

# 2023-2024 MICHIGAN HOSA EVENT MODIFICATIONS FOR REGIONAL CONFERENCES!







#### New for 2023 - 2024

Scissors provided by competitor have been clarified as bandage scissors.

American Red Cross materials have been added as a resource.

Skill events now require attire appropriate to the occupational area be worn for Round 2.

These guidelines are written for ILC. States may modify events or have different event processes and deadlines. Be sure to check with your Local/State Advisor (or state website) to determine how the event is implemented for the regional/area or state conference.

Editorial updates have been made. These guidelines are specifically for Michigan HOSA members in preparation for the regional leadership conferences. For more information about regionals, please visit <a href="https://www.michiganhosa.org/regionals">www.michiganhosa.org/regionals</a>.

#### **Event Summary**

CERT Skills provides members with the opportunity to gain knowledge and skills required for disaster preparedness and response. This competitive event consists of 2 rounds and each team consists of two (2) people. Round One is a written, multiple-choice test and the top scoring teams will advance to Round Two for the skills assessment. This event aims to inspire members to be proactive future health professionals and respond efficiently to complex community hazards in the absence of emergency

services. At the regional level, all teams will advance to the round two- skill round. The test scores will be combined with the skill scores for final rating.

#### **Dress Code**

Competitors shall wear proper business attire or official HOSA uniform or attire appropriate to the occupational area during testing. Round 2 skill events require attire appropriate to the occupational area be worn. Benus points will be awarded for proper dress. At the regional level, teams can wear the occupational appropriate attire to test in, in addition to the skills. They do NOT need to change into business attire to take the test. Bonus points will not be added for proper dress, but judges/event managers will make note if competitors are NOT in proper dress which could result in overall point deduction.

_	Competitors Must Provide
	Photo ID
	Two #2 pencils (not mechanical) with eraser for both rounds
Disaste	r Kit with the following items:
	Supply bag
	Barrier supplies for each competitor:
	<ul> <li>10 pairs of exam gloves (non-latex) per competitor</li> </ul>
	o Goggles or safety glasses
_	<ul> <li>2 dust masks (student to verbalize N95 Mask would be used)</li> </ul>
	Helmet (may be simulated/verbalized)
	Sturdy shoes or Boots (may be simulated/verbalized)
	Bleeding Control/Bandage Materials (team's choice)
	Bandage Scissors
	Plain paper (or note cards) and pen or marker for documentation and labeling treatment areas if needed
	Clip board and spiral notebook (optional)

#### **General Rules**

- Competitors in this event must be active members of HOSA and in good standing.
- 2. **Eligible Divisions:** Secondary and Postsecondary / Collegiate divisions are eligible to compete in this event.
- 3. Competitors must be familiar with and adhere to the <u>"General Rules and Regulations of the HOSA Competitive Events Program (GRR)."</u>
  - A. Per the <u>GRRs</u> and <u>Appendix H</u>, HOSA members may request accommodation in any competitive event. To learn the definition of an accommodation, please read <u>Appendix H</u>. To request accommodation for the International Leadership Conference, <u>submit the request form here</u> by May 15 at midnight EST.
  - B. To request accommodation for any regional/area or state level conferences, submit the request form <a href="here">here</a> by your state published deadline. Accommodations must first be done at state in order to be considered for ILC. Regional accommodations MUST be submitted two weeks prior to your regional conference date. Email <a href="mailto:Samantha.pohl@mhc.org">Samantha.pohl@mhc.org</a> for questions.
- 4. All competitors shall report to the site of the event at the time designated for each round of competition. At ILC, competitor's <a href="mailto:photo ID">photo ID</a> must be presented prior to ALL competition rounds. Event managers will be checking photo IDs at the regional level as well. A digital copy of a photo is appropriate (i.e., picture on phone of photo ID from school portal).
- 5. Competitors should compete in skill events at the highest level of training. An example would be students enrolled in an Emergency Medical Technician course should compete in the Emergency Medical Technician event and NOT in the CERT or CPR/First Aid event.

