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**First Aid  
Basic Life  
Support**



Trainer Courses Ltd  
**Workbook**

## **What is First Aid?**

**First aid is the care given to a casualty before professional help arrives. It can come from a member of the family, a friend, or a stranger who happens to be on the spot, but the help they give can literally mean the difference between life and death.**

**The aims of first aid are to preserve life; to prevent the worsening of any injuries; and to promote recovery.**

## **Why do I need to know about First Aid?**

**It takes only three to four minutes for a blocked airway to kill someone but it can take more than eight minutes for an ambulance to arrive on the scene. A simple procedure like opening an airway can save someone's life while you are waiting for professional help to arrive.**

**Most accidents happen in the home - 2.8 million. In fact, you are 20 times more likely to have a fatal accident at home than win the lottery. This means you are more likely to treat someone you know than a stranger.**

**According to Department for Trade & Industry DTI figures falls in the home account for account for 1.2 million accidents; strikes and collisions account for 593,794 accidents; cuts and tears account for 273,161 accidents; foreign bodies account for 139,864 accidents; and burns account for 100,000 accidents.**

**If you think that many injuries in the home and garden are caused by risky activities like Do It Yourself, you would be wrong. Statistics show that almost as many people injure themselves whilst relaxing as working around the house.**

**There are many misconceptions surrounding the practice of first aid, some of which can harm rather than help. These misconceptions are shown on the next page.**

## **Top 10 First Aid Misconceptions**

1. "You should put butter or cream on a burn."  
*The only thing you should put on a burn is water - keep the butter for cooking!*
2. "If you can't move a limb, it must be broken."  
Or  
"If you can move a limb, or stand up with it, it can't be broken."  
*The only accurate way to diagnose a broken limb is by X-raying it.*
3. "The best way to treat bleeding is to put the wound under a tap."  
*If you put a bleeding wound under a tap, you will wash away the clotting agents and make it bleed more.*
4. "Nose bleeds are best treated by putting the head back."  
*If you put the head back for a nosebleed, all the blood will go down the back of the airway.*
5. "A tourniquet is the best way to treat serious bleeding."  
*A tourniquet should only be used where direct pressure fails to stop the bleeding and the consequences of not using a tourniquet are greater than using one e.g. life threatening.*
6. "If someone has swallowed a poison you should make them sick."  
*If you make someone sick by putting your fingers in their mouth, the vomit may block the airway.*
7. "If you perform CPR on someone who has a pulse you can damage the heart."  
*The evidence is that it isn't dangerous to do chest compressions on a casualty with a pulse.*
8. "You must always call an ambulance if you perform first aid."  
*Sometimes, first aid is all that the casualty needs - don't call an ambulance unless it's an emergency.*
9. "To do first aid you need lots of training."  
*You don't. What you mostly need is common sense - and you can learn enough first aid in 10 minutes to save a life.*
10. "You need lots of expensive equipment to do first aid."  
*You don't need any equipment to do first aid - there are lots of ways to improvise anything you need. For instance, a clean handkerchief will make a good dressing.*

## **What We All Should Know**

### **The Legal Aspects of First Aid**

#### **The Social Security Act**

***Requires all employers and employees to be aware of recording and reporting all accidents.***

#### **The Health and Safety at Work Act 1974**

***Requires everyone to comply with Health and Safety guidelines and be responsible for their own safety.***

#### **Health and Safety (First Aid) Regulations 1981**

***Requires that Employers, First Aiders and Appointed Persons to be responsible for appropriate first aid within the workplace.***

#### **The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)**

***Employers are responsible for reporting serious accidents in connection with the workplace (including over 7 consecutive days absence from work).***

#### **Control of Substances Hazardous to Health Regulations (COSHH)**

***Employers are responsible for assessing risks from hazardous substances and implementing actions to reduce risks. First Aiders are required to provide appropriate first aid according to the substances used in the work place.***

It is an employer's responsibility to organise and provide first aid care; keep appropriate records and make reports; and maintain the appropriate first aid kits.

## **First Aid Kits**

First Aid kits should have the following included:

- First Aid Guidance Leaflet
- Sterile dressings of various sizes, medium, large and extra large
- Individually wrapped adhesive dressings
- Eye Pads
- Triangular Bandages
- Safety Pins
- Disposable Gloves
- Alcohol Free Wipes

The quantities of each will depend on the type of workplace. The Health & Safety Executive makes recommendations for various sizes of businesses.

