## AACE Trainer Assessment Record | Venue Risk Assessment

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| **Trainee Trainer Name:** | |
| **1. Be able to assess the training environment to reduce risks in preparation for physical intervention training** | |
| 1.1 Risk assess a training environment where physical skills will be taught | ☐ |
| 1.2 Identify and record ways of reducing risk in the training environment | ☐ |
| 1.3 Identify personal factors that may increase risk for the participants | ☐ |
| 1.4 Conduct a safety briefing | ☐ |
| 1.5 Ensure participants are physically prepared to take part in physical intervention skills training | ☐ |

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| **Venue:** |  |
| **Checklist** | **Suitable / Safe** |
| Handwashing facilities available |  |
| Adherence to employer/venue infection control measures |  |
| Floor surface clean, free from obstruction, no defects/lifting surface |  |
| Walls projections/hanging objects |  |
| Lighting |  |
| Pillars and corners |  |
| Electrical sockets undamaged and secure |  |
| Doors/windows undamaged and secure |  |
| Adequate clear floor area |  |
| Trip hazards |  |
| Ceiling condition/hanging objects |  |
| Room Temperature |  |
| Access to first aid equipment |  |
| Nominated first aider accessible |  |
| Access to drinking fluids |  |
| Fire Safety and Response Plan |  |
| **Hazards Identified and Control Measures** | |

## Trainee Trainer Declaration

The training environment is suitable for the activities being undertaken.

**Name: Signature: Date:**

**Senior trainer signature:**

|  |  |  |  |  |
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| **Trainer Assessment Record**  **38TA | AACE Guiding Skills**  **Trainee Trainer Name:** | | | | |
| Tick relevant box only when the trainee trainer has met the assessment criteria shown. Any skills not taught or achieved must be crossed out and explanation provided. | | | | |
| 1. **Understand the considerations for the use of physical skills** | | | |  |
| 1.1 Recognise the risks of physical skills | | | | ☐ |
| 1.2 Identify the authority for the use of physical skills | | | | ☐ |
| 1.3 Recognise individual and team responsibilities | | | | ☐ |
| 1.4 Recognise importance of primary and secondary strategies to reduce the need for physical skills | | | | ☐ |
| **2. Be able to use physical intervention to guide and redirect a person** | | | | |
| 2.1 Identify training and operational risks using redirection and guiding skills: | | |  | ☐ |
| 2.2 Demonstrate low arousal physical intervention skills to prompt or guide an individual:  **Skills:** Non-contact guiding | Assessment touch | Single Cradle guide| Double cradle guide | Paired cradle guide | Hook and cradle guide | | | | ☐ |
| 2.3 Demonstrate low arousal physical intervention skills to re-direct an individual:  **Skills:** Hook and cradle turn | Elbow turn | | | | ☐ |
| 2.4 Demonstrate applications of non-restrictive skills relevant to the workplace: | | | | ☐ |
| Senior Trainer Comments: | | | | |
| **Pass ☐** | **Refer ☐** | **Fail ☐** | | |
| All skills listed above have been taught and the trainee trainer has demonstrated competence in each skill unless otherwise shown. A pass achievement indicates I am happy the participant has reached skill proficiency and can be certificated for this level as a trainer.  **Senior Trainer Name: Signature: Date:** | | | | |

**Trainer Assessment Record**

**39TA | AACE Restrictive Skills**

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| **Trainee Trainer Name:** | | | |
| Tick relevant box only when the trainee trainer has met the assessment criteria shown. Any skills not taught or achieved must be crossed out and explanation provided. | | | |
| **1. Understand how to reduce the risks of restrictive physical interventions** | | | |
| 1.1 Identify restrictive practices and capacity | | | ☐ |
| 1.2 Recognise key risk factors of restrictive physical interventions | | | ☐ |
| 1.2 Recognise individual and team responsibilities to reduce risk and respond to medical emergencies | | | ☐ |
| **2. Be able to hold / restrict a person to facilitate urgent essential treatment** | | |  |
| 2.1 Identify training and operational risks using clinical holding skills | | | ☐ |
| 2.2 Demonstrate how to use interrupters to restrict movement of a supine patient:  **Skills:** Ground narrow supine | Trolley narrow supine | | | ☐ |
| 2.3 Demonstrate how to use interrupters to restrict movement of a seated patient  **Skills:** Seated hooks | Seated interrupters | Seated wraps | | | ☐ |
| 2.4 Demonstrate applications of clinical holding skills to enable procedures or treatment   **Interrupters**: Trolley bed | Ambulance | Essential Treatment   **Use of equipment:** Strapping in | Risk considerations | | | ☐  ☐  ☐ |
| Senior Trainer Comments: | | | |
| **Pass ☐** | **Refer ☐** | **Fail ☐** | |
| All skills ticked above have been taught and the trainee trainer has demonstrated competence in each skill unless otherwise shown. A pass achievement indicates I am happy the participant has reached skill proficiency and can be certificated for this level as a trainer.  **Senior Trainer Name: Signature: Date:** | | | |

# AACE Physical Skill Delivery Record

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| *Responses:* | *🗹=Yes* | *⌧=No* | *P=Partial* | */ =N/A* |

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| **Name:** | |  | | | Date: |  | |
| **Skill/technique:** | | Times: | | | | | |
| **Safe learning environment** [1.5, 2.3, 2.4]  e.g. informs delegates of any environmental risks, barriers to learning managed and run warm up if required | | | | | | |  |
|  | | | | | | | |
| **Context** [3.1, 3.2]  e.g. shows image/video, draws out situational needs for the use of a skill and questions primary and secondary options to reduce need | | | | | | |  |
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| **Demonstration** [3.3]  e.g. shows image/video, highlights key points and provides smooth, accurate demonstration | | | | | | |  |
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| **Analysis** [3.4]  e.g. accurate description and demonstration of key observation, coaching and safety points including evidence of SEAL test | | | | | | |  |
|  | | | | | | | |
| **Practice and coaching** [3.5, 3.6]  e.g. observes learner’s practices, identifies inaccuracies and provides suitable coaching | | | | | | |  |
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| **Integration and problem solving** [3.7]  e.g. draws out workplace applications, SEAL test evidenced, trains and assesses where appropriate | | | | | | |  |
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| **Senior Trainer comments** | | | | | | | |
|  | | | | | | | |
| Name |  | | Signature |  | | | |
| **Trainee Trainer comments** | | | | | | | |
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|  | | | Signature |  | | | |

# AACE Physical Skill Delivery Record

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| **Integration and problem solving** [3.7]  e.g. draws out workplace applications, SEAL test evidenced, trains and assesses where appropriate | | | | | | |  |
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| **Senior Trainer comments** | | | | | | | |
|  | | | | | | | |
| Name |  | | Signature |  | | | |
| **Trainee Trainer comments** | | | | | | | |
|  | | | | | | | |
|  | | | Signature |  | | | |