#### **Official References**

- 6. All official references are used in the development of the written test. The specific references selected for each skill are from the CERT Curriculum.
- 7. CERT Training Materials (as posted as of September 2023): <u>Community Emergency Response</u>
  <u>Team Training Participant Manual</u>

- 8. CERT Online Training Course IS 317 (as posted as of September 2023): https://training.fema.gov/is/courseoverview.aspx?code=IS-317.a&lang=en
- 9. <u>American Heart Association</u>. <u>Basic Life Support</u>. <u>Latest edition</u>.
- 10. American Heart Association. Heartsaver First Aid Student Handbook. Latest edition.
- 11. American Red Cross. Basic Life Support. Latest edition.
- 12. American Red Cross. First Aid/CPR/AED. Latest edition.
- 13. Competitors at the HOSA International Leadership Conference should have completed a classroom-based FEMA CERT basic training course. For information about CERT training in your state or starting a CERT chapter, go to <a href="https://www.ready.gov/kids/start-program">https://www.ready.gov/kids/start-program</a>. Those who do not have access to a classroom-based training course can access one online via <a href="https://www.ready.gov/cert">https://www.ready.gov/cert</a>.

#### **Round One Test**

- 14. <u>Test Instructions:</u> The written test will consist of fifty 50 multiple choice items in a maximum of 60 minutes.
- 15. **Time Remaining Announcements:** There will be NO verbal announcements for time remaining during ILC testing. All ILC testing will be completed in the Testing Center and competitors are responsible for monitoring their own time. There will be NO verbal announcements for time remaining during regional testing. Students are responsible for monitoring their own time.
- 16. Written Test Plan

•	Disaster Preparedness	10%
	CERT Organization	
•	Treating Life Threatening Conditions (including BLS, CPR, AED, Frist Aid)	36%
•	Disaster Medical Operations (including head-to-toe assessment)	20%
•	Disaster Psychology	6%
•	Fire Safety	6%
•	Light Search and Rescue Operations	10%
	Terrorism	

- 17. The average test score from Round One will be used to qualify the team for Round Two. All teams will advance to the round two skills.
- 18. Sample Test Questions
  - 1. What kind of permission does a CERT volunteer need to treat an unconscious patient? (CERT pp 3-2)
    - A. Contact nearest family member to get permission
    - B. An unconscious patient is assumed to have given implied consent
    - C. An EMT must give permission to treat an unconscious patient
    - D. Contact the patient's physician for permission and instructions
  - 2. During one-rescuer adult CPR, compressions should be performed at what rate? (AHA BLS pp 19; AHA Heartsaver CPR/AED pp 26 ARC BLS pp 37)
    - A. 60-80/min
    - B. 80-100/min
    - C. 100-120/min
    - D. 120-140/min
  - 3. Which burn classification is characterized by reddened, dry skin; pain: and swelling? (CERT Pages 3-9/10)
    - A. Superficial
    - B. Partial thickness
    - C. Complete

#### D. Full thickness

#### **Round Two Skills**

19. Round Two is the performance of a selected skill(s). The Round Two skills approved for this event are: Highlighted in yellow are the two skills that will be evaluated at the regional level.

Skill I A&B: Treating Life-Threatening Conditions5 minutesSkill II: Head-to-Toe Assessment5 minutesSkill III: Lifts and Carries8 minutesSkill IV: Splinting a Closed Fracture5 minutes

- 20. The selected skill(s) will be presented to competitors as a written scenario at the beginning of the round. The scenario will be the same for each team and will include a challenging component that will require the competitors to apply critical thinking skills. A sample scenario can be found here.
- 21. Timing will begin when the scenario is presented to the team and competitors will be stopped at the end of the time allowed. Note: Team members may verbalize/simulate the helmet and boots, and may don safety equipment prior to receiving the scenario.
- 22. The scenario is a secret topic. Competitors MAY NOT discuss or reveal the secret topic until after the event has concluded or will face penalties per the GRRs.
- 23. Judges will provide information to competitors as directed by the rating sheets. Competitors may ask questions of the judges while performing skills if the questions relate to patient's condition and will be included in the scenario or judge script.