The number of first aid boxes will depend on the complexity and size of the site e.g. a hospital or large care centre spread over a large area will require more boxes than a small care home.

Do not forget lone workers when it comes to first aid provision. They should also be given a small kit consisting of: First Aid Guidance Leaflet, 6 Plasters, 2 Triangular Bandages, 1 Large Dressing, Safety Pins, 1 Pair of Disposable Gloves & 4 Alcohol Free Wipes.

## Assessing the Accident Scene



You are on duty at a residential care home where there are contractors working from scaffolding repairing the fascia and guttering. A loud clanging noise is heard and followed by someone screaming. You go outside and discover this scene.

What will be your first priority here?

- A Assess the casualties as you want to help them straight away
- B Ring 999 as you will require professional help immediately
- C Assess the scene for danger as you don't want to get hurt**

In the diagram you can see three casualties on the ground. Once you have established the area is safe, which casualty will you help first?

- A The one with a bad arm injury who is losing a great deal of blood
- B The conscious casualty who is screaming in pain
- C The casualty who is lying quiet and motionless**

You have checked the quiet casualty and found she is unconscious. What do you do next?

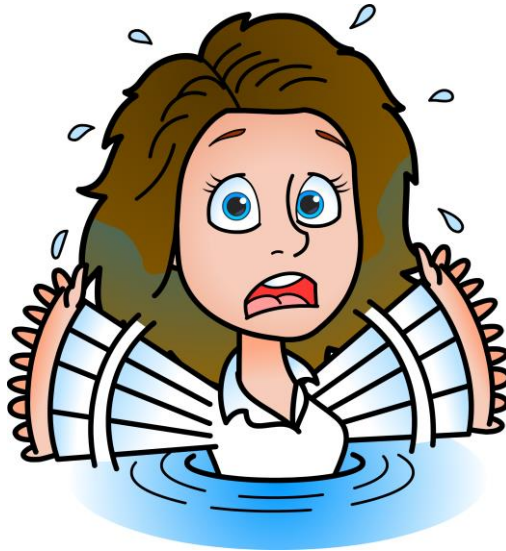
- A Place her in the recovery position so that any fluid in her mouth can drain away safely
- B Open her airway to ensure she can breathe**
- C Give two rescue breaths straightaway in order to be sure she is breathing

How would you be able to tell if the above casualty was breathing?

- A Check for breathing using your eyes, ears and sense of touch**
- B Take her pulse
- C Hold a mirror to her mouth and watch for condensation

***This area is for you to write any notes you feel relevant from this section:***

## Drowning



You are on duty at a residential care home where there is a large pond in the rear garden that is fenced off for the safety of your residents. It is the summer holidays and the home has had a problem with teenagers entering the grounds and playing near the pond.

A teenage girl knocks at the door and screams that her friend has fallen in the pond. You go outside and discover that another teenage girl is in the water about eight feet from the edge struggling to keep afloat.

How best can you help her?

- A Wade in and pull her out as soon as possible
- B Call 999
- C Try to rescue her without going into the water**

Turn page over now for further questions:



The casualty is now out of the water and is breathing. How should you position her?

- A Walk her around so she doesn't lose consciousness
- B Put her down in the recovery position**
- C Sit her up

The biggest danger to the casualty now is hypothermia from being cold and wet. What can you do to treat this?

- A Offer her a warm drink and cover her with blankets or coats**
- B Cover her with blankets or coats and rub her hands and feet to improve her circulation
- C Rub her hands and feet to get circulation going then offer a warm drink

The casualty loses consciousness. How do you check for breathing?

- A Place a mirror over her mouth and watch for clouding
- B Place your head close to her mouth and listen for breathing
- C Turn her on her back, open the airway and look along the line of the chest for movement, then listen for breathing**

The casualty is not breathing and the next step is resuscitation. The other teenage girl has run off in a panic and you are on your own - which of these sequences is correct?

