

FIRST AID MANUAL



First Stop
Safety Training

What is a First Aider?

A first aider is the first person to assist someone who is injured or ill. They also ensure that casualties are safe and away from further harm.

First Aid Kit

All workplaces should have a first aid kits. They should be green with a white cross and easily accessible. Keep the contents list near or in the kit and replenish items straight after use. Check expiry dates regularly. **Do not** store medication, ointments or creams in them.

Aims of a First Aider

- To understand your own abilities and limits
- To protect yourself and others from potential dangers
- To assess the situation quickly
- Get help if necessary
- Provide treatment to casualties
- Pass on relevant information to emergency services
- Be aware of your own needs



CPR

D Danger	Check for dangers to yourself, the casualty & bystanders
R Response	Shout, tap, gentle shake of shoulders. If no response shout for help
A Airway	Put your hand on the forehead and fingers under the chin gently tilt the head back
B Breathing	Check up to 10 seconds; Look, listen & feel. No breathing; ensure an ambulance is on its way
C Circulation	30 compressions: 2 rescue breaths Repeat
D Defibrillator	Send someone to source one. If you are a lone rescuer do not leave your casualty, wait on ambulance crew

30:2



AED Instructions

AED Symbol



Switch on the AED
Attach pads to casualty's chest

AED gets ready to analyse the casualty's heart rhythm. It may state 'Stand clear, analysing now' or 'Analysing'. Make sure no one is touching the casualty while it is analysing. Is a shock advised?

YES

No

AED advises that a shock is needed;
machine charges up

AED advises that no
shock is needed

AED instructs you to press the shock
button. Make sure everyone is clear of
the casualty. It will either deliver the
shock automatically or instruct you to
push the shock button. The casualty
may appear to 'jump'. This is normal.

AED instructs you
to continue CPR for
2 minutes before it
re-analyses heart
rhythm

AED instructs you to continue CPR for
2 minutes before it re-analyses

The AED re-analyses
heart rhythm

The AED re-analyses heart rhythm. If the casualty shows signs of becoming responsive, leave them in position and do not remove the AED pads. Monitor the casualty and wait for emergency services.

Recovery Position

- Kneel beside the casualty. If they are wearing glasses remove these along with any bulky objects from their pockets
- Ensure both legs are straight. Place the arm nearest to you into a right angle, with their elbow bent and the palm facing upwards
- Bring the arm that is farthest away from you across their chest and hold the back of their hand against the cheek nearest to you. Keep your hand on theirs
- With your free hand grasp the far leg above the knee and pull it up keeping the foot on the ground
- Keep their hand pressed against their cheek, pull on the far leg towards you and onto their side
- The upper leg should have a bent knee at a right angle
- Tilt their head back and lift the chin to promote an open airway



Choking Treatment

Ask the casualty - Are you choking? Instruct the casualty to cough. Only take action if cough becomes ineffective or they are silent

1



2



Support upper body with one hand and lean them forward.

Give up to 5 sharp blows between shoulder blades with the heel of your hand. Stop if obstruction clears.

If back blows fail, stand behind the casualty and place both arms around them. Deliver up to 5 sharp abdominal thrusts. Pull inwards and upwards.

If the obstruction does not clear call 999 for emergency help and repeat steps 1 and 2.

Burns Treatment

1



Flood the area with COOL or luke warm running water for at least 20 mins.

2



If clothing is stuck to burn do not remove. Gently remove any jewellery in the area.

3



Once cooled, cover the burn with cling film lengthways. You can use a clean plastic bag if cling film is unavailable.

4



Seek further medical attention if the casualty is a child or the burns are severe.

NEVER

Use ice on a burn, burst blisters, touch the burn, apply ointments or creams, apply adhesive dressings, remove clothing stuck to burns

Asthma Treatment

This is a common lung condition that causes breathing difficulties. Recognition; difficulty breathing/ speaking, wheezing breathes, coughing, tight chest, pale, clammy skin, exhaustion, distress, unconsciousness

1



Help the casualty to sit upright. Leaning on a table or chair may help

2



The casualty should use their reliver inhaler (usually blue) 1-2 puffs every 30-60 secs for up to 10 puffs.

3



Try and take their mind off the attack. Calm and reassure, make light conversations but do not encourage them to speak back

4

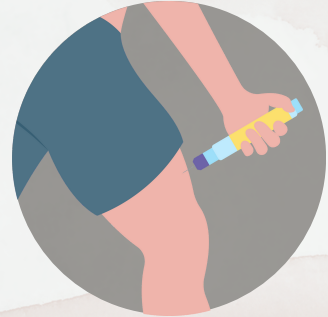


Call 999 if they feel worse or if the attack doesn't ease after 10 puffs. 10 puff treatment can be repeated until ambulance arrives.

Anaphylactic Shock

Recognition; breathing difficulties, wheezing, persistent cough, feeling faint or sick, clammy skin, confusion, anxiety, fast heartbeat, loss of consciousness, hives, facial swelling, tongue, throat, eyes, difficulty speaking or swallowing, noisy breathing

- It's a severe, life threatening allergic reaction
- Call 999 and state anaphylaxis quickly
- Lie the casualty down. Do not sit up
- If there is no medication raise casualties legs
- If the casualty has an auto-injector pen help assist
- If Epi-pen- wrap your hand around it
- Pull off blue safety cap
- Push orange tip firmly into outer thigh
- Hold firmly in thigh for 3 seconds
- Injector-pen will go through one layer of clothing
- Check expiry date regularly
- Use out of date adrenaline if nothing else is available
- If second pen is available you can use in alternative thigh 5-15 mins after first dose
- Be prepared to start CPR if the casualty stops breathing



Bleeding



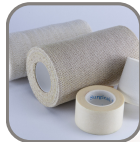
Nose Bleeds; tilt head forward and squeeze under the bridge of the nose. Hold pressure for 10 mins. If continues repeat process (3x10 mins). Hospital treatment will be required if it doesn't stop after 30 mins



Eye Injury; debris in white part of eye can be flushed with tap water or eye wash. If it's embedded do not remove, cover up and seek medical advice.



