that your RPL application is correct you will be notified and credited for the unit and will not have to do course work for that unit. Please note that some assignments have multiple units, so you might have to complete part of an assignment which contains units you have not received RPL for.

Student's Name

Student No.

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Assessors Comments (OFFICE USE ONLY)

Element number where Gap Training/Learning is required	Evidence/Training/Learning still required			
Assessor Comments -				
Final student result for the competency (please circle)			RPLC	RPLN
Name of Assessor:				
Signature of Assessor:		Date		

RPL/RCC Assessment Outcome

INSTRUCTIONS FOR DEPARTMENT

1. The student must be enrolled in the current year in the subjects listed in this application. Please attach an Amendment to Enrolment if the student is not currently enrolled in all subjects.
2. Please forward this form to TAFE Student Administration for processing.

Student Number:

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 Date of Birth:

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Student Family Name:

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 Student Other Names:

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Course Code :	
Course Title in which RPL is sought:	

ASCOL UNIT CODE	UNIT TITLE	RPL Assessment Granted (RPLC) /Not Granted (RPLN)	TEACHER/ASSESSORS NAME and SIGNATURE
HLTFA302B	Provide first aid in remote situation		Assessors Name Assessors Signature

Assessor Name	Signature	Date
Student Name Acknowledgement	Signature	Date
Student Administration Entered	Initials	Date

**Please return this completed RPL Application Form with your evidence to:
RPL APPLICATIONS, COHST, Swinburne University, Mail No H71, PO Box 218, Hawthorn, VIC 3122**