



QUALIFICATIONS  
NETWORK



QNUK Level 3 Award in  
Paediatric First Aid (RQF)  
Qualification Specification

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## 1 Introduction

Qualifications Network Limited (QNUK) is an Awarding Organisation recognised and regulated by the Office of Qualifications and Examinations (Ofqual) in England, the Council for Curriculum, Examinations and Assessment (CCEA) in Northern Ireland and Qualifications Wales.

This specification outlines key information required by users of the qualification to ensure they can make an informed decision about the suitability of the qualification they are taking or proposing to take for the purposes that they intend to use it.

## 2 Contact us

Please get in touch if you need any advice or guidance with this qualification.

### Head Office:

Qualifications Network  
First Floor Offices  
86A Lancaster Road  
Enfield  
Middlesex  
EN2 0BX

**Email:** [centres@qnuk.org](mailto:centres@qnuk.org)

**Tel:** 020 3795 0559

## 3 Document control

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V4	Aug 2022	All	New template

## 4 Qualification objective

This qualification develops the learner's knowledge, understanding and skills in delivering first aid in an early years setting.

The qualification is ideal for those seeking employment or those already in employment who are looking to progress. The qualification support employers to meet their regulatory requirements.

## 5 Sector support and industry recognition

This qualification has been written with the collaboration of members of the First Aid Awarding Organisation Forum (FAAOF).

The qualification meets the requirements for first aid training outlined in the Early Years Foundation stage documentation.

## 6 Geographical coverage

This qualification is available across the UK and internationally.

## 7 Benefit to learners

This qualification will provide learners with the skills, knowledge and understanding to support individuals carrying out a first aid role in the workplace.

## 8 Progression

Learners could progress to the:

- QNUK Level 3 Award in First Aid at Work (RQF)
- QNUK Level 3 Award for the First Person on the Scene (RQF)
- QNUK Award in Responding to Anaphylactic Reactions (RQF)

### 8.1 Combined qualifications

The QNUK Level 3 Award in Responding to Incidents with an AED (RQF) or the QNUK Award in Responding to Anaphylactic Reactions (RQF) could be delivered alongside this qualification; extra learning time is required to cover the additional content.

## 9 Recognition of prior learning

QNUK would accept requests for recognition of prior learning (RPL) where a learner is able to provide sufficient, reliable and valid evidence, such as:

- Achievement of the Level 3 Award in Emergency Paediatric First Aid (RQF)

This must have been achieved recently and no more than 7 weeks can pass between starting The Level 3 Award in Emergency Paediatric First aid and completing the Paediatric First aid qualification.

## 10 Qualification information

<b>Qualification Number (QN):</b>	603/0559/9
<b>Learning Aim:</b>	60305599
<b>Total Qualification Time (TQT):</b>	15
<b>Guided Learning Hours (GLH):</b>	12
<b>Credit value:</b>	2
<b>Level:</b>	3
<b>Validity:</b>	3 years
<b>Assessment:</b>	Invigilated MCQ paper, and observed practical tasks
<b>Achieving the qualification:</b>	Learners must achieve the two mandatory units
<b>Time to complete:</b>	Learners must complete the qualification within 7 weeks

## 11 Qualification structure

### Mandatory units

Unit No.	Unit Title	Level	GLH	TUT	Credit
R/615/2426	Emergency Paediatric First Aid	3	6	7	1
L/615/2425	Managing Paediatric Illness, Injuries and Emergencies	3	6	8	1

### Optional units

Unit No.	Unit Title	Level	GLH	TUT	Credit
N/A	N/A	N/A	N/A	N/A	N/A

### 11.1 Rules of combination

Learners must complete both mandatory units

## 12 Learner entry requirements

Any prior knowledge, skills, understanding or qualifications that are required to undertake this qualification are outlined below:

Learners should be a minimum of 16 years to undertake this qualification

Learners aged 14 - 16 may take the qualification; however, they should not be relied upon to be the sole first aider.

Learners must demonstrate first aid procedures as part of their assessment, as they would in a real work environment, including providing CPR to a casualty on the floor. Therefore, learners must be physically capable of performing CPR on the floor.

There are no other pre-requisites for this qualification.

## 12.1 Language of the assessment

Learners must have sufficient command of the English language to understand and undertake the recommended assessment methods for this qualification.

It is strongly recommended that learners should be working at level 2 literacy.

Learners may use BSL, however in these cases centres may be asked to video record assessments for verification purposes.