#### **Final Scoring**

- 24. Teams must earn a score of 70% or higher on the combined skill(s) of the event (excluding the test) in order to be recognized as an award winner at the ILC.
- 25. Final rank is determined by adding the averaged round one test score plus round two skill score. In case of a tie, the highest averaged test score will be used to determine final placement.

# **CERT SKILLS**

Section #		Division:	SS	PS/Collegiate
Competitor #		Judge's Signature		
Rescuer □ 1	□ 2			

Patient is in a structure with light damage. There will be two patients to assess, one per rescuer. Use a duplicate rating sheet for each rescuer.

Skil	III: Head-to-Toe Assessment (5 minutes)	Possi	ble	Awarded
1.	Donned safety equipment: helmet, goggles, gloves (work & non-latex) dust N95 mask, and sturdy shoes or boots. Helmet, boots and N95 mask equipment may be verbalized.	2	0	
2.	Identified a patient to assess.	1	0	
3.	Asked "How were you hurt?" if patient responsive and able to communicate.	2	0	
4.	If conscious, asked permission to conduct assessment.	2	0	
5.	If responsive, asked patient about injuries, pain, bleeding or other symptoms, and checked for medical ID emblems on bracelet or necklace.	2	0	
6.	Checked body parts from the top to the bottom for continuity of bones and soft tissue injuries (DCAP-BTLS) and pulse, movement, sensation in all extremities, in the following order:  a. Evaluated head and verbalized observations.	1	0	
	b. Evaluated neck and verbalized observations.	1	0	
	c. Evaluated shoulders and verbalized observations.	1	0	
	d. Evaluated chest and verbalized observations.	1	0	
	e. Evaluated arms and verbalized observations.	1	0	
	f. Evaluated abdomen and verbalized observations.	1	0	
	g. Evaluated pelvis and verbalized observations.	1	0	
	h. Evaluated legs and verbalized observations.	1	0	
	i. Followed the DCAP-BTLS in the above listed order.	4	0	
7.	Checked own hands for patient bleeding throughout assessment.	2	0	
8.	Checked pulse in all extremities and verbalized observations.	4	0	
9.	Talked to patient throughout assessment to reduce anxiety.	2	0	
10.	Minimized movement of the head and spine during assessment.	2	0	
11.	Verbalized to judge the appropriate type of treatment needed.	4	0	
12.	Correctly documented injuries on CERT Victim Treatment Area Record.	2	0	
13.	Used alcohol based hand-rub for hand hygiene.	2	0	
14.	Used appropriate verbal and nonverbal communication with patient and other personnel including partner.	2	0	
тот	AL POINTS – SKILL II	4	<b>1</b> 1	
70%	Mastery for Skill II = 28.7			

## **CERT Victim Treatment Area Record**

### Form 2.14: CERT Victim Treatment Area Record

VICTIM	TREATMENT AREA RECORD	CERT	DATE		
TREATME	ENT AREA LOCATION				
TIME	NAME OR DESCRIPTION	CONDITION/TREATMENT (update as needed)		MOVED TO	TIME OU
					70
					-
SCRIBE(S	5)			PAGE	OF

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# **CERT SKILLS**

Section #	Division:	_ SS	PS/Collegiate
Competitor #	Judge's Signature		

The purpose of Skill **III** is to demonstrate the ability to perform lifts and carries. In lifts #4 and #7, team members demonstrate the lift on each other. In #5, the lift is demonstrated on a volunteer who is small in stature or manikin. Lift #6 is verbalized/simulated only (patient should also be volunteer who is small in stature).

**Note to judges and event personnel:** <u>Competitor and Volunteer Patient safety</u> must be the primary consideration during the demonstration of each lift. If the performance of any lift or carry could be considered unsafe, please have the competitors demonstrate and verbalize the lift without actually lifting the patient.