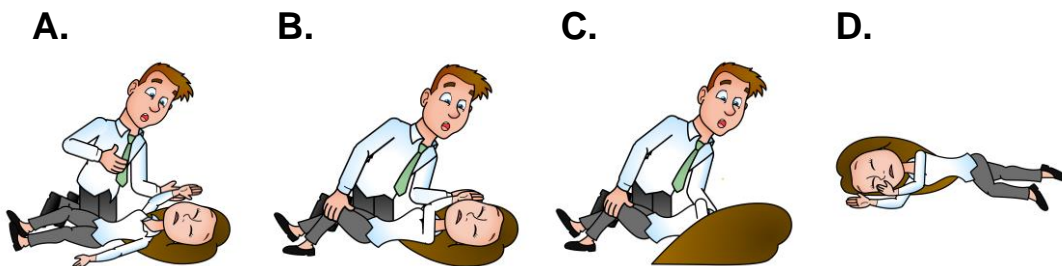
- A Tilt casualty's head back; Look for signs of life - if none, give five initial rescue breaths. Give thirty chest compressions then two rescue breaths. Continue for one minute then go for help.
- B Tilt casualty's head back; pinch her nostrils closed and then give five breaths. If still not breathing, commence ten chest compressions then five breaths. Continue until help arrives.
- C Tilt casualty's head back; pinch her nostrils closed and then give two breaths. Look for signs of life - if none, commence thirty chest compressions. Continue until help arrives.

***This area is for you to write any notes you feel relevant from this section:***

## Recovery Position

Unconscious casualties who are breathing and whose heart is beating should be placed in the recovery position. This position ensures a proper open airway. In this position the tongue cannot fall back into the throat. With the head back and the neck extended the air passage will be widened. Any vomit or other fluid will drain freely from the mouth.

- A. Kneeling beside the casualty open the airway by tilting the head and lifting the chin. Straighten the legs; place the arm nearest you out at right angles to the body, out straight and with palm upmost.
- B. Bring the arm furthest from you across the chest; hold the hand palm outwards against the casualty's nearer cheek.
- C. Keep the casualty's hand pressed against his cheek, pull on upper leg and roll casualty towards you and onto his side. Tilt head to ensure airway stays open.
- D. Adjust upper leg so that hip and knee are bent at right angles. Adjust lower arm so that casualty is not lying on it.



## **Cardio-Pulmonary Resuscitation (CPR)**

### **Adult**

- If you have someone with you, send them to **dial 999** (or 112) for an ambulance **immediately** and ask them to bring a suitable AED if available
- If you are **alone dial 999** (or 112) for an ambulance immediately and then return to help the casualty

#### **Give 30 chest compressions:**

- Place heel of your hand in the centre of the chest
- Place other hand on top and interlock fingers
- Keeping your arms straight and your fingers off the chest, press down by five to six centimetres, then release the pressure, keeping your hands in place
- Repeat the compressions 30 times, at a rate of between 100 and 120 per minute

#### **Give 2 rescue breaths:**

- Ensure the airway is open
- Pinch nose firmly closed
- Take a deep breath and seal your lips around the casualty's mouth
- Blow into the mouth until the chest rises
- Remove your mouth and allow the chest to fall
- Repeat once more

**Continue resuscitation**, 30 compressions to two Rescue Breaths

#### **Do not stop unless:**

- Emergency help arrives and takes over
- The casualty breathes normally or
- You become so exhausted that you cannot carry on

### **Children**

*A child is considered to be between one year old and puberty for the purposes of these instructions:* It is neither necessary nor appropriate to check if a child has reached puberty.

- If you have someone with you, send them to **dial 999** (or 112) for an ambulance **immediately** and ask them to bring a suitable AED if available
- If you are on your own carry out **CPR for one minute** before dialling **999** (or 112) for an ambulance

#### **Give five rescue breaths:**

- Ensure the airway is open
- Seal your lips around the child's mouth while pinching the nose

- Blow gently into the lungs, looking along the chest as you breathe. Take shallow breaths and do not empty your lungs completely
- As the chest rises, stop blowing and allow it to fall
- Repeat four more times then check for circulation

Give **30 chest compressions**:

- Place one or two hands in the centre of the chest (depending on the size of the child)
- Use the heel of that hand with arms straight and press down to a third of the depth of the chest
- Repeat the compressions 30 times, at a rate of between 100 and 120 per minute
- After 30 compressions, give two rescue breaths

**Continue resuscitation** (30 compressions to two rescue breaths) without stopping until help arrives

### **Infants**

*A baby is considered to be less than one year old for the purposes of these instructions.*