## 13 Learner identification

Anyone undertaking a regulated qualification is required to prove their identity. This ensures only those with a genuine claim to the qualification can make that claim.

Learners who are unwilling or unable to provide a copy of their identification prior to assessment will not be able to complete their qualification.

Identification documents should reflect the learners current legal name. Certificates will be issued in this name.

Learners are required to provide at least 1 form of photo I.D. If photo I.D is not available, 2 forms of non-photographic I.D can be produced.

Acceptable forms of photographic I.D (1 required) are:

- Signed UK Photo card driving licence
- Signed passport (any nationality)
- Valid EU Photo identity card
- SIA security licence (with photo)
- Current and valid warrant card issued by HM forces or Police
- Current and valid Prison service card (with photo)
- Proof of age card
- Employee photo identification card
- Student photo identification card for a recognised educational establishment
- Firearms license (with photo)

Acceptable forms of non-photographic I.D (2 required) are:

- Current driving license – paper version
- Birth certificate
- Marriage/civil partnership certificate
- Mortgage statement (issued within past 12 months)
- Bank or building society statement (issued within last 3 months)
- Bank or building society account opening confirmation letter (issued within last 3 months)
- Credit card statement (issued within last 3 months)
- Pension or endowment financial statement (issued within last 12 months)
- P45 or P60 statement (issued within last 12 months)
- Council tax statement (issued within last 12 months)
- Valid work permit or visa issue by UK government
- Utility bill – excluding mobile phone bill (issued within last 3 months)
- Benefit statement e.g. child benefit, pension (issued within last 3 months)

## 14 Delivery requirements

This qualification is delivered in a face-to-face setting over a minimum of a 2-day period. Learners should complete the qualification within 7 weeks.

### 14.1 Venue requirements

#### 14.1.1 Physical classrooms

Classrooms should be suitable for learning and meet all relevant Health and Safety requirements.

Classrooms should:

- have suitable light and heat
- be a suitable temperature
- be free from obtrusive noise and odours
- have sufficient seating
- have suitable surfaces for note taking
- be of a suitable size for learners (approximately 11m<sup>3</sup> per learner in a room with 3m high ceilings)
- have access to toilets and welfare facilities
- have access to refreshment facilities

#### 14.1.2 Video conferencing classrooms

Where this qualification is delivered over a video conferencing learners should have a suitable device that allows an appropriate level of interaction. Interaction should include:

- Quiz functionality
- White board
- Audio
- Cameras on policy\*

\*Where learners are under 18, a 'camera on' policy may impact safeguarding policies. In these cases, a suitable assessment should be made of the appropriateness of cameras on. Where an assessment is being undertaken that requires cameras to be on, any safeguarding concerns must be addressed and managed appropriately in order to maintain the validity and authenticity of the assessment.

## 14.2 Equipment requirements

Centres are responsible for ensuring this qualification is delivered using the following equipment as a minimum.

- suitable presentation materials
- reference manual (Learners may be required to purchase these separately)
- suitable number of child resuscitation manikins (one manikin per four learners)
- suitable number of infant resuscitation manikins (one manikin per four learners)
- suitable manikin disinfectant wipes
- suitable number of AED training devices (one unit per four learners)
- first aid kits containing a range of equipment including dressings and bandages as appropriate for the work environment
- a range of adrenaline auto injector training devices (one unit per four learners)
- other first aid equipment as appropriate for the individual setting

Additional equipment may include:

- Example medications such as inhalers
- Posters and realia

## 14.3 Blended learning

Blended learning is accepted for this qualification.

Blended learning includes: Live face-to-face learning and assessment, the use of live video conferencing, self study and self-directed e-learning.

Where video conferencing, or self-directed e-learning is used, no more than 1/2 of the total guided learning hours can be delivered in these formats. The remaining 50% must be delivered in a live, face-to-face format with learners and assessor being in the same physical location.

The first unit of this qualification cannot be delivered or assessed in a blended manner.

### 14.3.1 E-learning

When using e-learning it is important that:

- the individual being trained knows how to use the technology that delivers the training
- the training provider has an adequate means of supporting the individual during their training;
- the training provider has a robust system in place to prevent identity fraud. This includes gaining copies of the learners I.D, their IP address and tracking them through the course.
- the provider has an appropriate means of assessing the e-learning component of the training.