Skill III: Lifts and Carries (8 minutes)					Awarded
1.	N95 r	ed safety equipment: helmet, goggles, gloves (work & non-latex) dust mask, and sturdy shoes or boots. Helmet, boots and N95 mask ment may be verbalized.	2	0	
2.	Surve	eyed the scene by doing a thorough size-up.	2	0	
3.		kly verbalized consideration of their safety, capability, and tions, and decided if they should approach the situation and how.	2	0	
instr	ucts the	cts one team member where to sit to assume the role patient, and other team member to move the patient to safety using the one-strap carry. (team members demonstrate on each other)			
4.	One-l	Person Pack-Strap Carry	2	0	
	a.	Verbalized to patient "I'm going to carry you to safety."			
	b.	Positioned self safely facing away from the patient.	1	0	
	C.	Placed the patient's arms over the rescuer's shoulders and grabbed the hands in front of the rescuer's chest.	1	0	
	d.	Hoisted the patient by bending forward slightly, until patient's feet just cleared the floor.	1	0	
	e.	Carried patient to safe area and gently lowered patient to chair/ground, keeping the back straight and using the legs.	1	0	
wher	e to mo	cts volunteer patient where to sit and instructs the rescuers ve the patient to safety (a very short distance) using the two- r(demonstrated on patient small in stature or manikin).			
5.	Two-l	Person Carry	2	0	
	a.	Verbalized to patient "We are going to carry you to safety."			
	b.	Rescuer 1 squatted at the patient 's head and grasped the patient from behind the midsection, then reached under the arms and grasped the patient 's left wrist with his/her right hand, and vice versa.	1	0	
	C.	Rescuer 2 squatted between the patient's knees, facing either toward or away from the patient, and grasped the outside of the patient's legs at the knees.	1	0	
	d.	Both rescuers rose to a standing position, protecting their backs and lifting with legs.	1	0	

kill III: Lift	s and Carries (con't) - Items Evaluated	Poss	sible	Awarded
e.	Carried patient to safe area and gently lowered patient to chair/ground, keeping the back straight and using the legs.	1	0	
f.	Rescuers communicated with each other and coordinated their movements throughout the lift.	2	0	
. Chair	Carry			
	ge instructs volunteer patient where to sit and instructs the uers to simulate the chair carry. (simulation only)			
	t, competitors should <u>verbalize</u> and <u>simulate</u> the lift WITHOUT ng the patient.			
Chai	r Carry	2	0	
a.	Verbalized to patient "We are going to carry you to safety."			
b.	Rescuer 1 crossed the patient's arms in his or her lap, and faced the back of the chair and grasped the back uprights.	1	0	
C.	Rescuer 2 grasped the two front legs of the chair. *Either facing the patient or facing away from the patient, whichever is more comfortable for the rescuer.	1	0	
d.	Both rescuers tilted the chair back and verbalized lifting the chair simultaneously.	1	0	
e.	Verbalized carried patient to safe area and gently set the chair down.	1	0	
f.	Rescuers communicated with each other and coordinated their movements throughout the lift.	2	0	
ludge instru atient, and	tet Drag  Outs the other team member where to lie to assume the role of instructs the rescuer to move the patient to safety using the patient to members demonstrate on each other)			
Blan a.	ket Drag  Assessed location and verbalized to the judge that there is no debris that would cause additional injury.	1	0	
b.	Verbalized to patient "I'm going to wrap you in a blanket and move you to safety."	2	0	
C.	Wrapped the patient in a blanket securely.	1	0	
d.	Squatted at the patient's head and grasped the blanket behind the patient's head providing appropriate support.	1	0	
e.	Dragged the patient clear of the hazard to the 'safe area'.	1	0	
	d alcohol based hand-rub for hand hygiene.	2	0	
. Res	cuer 1 used appropriate verbal and nonverbal communication with ent and other personnel throughout all skills including partner.	2	0	
patie				İ
patie 0. Res	cuer 2 used appropriate verbal and nonverbal communication with ent and other personnel throughout all skills including partner.	2	0	