- If you have someone with you, send them to **dial 999** (or 112) for an ambulance **immediately** and ask them to bring a suitable AED if available
- If you are on your own carry out **CPR for one minute** before dialling **999** (or 112) for an ambulance

Give **five rescue breaths**:

- Ensure the airway is open
- Seal your lips around the baby's mouth and nose
- Blow gently into the lungs, looking along the chest as you breathe. Fill your cheeks with air and use this amount each time
- As the chest rises, stop blowing and allow it to fall
- Repeat this five times

Give **30 chest compressions**:

- Place the baby on a firm surface
- Locate a position in centre of the chest
- Using two fingers press down sharply to a third of the depth of the chest
- Repeat the compressions 30 times, at a rate of between 100 and 120 per minute
- After 30 compressions, give two rescue breaths
- Continue resuscitation (30 compressions to two rescue breaths) without stopping until help arrives

## Bleeding



You are on your rounds as a homecare supervisor on a visit to Mr Jones to check if the care he is being given meets the standards set. On entering the garden, you see Mr Jones lying on the floor holding his leg. On closer examination you notice that he has a gaping wound from a piece of wood that is embedded in his leg. Mr Jones is losing quite a lot of blood.

What will you do first for the casualty?

- A Remove the wood from his leg as soon as possible
- B Stop the bleeding**
- C Get him to hospital straight away

How are you going to initially control the bleeding?

- A Apply a tourniquet - something tight around the leg that will stop the bleeding
- B Wrap a bandage around the leg
- C Try to close the wound by pressing firmly on either side of the embedded object**

You have stopped the bleeding, calmed the casualty down and sent a neighbour to call 999. What complications may the casualty suffer now?

**A Shock - the body's reaction to losing a lot of blood**

B Breathing difficulties

C A panic attack

Which single thing can you do to help a casualty suffering from shock?

A Give him a hot comforting drink

B Put him in the recovery position with a hot water bottle

**C Lie him down with his legs raised higher than his head**

***This area is for you to write any notes you feel relevant from this section:***

## **Shock - Recognition & Treatment**

### **Recognition:**

- **Nausea**
- **Thirsty**
- **Weak and giddy**
- **Restless**
- **Skin cold, clammy, pale grey**
- **Lips, earlobes and fingernails grey/blue**
- **Rapid but weak pulse**
- **Rapid shallow breathing (gasping for air)**
- **Loss of consciousness**

### **Treatment:**

- **Treat any obvious cause**
- **Secondary survey (levels of response, what happened etc)**
- **Lay casualty down; raise and support legs**
- **Loosen tight clothing, insulate from cold**
- **Reassure constantly**
- **Get help**
- **Monitor and record**

### **Do Not:**

- **Allow casualty to eat, drink or smoke**
- **Allow the casualty to move unnecessarily**
- **Leave the casualty alone, except to get help**
- **Apply heat to the casualty**

## Electric Shock



You are on duty at a nursing home when one of the patients calls out that there is something wrong with Dorothy, one of the other patients. On entering Dorothy's bedroom you find her lying on the floor clutching a hairdryer. Her convulsive movements suggest that she is suffering an electric shock.

What is the first thing you need to do?

**A** Disconnect the casualty from the power source

B Get the casualty breathing

C Check if she is conscious

If you can't switch the power off at the mains, should you:

A Kick the implement away using your shoe as insulation

B Pull the implement away from the casualty

**C** Remove the faulty implement by using something non-conductive like a broom handle or rolled-up newspaper

What should you be looking for now?

- A Is the casualty breathing?
- B Is the casualty conscious?**
- C Can the casualty get up?

The casualty is conscious, breathing and has reasonable circulation.

What should you be looking out for now?

- A She may suffer from further convulsions
- B She may have sustained burns**
- C She may develop breathing difficulties

***This area is for you to write any notes you feel relevant from this section:***

## Eye Injury



You are on duty at a nursing home when one of your colleagues comes in and tells you that while she was taking some rubbish out to the dustbin, located near the handyman's workshop, a gust of wind blew and she has got something in her eye. She asks you for assistance as it is causing her some irritation.

Which of these would you attempt to remove from her eye?

- A A piece of grit floating in the eye**
- B A piece of glass stuck in the eye
- C A piece of metal stuck in the eye

You can see a small piece of grit floating in the white of the eye. How would you remove it?