## 14.4 Assessor to learner ratio

The maximum assessor to learner ratio for this qualification is 1: 12

## 14.5 Recommended resources

Learners should have access to a suitable first aid manual for the duration of the course. Examples include:

- Voluntary Aids Society First Aid manual
- Paediatric First aid Manual from QNUK resources



## 15 Centre personnel requirements

Centres are required to ensure anyone involved in the delivery, assessment and quality assurance of our qualifications are registered with QNUK and approved to deliver, assess or quality assure the qualification.

Any courses delivered without the above approval will be invalidated.

Internal quality assurers are required to ensure that trainers, assessors and quality assurance staff, and their records, including qualification certificates and CPD are up to date and maintained.

### 15.1 Trainers/ assessors

Specific details related to the training, assessing, subject knowledge and CPD requirements are outlined in our delivery resource requirements document. This is available on our website.

Those involved in the delivery and assessment of this qualification must:

1. Hold a suitable first aid or medical qualification (type 1) appendix 4, **and**
2. Hold a teaching qualification as listed in appendix 1, **and**
3. Hold an assessing qualification (type 1) as listed in appendix 1, **and**
4. Show current evidence of continuing professional development in teaching, assessment and the subject matter. **and**
5. Provide an acceptable log of teaching first aid within the last 3 years **or**
6. Provide an acceptable record of competently teaching theoretical and practical first aid sessions under the supervision of a suitably qualified assessor

### 15.2 Internal quality assurers

Internal quality assurers for this qualification must:

Meet the above trainer/ assessor requirements.

They should also:

- meet the qualification requirement for IQAs (type 1) listed in appendix 2 **and**
- show current evidence of continuing professional development in assessment, quality assurance and the subject matter.

## 16 Assessment requirements

Learners are assessed for this qualification using the following methods:

- Multiple choice examination
- Observation

### 16.1 Multiple choice examination

The MCQ paper will be taken under examination conditions, i.e. learners will sit a minimum of 1.25 metres apart, will not confer during the examination and no electronic devices (such as mobile phones) or books, including dictionaries, will be permitted.

<b>Language of assessment:</b>	English
<b>Duration:</b>	60 minutes
<b>Pass mark:</b>	70% (28/40)
<b>Grading:</b>	Pass / Fail

## Resits

If a learner is unsuccessful with the multiple-choice examination, they can have a second attempt. This must be taken within the time allowed for completion of the qualification.

Where a learner has failed to score 60% or more they should undertake additional training before resitting the assessment.

If a learner fails a second attempt, with or without additional training, they will have failed the qualification and will not be able to resit the assessments.

## 16.2 Practical observations

Learners are required to undertake a number of practical observations.

These practical's can be in a simulated environment, however the practical should be undertaken as it would in a real environment and in line with the purpose of the qualification.

<b>Language of assessment:</b>	English
<b>Duration:</b>	As required
<b>Pass mark:</b>	100%
<b>Grading:</b>	Pass / Fail

## Resits

If a learner is unsuccessful with the practical observation, they can have a second attempt. This must be taken within the time allowed for completion of the qualification.

If a learner fails a second attempt, with or without additional training, they will have failed the qualification and will not be able to resit the assessments.

## 17 Moderation

This qualification has been rated as QNUK as medium risk. As centre assessors are responsible for assessment decisions, it is subject to both moderation and verification.

Moderation will initially require QNUKs EQA department to moderate or check each assessment decision for the MCQ assessment. We will also ensure centres assessment decisions in regard to practical skills in this, or a closely related subject are verified.

The level of moderation and verification is dependent on the risk level of the centre.

Direct claims status (DCS) may be available for medium or low risk centres who have demonstrated consistent high levels of quality assurance. DCS is reviewed regularly at intervals determined by our Centre Assessment Standards Scrutiny Strategy (CASSS).

Centres should allow for an additional 3 days where assessment decisions are being moderated.

### 18 Results

The centre is required to submit learner results within 10 working days of assessment to Qualifications Network UK for moderation.

We will issue verified results and appropriate certification to the approved centre within 10 working days of receiving the results.

Centres with DCS will have certificates issued within 7 days.

Centres will forward results and/or certificates to learners, who can expect to receive them within 24 working days of taking the assessment. If learners have not received results and/or certificates within 28 working days, they should contact the centre in the first instance.

If a centre is in a sanction or has been withdrawn from QNUK either voluntarily or otherwise, we reserve the right to send certificates directly to learners.

## 19 Appendix 1: Units of assessment

Unit 1 | Emergency Paediatric First Aid

| R/615/2426

### Unit summary:

The learner will develop the skills, knowledge and understanding to deal effectively with a range of emergencies in an early years setting requiring first aid.