Knocked Out Tooth; if an adult tooth has been knocked out, rinse under the tap and try to replace into socket before seeking dental treatment. If it does not align the patient can store it in their mouth safely or into a cup of milk.



Embedded Object; do not remove it. Apply dressings around the foreign object but never over it. Hospital treatment required.



Amputation; control the bleed with pressure. Place limb in plastic bag or clingfilm. Place bag on ice or cold compress - hospital. Do not wash

Heart Attack

Recognition; vice-like chest pain, pain in arm/ arms, neck, jaw, back or stomach, feeling sick, sweaty, lightheaded, shortness of breath, coughing or wheezing, pale skin and blue lips

Treatment

- Call 999
- Assist casualty to sit down on the floor
- Reassure the casualty
- If aspirin is available get the casualty to chew tablets slowly (no more than 300mg)
- If they become unresponsive be ready to start CPR



Seizures

Recognition; sudden unconsciousness, stiffening of the body, loss of bowel bladder control, arched back, blood around mouth, jerking movement

Treatment

- Protect casualty, talk calm and reassuringly, move objects out the way, ask bystanders to clear the area and time when the seizure began
- Protect the casualties head
- Once the seizure has stopped, if the casualty is in a sleep state check breathing and if normal put them into the recovery position
- Monitor their vital signs

Shock

Shock is a life-threatening condition which occurs when the body is not getting enough blood flow. Organs can become damaged as a result. Immediate treatment is required. The most common cause is blood loss.

Recognition; rapid pulse, pale, cold, clammy skin, sweating, weak pulse, grey/blue skin, weakness, dizziness, nausea, thirst

Treatment

- Treat cause of shock if possible, eg bleeding/ severe burns
- Lie casualty down and raise their legs
- Call 999/112 and say suspected shock
- Loosen tight clothing
- Keep casualty warm
- Monitor and record casualties vital signs



Animal & Human Bites

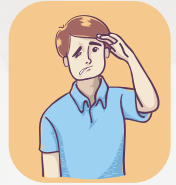
Treatment

- Wash bite wound with soap and warm water
- Support injured area and pat dry with clean gauze swabs, cover with a sterile dressing
- Arrange to take or send casualty to hospital if the wound is over a joint, is large or is persistently bleeding.

Stroke

Stroke is a medical condition which occurs when the bloody supply to the brain is disrupted.

- F - facial weakness, casualty unable to smile evenly, mouth/ eye drooping
- A - arm weakness, casualty can only raise one arm
- S - speech problems, casualty is unable to speak clearly
- T - arrange urgent admission to hospital



Can also be weakness, numbness of face, arm, leg on one or both sides, loss or blurred vision, confusions, headache

Diabetes

Is a condition when the body fails to produce sufficient insulin which can result in higher or lower than normal blood sugar levels in the body.

Low Blood Sugar (Hypoglycaemia) Treatment

- Help casualty sit down, if they have emergency sugar supply help them to take it, if not give them around 3 teaspoons of sugar
- If they respond well, give them more until they feel better
- If they do not improve look for other issues and call 999

High Blood Sugar (Hyperglycaemia) Treatment

- Call 999
- Monitor and record vital signs while waiting for help



Fainting

A faint is a brief loss of responsiveness due to a temporary reduction of blood flow to the brain

Treatment

- When a casualty feels faint ask them to lie down and raise their legs with something supporting their ankles and feet
 - Increase the flow of fresh air if possible
 - Reassure your casualty and once recovered help them sit up gradually
-

Broken Bones

Recognition; deformity, swelling, bruising, pain, wound, immobility

Treatment

- Support injured part above or below the injury, in the most comfortable position for them
- Protect injury with padding such as towels
- Support with sling or bandages
- Take or send casualty to hospital
- If there is an open wound, cover it with a sterile dressing or clean cloth and bandage in place



Helpful Tips

- Ensure first aid equipment is in date, refilled and a contents list is available.
- Do all staff know where the kits are, what's inside each first aid box and how to use the equipment?
- Have procedures in place, who would get a defibrillator in an emergency? Where would they get it from?
- Find out where your nearest defibrillators are to your home & workplace
- What3words app is a great tool for ambulance crew locating you
- Store clingfilm in case of serious burns
- Set up your medical ID in the health app on your phone
- Ensure staff know the address if needing to call 999. Consider printing address next to phones
- Have a procedure for ambulance arrival that all staff are familiar with
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First Stop

Safety Training



Mental Health
First Aid



Moving &
Handling of
Patients



First Aid
Workplace
Courses



Outdoor First
Aid



Fire Safety



Kids First
Aid
Workshop



Food Hygiene



Moving &
Handling of
Objects



Baby &
Child First
Aid
Workshop



Safeguarding
& Child
Protection for
Early Years



Blended
Learning First
Aid Courses