- A With a clean handkerchief
- B By washing it out with water**
- C With your finger

If the foreign body can't be removed, what more can you do to help?

- A Place the casualty in the recovery position
- B Lie the casualty down with head supported and eyes still**
- C Keep casualty's eyes open

If it will take some time to obtain medical help, would you try to dress the eye?

- A No, you shouldn't touch the eye at all
- B Yes, use a bandage round the head
- C Yes, ask the casualty to hold a sterile dressing over the affected eye**

***This area is for you to write any notes you feel relevant from this section:***

## Choking Casualty



You are on duty at a residential care home when one of your colleagues rushes into the room and tells you that you are needed urgently in the staff room as one of your colleagues has something stuck in her throat. On arrival you find Doris choking and in a great deal of stress.

Time is a crucial factor here. What can you encourage the casualty to do for herself?

- A Lie down
- B Continue coughing**
- C Have a drink

The obstruction has not moved, so what will you do next?

- A Give her up to three sharp blows between the shoulder blades
- B Give her abdominal thrusts
- C Give her up to five sharp blows between the shoulder blades with the flat of your hand**

She is still choking, so what are you going to do now?

- A Abdominal thrusts to try and remove the object
- B Give rescue breaths to give her some air
- C Put her in the recovery position

If the obstruction is not dislodged after three cycles of back blows and abdominal thrusts, what more can you do? (Choose only one of the three options).

- A Keep alternating the back blows and abdominal thrusts and get someone to dial 999
- B Start chest compressions and get someone to call 999
- C Start chest compressions and rescue breaths

***This area is for you to write any notes you feel relevant from this section:***

## **Adult & Child over One**

Encourage them to cough.

If this doesn't clear the obstruction, support their upper body with one hand and help them lean forward.

Use the heel of your hand to give up to five sharp back blows between their shoulder blades.

Check their mouth to see if there's anything in there and, if there is, get them to pick it out.

If back blows don't work, give up to five abdominal thrusts.

Stand behind them.

Link your hands between their tummy button and the bottom of their chest, with your lower hand clenched in a fist.

Pull sharply inwards and upwards.

If they're still choking, repeat back blows and abdominal thrusts - up to three times or until you've dislodged what's in there and they can breathe again.

If they're still choking after you've repeated these steps three times, call 999 or 112 for medical help.

Once you've called, continue back blows and abdominal thrusts - until what's in there has cleared, help arrives or they become unconscious.

If they lose consciousness at any stage, open their airway and check their breathing.

If they're not breathing, start chest compressions and rescue breaths (CPR - cardiopulmonary resuscitation) to try to release whatever's stuck in there.

## **Infant**

Sit down and lay them face down along your thigh supporting their head.

Supporting the baby's head, give up to five sharp blows between their shoulder blades with the heel of your hand.

Then check their mouth to see if there's anything in there and if there is: If you can, pick the object out carefully with your fingertips - take care not to push it further in.

If the back blows fail to clear the blockage, give up to five chest thrusts:

With the baby laid face up along the length of your thigh, put two fingers just below the level of their nipples and push inwards and downwards, towards the baby's head up to five times. Check their mouth and carefully pick the object out.

If they're still choking, repeat back blows and chest thrusts up to three times, or until you've dislodged what's in there and they can breathe again.

If they're still choking after you've repeated these steps three times, call 999 or 112 for an ambulance.

Once you've called an ambulance, continue steps 2 and 3 (back blows and chest thrusts) until what's in there has cleared, help arrives, or they become unconscious.

If they lose consciousness at any stage, open their airway and check their breathing.

If they're not breathing, start chest compressions and rescue breaths (CPR - cardiopulmonary resuscitation) to try to release whatever's stuck in there.

## Heart Attack



You are on duty at a residential care home and are called to the administration area where you have been advised that John the accountant is in a lot of pain. On arrival at the administration department you find John holding the upper part of his chest and his other symptoms suggest that he is suffering a heart attack. John has a history of heart complaints.

Which of these combinations are likely symptoms of a heart attack? (Choose one option only).

- A A sudden rush of blood to the face with severe pain in the high abdomen
- B A sudden rush of blood to the face with breathlessness or nausea
- C A severe pain high in the abdomen with breathlessness, nausea and pale skin

In order to make the casualty more comfortable, which position should you place him in?