#### LO 1 The learner will understand the role and responsibilities of a paediatric first aider

Assessment Criteria		Types of evidence
<b>The learner can:</b>		
1.1	Identify the role and responsibilities of a paediatric first aider	MCQ
1.2	Identify how to minimise the risk of infection to self and others	MCQ
1.3	Differentiate between an infant and a child for the purposes of first aid treatment	MCQ

#### LO 2 The learner will be able to assess an emergency situation safely

Assessment Criteria		Types of evidence
<b>The learner can:</b>		
2.1	Conduct a scene survey	Obs
2.2	Conduct a primary survey on <ul style="list-style-type: none"> <li>• an infant</li> <li>• a child</li> </ul>	Obs
2.3	Summon appropriate assistance when necessary	Obs

#### LO 3 The learner will be able to provide first aid for an infant and a child who are unresponsive

Assessment Criteria		Types of evidence
<b>The learner can:</b>		
3.1	Identify when to administer Cardiopulmonary Resuscitation (CPR) to: <ul style="list-style-type: none"> <li>• an infant</li> <li>• a child</li> </ul>	Obs

<b>3.2</b>	Demonstrate CPR using: <ul style="list-style-type: none"> <li>• an infant manikin</li> <li>• a child manikin</li> </ul>	Obs
<b>3.3</b>	Identify when to place an infant or a child into the recovery position	Obs
<b>3.4</b>	Demonstrate how to place: <ul style="list-style-type: none"> <li>• an infant into the recovery position</li> <li>• a child into the recovery position</li> </ul>	Obs
<b>3.5</b>	Demonstrate continual monitoring of breathing, whilst they are in the recovery position, for: <ul style="list-style-type: none"> <li>• an infant</li> <li>• a child</li> </ul>	Obs
<b>3.6</b>	Identify how to administer first aid to an infant or a child who is experiencing a seizure	MCQ

**LO 4 The learner will be able to provide first aid to an infant and a child who are choking**

Assessment Criteria		Types of evidence
<b>The learner can:</b>		
<b>4.1</b>	Identify when an infant or a child is choking	Obs
<b>4.2</b>	Demonstrate how to administer first aid to: <ul style="list-style-type: none"> <li>• an infant who is choking</li> <li>• a child who is choking</li> </ul>	Obs

**LO 5 The learner will be able to provide first aid to an infant and a child with external bleeding**

Assessment Criteria		Types of evidence
<b>The learner can:</b>		
<b>5.1</b>	Identify whether external bleeding is life-threatening	Obs
<b>5.2</b>	Demonstrate how to administer first aid to an infant or a child with external bleeding	Obs

<b>LO 6</b>	<b>The learner will know how to provide first aid to an infant or a child who is suffering from shock</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>6.1</b>	Recognise when an infant or a child is suffering from shock	MCQ
<b>6.2</b>	Identify how to administer first aid to an infant or a child who is suffering from shock	MCQ

<b>LO 7</b>	<b>The learner will know how to provide first aid to an infant or a child with bites, stings and minor injuries</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
	Identify how to administer first aid to an infant or a child:	
<b>7.1</b>	<ul style="list-style-type: none"> <li>• Bites</li> <li>• Stings</li> <li>• Small cuts</li> <li>• Grazes</li> <li>• Bumps and bruises</li> <li>• Small splinters</li> <li>• Nose bleeds</li> </ul>	MCQ

R/615/2426

Emergency Paediatric First Aid

## What needs to be learnt?

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

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

Minimising the risk of infection may include:

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

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

Differentiating age ranges for first aid treatment may include:

- 1.3** • Infants: under 1-year-old
- Children: 1 to 18 years' old

Conducting a scene survey may include:

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

The primary survey sequence may include:

- Danger
- Response
- 2.2** • Airway
- Breathing
- Circulation

Summoning appropriate assistance may include:

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

Identifying when to administer CPR must include:

- 3.1**
- When the casualty is unresponsive and:
    - Not breathing
    - Not breathing normally/agonal breathing

Demonstrating CPR must include:

- 3.2**
- 5 initial rescue breaths
  - 30 chest compressions
    - Correct hand positioning
    - Correct compression depth for infant and child
    - 100-120 per minute
  - 2 rescue breaths
    - Correct rescue breath positioning
    - Blowing steadily into mouth (*about 1 sec to make chest rise*)
    - Taking no longer than 10 seconds to deliver 2 breaths
  - AED (*Defibrillator*)
    - Correct placement of AED pads
    - Following AED instructions

**CPR** – minimum demonstration time of 2 minutes (*at floor level For child manikin*). May additionally include use of rescue breath barrier devices.

Identifying when to place the casualty into the recovery position should include when the casualty has lowered levels of response and:

- 3.3**
- Does not need CPR
  - Is breathing normally
  - Is uninjured

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

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

Placing a casualty into the recovery position may include:

- 3.4**
- Placing in a position that maintains a stable, open, draining airway at floor level (*or holding in position for infants*)
  - Continually monitoring airway and breathing
  - Turning the casualty onto the opposite side every 30 minutes

Continually monitoring airway and breathing includes:

- 3.5**
- Continual checking for normal breathing to ensure that cardiac arrest can be identified immediately

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

- 3.6**
- Keeping the casualty safe (*removing dangers*)
  - Noting the time and duration of the seizure
  - Opening airway and checking breathing post seizure
  - Determining when to call 999/112

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



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

- Speak
- Cough
- Cry
- Breathe

Identifying severe choking may include recognising the casualty is:

- 4.1
- Unable to cough effectively
  - Unable to speak or cry
  - Unable or struggling to breathe
  - In visible distress
  - Unconscious

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

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Administering first aid for choking should include the following:

- 4.2
- Encouraging to cough
  - Up to 5 back blows
  - Up to 5 abdominal thrusts (*chest thrusts for infants*)
  - Calling 999/112 when required
  - CPR if unconscious

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

- Is under pressure
- Spurts in time with the heartbeat

Recognition that arterial bleeding is a life-threatening emergency

- 5.1
- Identifying the severity of venous bleeding may include recognising the blood:
- Volume in veins is comparable to arteries
  - Flows profusely from the wound

Recognition that venous bleeding is a life-threatening emergency

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

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Administering first aid for external bleeding may include:

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

- 5.2
- Catastrophic bleeding treatment may include:
- Wound packing
  - Tourniquet application
  - Improvised tourniquet application

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

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**Shock:** hypovolaemic shock (*resulting from blood loss*)

Hypovolaemic shock recognition may include:

- Pale, clammy skin
- Fast, shallow breathing
- 6.1 • Rise in pulse rate
- Cyanosis
- Dizziness/passing out when sitting or standing upright

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

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Administering first aid for hypovolaemic shock may include:

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

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

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Administering first aid for bites may include:

- Irrigation
- Dressing
- Seeking medical advice

Administering first aid for stings may include:

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

Administering first aid for small cuts and grazes may include:

- Irrigation
- Dressing

7.1 Administering first aid for bumps and bruises may include:

- Cold compress for 10 minutes
- Small splinter removal may include the following steps:
- Cleaning of area
- Remove with tweezers
- Dress

Administering first aid for a nosebleed may include:

- Sitting the casualty down, head tipped forwards
- Pinching the soft part of the nose
- Telling the casualty to breathe through their mouth
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**Infant or a child:** the learner may apply their skills or knowledge to **either** an infant (*baby*) **or** a child first aid situation because the recognition/treatment would be the same.

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Rationale for level	Level	Emphasis	Comments
Knowledge	3	Strong	
Skills	3	Strong	
Overall	3		

Rationale for TQT and credit	Hours	Comments
Guided learning:	6	
Directed study:	0	
Independent study:	1	
Work-based learning:	0	
Non invigilated assessment:	0	
TUT:	7	
Credit value:	1	

### Unit summary:

The learner will develop the skills, knowledge and understanding to deal effectively with a range of injuries and illnesses in the workplace requiring first aid.

<b>LO 1</b>	<b>The learner will be able to provide first aid to an infant or a child with suspected injuries to bones, muscles and joints</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>1.1</b>	Recognise a suspected: <ul style="list-style-type: none"> <li>• Fracture or dislocation</li> <li>• Sprain or strain</li> </ul>	MCQ
<b>1.2</b>	Identify how to administer first aid for an infant or a child with a suspected: <ul style="list-style-type: none"> <li>• Fracture or dislocation</li> <li>• Sprain or strain</li> </ul>	MCQ
<b>1.3</b>	Demonstrate how to apply: <ul style="list-style-type: none"> <li>• A support sling</li> <li>• An elevated sling</li> </ul>	Obs