- A Sitting down
- B Lying down
- C The recovery position

If the casualty has a history of heart trouble, he may have his own medication. Should you:

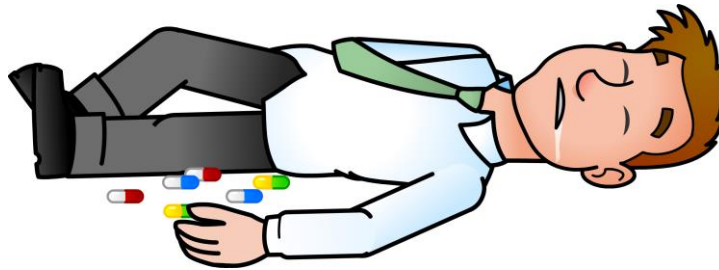
- A Give it to him?
- B Allow the casualty to take it himself?**
- C Advise the casualty not to take anything without expert advice?

If the casualty has no medication with him, which two things could you do? (Choose one option only).

- A Call 999 and give him a drink
- B Give him an aspirin to chew and give him a drink
- C Call 999 and give him an aspirin to chew**

***This area is for you to write any notes you feel relevant from this section:***

## Poisoning



You are on duty as a community support assistant and visiting the home of a young man who is receiving support in the community. On entering the house you discover the young man collapsed with a half-empty bottle of pills by his side. You suspect an overdose as this has happened in the past.

What do you do first?

- A Search for the bottle - it's vital to know what he's taken
- B Try to rouse the casualty**
- C Encourage the casualty to stand up

Having established that the casualty is conscious and breathing, what should you do next?

- A Remove any pills from the casualty's mouth
- B Get the casualty to spit out any remaining pills**
- C Make the casualty sick

What more can you do? (Choose only one option).

- A Ring for an ambulance and get the casualty to lie down
- B Ring for an ambulance then collect all remaining pills or bottles**
- C Get the casualty to lie down, then collect all remaining pills or bottles

What is the one further thing you can do whilst waiting for help?

- A Put the casualty into the recovery position**
- B Walk the casualty round the room to stop him falling asleep
- C Give the casualty a milky drink

***This area is for you to write any notes you feel relevant from this section:***

## Scalds & Burns



You are on duty at a residential care home and are called to the kitchen area. One of the catering staff has been scalded with the near-boiling contents of a kettle of water. The area affected is about the size of an adult hand, making it approximately a 1% burn.

What can you do first to help the casualty?

- A** Cool the burn with water
- B Reduce any shock she may have sustained
- C Remove her sleeve and let air get to the burn

For how long should you keep applying water?

- A For a minimum of 30 minutes
- B For a minimum of 2 minutes
- C** For a minimum of 20 minutes

The burning has stopped and the site cooled. What can you do next?

- A Remove jewellery - watches, rings, etc.**
- B Place the casualty in the recovery position
- C Apply ointment

While the wound is raw and open, it is vulnerable to infection. Which dressings would you choose? (Choose one option only).

- A Clean towelling or cling film
- B A sterile bandage or cling film**
- C A sterile bandage or clean towelling

***This area is for you to write any notes you feel relevant from this section:***

## Spinal Injury



You are on duty at a nursing home when one of your colleagues comes in and tells you that the handyman has fallen from his ladder whilst repairing the floodlight twelve feet up at the front of the premises. He is conscious, positioned awkwardly and you suspect that he may have a spinal injury.

What will you do first?

- A Assess the casualty
- B Assess the scene for danger**
- C Call the emergency services

Having eliminated the possibility of danger to yourself and others, you can assess the casualty. What are the most important points to bear in mind if, as you suspect, he may have sustained a spinal injury? (Choose one option only).

- A You must get him into the recovery position and find out exactly what happened
- B You must not move him but should find out exactly what happened**
- C You must not move him, but should cover him to keep him warm

How would you prevent further injury?

- A By rolling the casualty onto his side
- B By making a collar to keep his head in one position
- C By holding his head still between your hands**

If the casualty loses consciousness but is still breathing, what more can you do for him?

- A Put him in the recovery position
- B Turn his head to one side in case he vomits
- C Keep him warm and get a colleague to dial 999**

***This area is for you to write any notes you feel relevant from this section:***

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