<b>LO 2</b>	<b>The learner will be able to provide first aid to an infant or a child with suspected head and spinal injuries</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>2.1</b>	Recognise a suspected: <ul style="list-style-type: none"> <li>• Head injury</li> <li>• Spinal injury</li> </ul>	MCQ
<b>2.2</b>	Identify how to administer first aid for an infant or a child with a suspected head injury	MCQ
<b>2.3</b>	Demonstrate how to administer first aid for an infant or a child with a suspected spinal injury	Obs

<b>LO 3</b>	<b>The learner will know how to provide first aid to an infant or a child with conditions affecting the eyes, ears and nose</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
Identify how to administer first aid for an infant or a child with a foreign body in the:		
<b>3.1</b>	<ul style="list-style-type: none"> <li>• Eye</li> <li>• Ear</li> <li>• Nose</li> </ul>	MCQ
<b>3.2</b>	Identify how to administer first aid for an infant or a child with an eye injury	MCQ

<b>LO 4</b>	<b>The learner will know how to provide first aid to an infant or a child with an acute medical condition or sudden illness</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
Recognise suspected:		
<b>4.1</b>	<ul style="list-style-type: none"> <li>• Diabetic hypoglycaemic emergency</li> <li>• Asthma attack</li> <li>• Allergic reaction</li> <li>• Meningitis</li> <li>• Febrile convulsions</li> </ul>	MCQ
Identify how to administer first aid for an infant or a child who is suspected to be suffering from:		
<b>4.2</b>	<ul style="list-style-type: none"> <li>• Diabetic hypoglycaemic emergency</li> <li>• Asthma attack</li> <li>• Allergic reaction</li> <li>• Meningitis</li> <li>• Febrile convulsions</li> </ul>	MCQ

<b>LO 5</b>	<b>The learner will know how to provide first aid to an infant or a child who is experiencing extremes of body temperature</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
Recognise when an infant or a child is suffering from:		
<b>5.1</b>	<ul style="list-style-type: none"> <li>• Extreme cold</li> <li>• Extreme heat</li> </ul>	MCQ
Identify how to administer first aid for an infant or a child who is suffering from:		
<b>5.2</b>	<ul style="list-style-type: none"> <li>• Extreme cold</li> <li>• Extreme heat</li> </ul>	MCQ

<b>LO 6</b>	<b>The learner will know how to provide first aid to an infant or a child who has sustained an electric shock</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>6.1</b>	Identify how to safely manage an incident involving electricity	MCQ
<b>6.2</b>	Identify how to administer first aid for an infant or a child who has suffered an electric shock	MCQ

<b>LO 7</b>	<b>The learner will know how to provide first aid to an infant or a child with burns and scalds</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>7.1</b>	Identify how to recognise the severity of burns and scalds	MCQ
<b>7.2</b>	Identify how to administer first aid for an infant or a child with burns and scalds	MCQ

<b>LO 8</b>	<b>The learner will know how to provide first aid to an infant or a child with suspected poisoning</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>8.1</b>	Identify how poisonous substances can enter the body	MCQ
<b>8.2</b>	Identify how to administer first aid for an infant or a child with suspected sudden poisoning	MCQ

<b>LO 9</b>	<b>The learner will be able to provide first aid to an infant or a child with anaphylaxis</b>
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<b>Assessment Criteria</b>		<b>Types of evidence</b>
<b>The learner can:</b>		
<b>9.1</b>	Recognise suspected anaphylaxis in an infant or a child	MCQ
<b>9.2</b>	Identify how to administer first aid for an infant or a child with suspected anaphylaxis	MCQ
<b>9.3</b>	Demonstrate the use of a 'training device' adrenaline auto-injector	Obs

L/615/2425

Managing Paediatric Illness, Injuries and Emergencies

## What needs to be learnt?

Recognising fractures, dislocations, sprains or strains may include:

- 1.1**
- Pain
  - Loss of power
  - Unnatural movement
  - Swelling or bruising
  - Deformity
  - Irregularity
  - Crepitus
  - Tenderness

Administering first aid for fractures or dislocations may include:

- Immobilising
- Calling 999/112, or
- Arranging transport to hospital

Administering first aid for sprains or strains may include:

- 1.2**
- Rest
  - Ice
  - Compression/comfortable support
  - Elevation

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

Demonstrating the application of a sling must include:

- 1.3**
- A support sling
  - An elevated sling

Recognising concussion, compression and fractured skull may include:

- Mechanism of injury
- Signs and symptoms
- Conscious levels

**2.1** Recognising spinal injury may include:

- Mechanism of injury
- Pain or tenderness in the neck or back

**Head injury:** includes concussion, compression and skull fracture. The learner is not expected to differentiate between these conditions.

Administering first aid for head injury may include:

- 2.2**
- Determining when to call 999/112
  - Maintaining airway and breathing
  - Monitoring response levels
  - Dealing with fluid loss

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

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Demonstrating first aid for spinal injury may include:

- Calling 999/112
  - Keeping the head and neck in-line
- 2.3** • Safe method(s) of placing the casualty into the recovery position whilst protecting the spine  
*(if the airway is at risk)*

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

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Administering first aid for a foreign body in the eye may include:

- Washing small particles of dust or dirt out of the eye
- Ensuring the water runs away from the good eye

**Foreign body:** includes dust/sand/a fly etc. on the eye

- 3.1** Administering first aid for a foreign body in the ear or nose may include:

- Transportation to hospital for the safe removal of the object

**Foreign body:** includes marbles, rubbers, smarties stuck in the ear or nose.

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

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Administering first aid for an embedded object in the eye may include:

- Covering the injured eye
- Ensuring the good eye is not used (*cover if needed*)
- Calling 999/112 or arranging transport to hospital

Administering first aid for a chemical in the eye may include:

- 3.2** • Irrigation with large volumes of clean water (*unless contra-indicated due to the chemical involved*)
- Ensuring the water runs away from the good eye
  - Calling 999/112

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

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Recognising a diabetic hypoglycaemic emergency may include:

- Fast onset
- Lowered levels of response
- Pale, cold and sweaty skin
- Normal or shallow breathing
- Rapid pulse

Recognising an asthma attack may include:

- Difficulty breathing and speaking
- Wheezy breathing
- Pale and clammy skin
- Cyanosis
- Use of accessory muscles

Recognising an allergic reaction may include:

- 4.1
- Red, itchy, raised skin rash (*hives*)
  - Red, itchy eyes
  - Swelling (*often under the eyes*)

Recognising meningitis may include:

- Fever (*high temperature*)
- Dislike of bright lights
- Stiff neck
- Sleepy or vacant
- Slurred speech
- Rash (*if progressed to sepsis*)
- Tense or bulging soft spot on the head (*infants*)

Recognising febrile convulsions may include:

- Rapid rise in body temperature (*above 38°C*)
- Seizure
- Stoppage of breathing during the seizure
- Blue lips (*cyanosis*)

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Administering first aid for a diabetic hypoglycaemic emergency may include:

- Giving 10g of glucose for conscious casualties (*subject to sufficient response levels*)
- Providing further food or drink if casualty responds to glucose quickly
- Determining when to call 999/112

Administering first aid for an asthma attack may include:

- Correct casualty positioning
- Assisting a casualty to take their reliever inhaler and use a spacer device
- Calming and reassurance
- Determining when to call 999/112

4.2

Administering first aid for an allergic reaction may include:

- Moving the casualty away from the trigger (*allergen*)
- Contacting parents/following care plan
- Closely monitoring for the signs of anaphylaxis and treating accordingly

Administering first aid for meningitis may include:

- Calling 999/112 and informing concerns of meningitis
- Knowledge that early hospital treatment might be vital

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

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Recognising extreme cold (*hypothermia*) may include:

- Pale skin
- Cold to the touch
- Shivering (*followed by muscle stiffness as body cools further*)
- Slowing down of bodily functions
- Lethargy and confusion
- Eventually unconsciousness

Recognising extreme heat (*heat exhaustion*) may include:

- Pale, sweaty skin
- Nausea or vomiting
- Hot to the touch

5.1

Recognising extreme heat (*heat stroke*) may include:

- High body temperature
- Confusion and agitation
- Hot, dry and Flushed skin
- No sweating
- Fitting
- Throbbing headache
- Lowered levels of consciousness

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

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Administering first aid for extreme cold (*hypothermia*) may include:

- Sheltering from the environment
- Replacing wet clothing with dry garments
- Wrapping in warm blankets
- Covering the head
- Giving a warm drink
- Maintaining airway and breathing
- If unconscious, place in recovery position with insulating materials under and around the casualty
- Calling 999/112

5.2

Administering first aid for extreme heat (*heat exhaustion*) may include:

- Moving the casualty to a cool shaded area
- Remove excessive clothing
- Correct casualty positioning
- Rehydrating with water or oral rehydration solutions

Administering first aid for extreme heat (*heat stroke*) may include:

- Moving the casualty away from the heat source
- Calling 999/112
- Rapid cooling using the fastest method possible

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

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Identifying how to safely manage an incident involving electricity may include:

6.1

- Preventing anyone approaching the casualty when the electricity is still LIVE
  - Taking safe steps to isolate the power
  - Only approaching once the scene is safe
-

Administering first aid for electric shock may include:

- 6.2
- Checking airway and breathing
  - Resuscitation
  - Treating burns and other injuries
  - Calling 999/112

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

Recognising the severity of burns and scalds may include:

- 7.1
- Cause
  - Age
  - Burn/scald size
  - Depth
  - Location

Administering first aid for dry/wet heat burns may include:

- Cooling the burn for 20 minutes
- Removing jewellery and loose clothing
- Covering the burn
- Determining when to call 999/112

Administering first aid for chemical burns may include:

- 7.2
- Ensuring safety
  - Brushing away dry/powder chemicals
  - Irrigating with copious amounts of water (*unless contra-indicated*)
  - Treating the face/eyes as priority

Administering first aid for electrical burns may include

- Ensuring it is safe to approach/touch the casualty
- Checking DRABC and treating accordingly
- Cooling the burns

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

Identification of the following routes a poison can enter the body may include:

- 8.1
- Ingested (*swallowed*)
  - Inhalation (*breathed in*)
  - Absorbed (*through the skin*)
  - Injected (*directly into skin tissue, muscles or blood vessels*)

Administering first aid for **corrosive** substances may include:

- 8.2
- Ensuring your own safety
  - Substances on the skin – diluting and washing away with water
  - Swallowed substances – rinsing out the mouth then giving frequent sips of milk or water (*subject to sufficient levels of response*)
  - Calling 999/112 and giving information about the poison if possible
  - Protecting airway and breathing
  - Resuscitation if necessary using PPE/Barrier devices

Administering first aid for **non-corrosive** substances may include:

- Ensuring your own safety
- Calling 999/112, and giving information about the poison if possible
- Protecting airway and breathing
- Resuscitation if necessary using PPE/barrier devices

Recognising anaphylaxis may include rapid onset and rapid progression of a life-threatening airway, breathing and circulation problem:

- Airway – Swelling of the tongue, lips or throat
- Breathing – Difficult, wheezy breathing or tight chest
- Circulation
  - Dizziness, feeling faint or passing out
  - Pale, cold clammy skin and fast pulse
  - Nausea, vomiting, stomach cramps or diarrhoea

9.1

There may also be skin rash, swelling and/or flushing.

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

Administering first aid for anaphylaxis may include:

- Calling 999/112
- Correct casualty positioning
- Assisting to use their adrenaline auto-injector
- Resuscitation if required

9.2

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

9.3

**The use of a 'training device' adrenaline auto-injector:** must be demonstrated using a training device and **NOT** a live auto-injector

Rationale for level	Level	Emphasis	Comments
Knowledge	3	Strong	
Skills	3	Strong	
Overall	3		

Rationale for TQT and credit	Hours	Comments
Guided learning:	6	
Directed study:	0	
Independent study:	2	
Work-based learning:	0	
Non invigilated assessment:	0	
TUT:	8	
Credit value:	1	

## 20 Appendix 2: Command verbs

To ensure that learners can meet the requirements of each criterion, they should be explained to the learner prior to assessment and fully understood by the Assessor for this qualification.

<b>Conduct</b>	Carry out
<b>Demonstrate</b>	Apply skills in a practical situation and/or show an understanding of the topic
<b>Describe</b>	Write or speak about the topic or activity giving detailed information
<b>Identify</b>	Provide brief information about a subject, specific process or activity
<b>Recognise</b>	Acknowledge validity of. Know from before

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## Appendix 3: Specimen assessment material

1. At what point should an ambulance be called for a casualty who is having a seizure?

- A Immediately in call cases
- B If the seizure lasts longer than normal
- C Only if the casualty has never had a seizure before
- D Only if the casualty is a child

2. Which **ONE** of the following is a treatment for a casualty suffering from shock?

- A Allow a drink of warm sweet tea
- B Allow sips of a suitable sports drink
- C Give nothing to eat or drink
- D Provide small amounts of water

3. Which of the following items should **NOT** be found in a First Aid kit?

- A Dressings
- B Ice pack
- C Safety pins
- D Paracetamol