

FIRST AID & TREATMENT WORKPLACE POSTERS



ABOUT US

Formerly known as '8ASH Limited', for the past two years we have been providing outstanding Paediatric First Aid training in and around Tameside. Our primary objective has been to support the Early Years sector in Greater Manchester, offering first-class instruction at an accessible cost.

We are acutely aware of the economic struggles faced by many settings due to limited government funding. This has been the driving force behind our mission to make First Aid training accessible to everyone.

Our ability to deliver tailored training has been evident with over 300 Childcare Practitioners already having received our Paediatric First Aid education. Our advantage lies in my 30 years as a former Primary School Headteacher, which has provided invaluable insight into the daily routines and outside pressures that nursery professionals must face.

We understand the medical issues they face and can offer effective, practical solutions. As we move forward, we strive to expand our reach in the Early Years sector, aiming to connect with new nurseries and provide our training options - Emergency First Aid at Work, First Aid at Work and Paediatric First Aid - in even greater numbers. Subscribe below to keep up-to-date with our news, courses and training dates.

We are proud that all of our training is fully accredited by Aid Training & Operations Ltd, Warminster, with every participant receiving a Certificate of Completion to showcase their newfound skills and knowledge.

We invite you to join us in this incredible journey, providing quality First Aid training that enables practitioners to ensure child safety and provide a safe Early Years environment. Get in touch today to discuss your training needs and let us assist in creating a safer future for the children in your care.

Bob Wynn

CEO & First Aid Training Provider



OUR TRAINING

Introducing our comprehensive first aid training course designed specifically for workplaces, schools, and nurseries! Ensure the safety and well-being of your staff, students, and little ones with our top-notch training.

Why choose FAB First Aid?

Experienced training provider: Through hands-on training sessions, participants will receive personalised guidance and gain valuable insights with extensive expertise in first aid techniques and protocols. Rest assured, you'll be in the capable hands of our highly experienced instructor.

Tailored to your needs: We understand the unique requirements of workplaces, schools, and nurseries. Our course covers scenarios and situations specific to these environments, making the training highly relevant and practical.

Comprehensive curriculum: Our course covers a wide range of first aid topics, including CPR, choking, wound care, allergies, fractures, burns, and more. Participants will gain the skills and confidence needed to respond effectively in emergencies.

Interactive learning: We believe in active participation for better retention. Our training sessions are interactive, engaging, and include practical exercises, simulations, and group discussions, enabling participants to learn by doing.

Certification: Upon successful completion of the course, participants will receive recognized first aid certification, which can enhance their professional profiles and contribute to a safer environment in your workplace, school, or nursery.

Flexibility and convenience: We offer flexible scheduling options to accommodate your specific needs. Whether you prefer on-site training or at our dedicated facility, we can arrange the course at a time that suits you best.

Cost-effective: We offer competitive pricing packages, ensuring that valuable first aid training is accessible to workplaces, schools, and nurseries of all sizes and budgets.

Don't compromise on safety! Invest in our first aid training course today and equip your staff, students, and caregivers with life-saving skills. Contact us now to discuss your requirements and schedule a session.



THE PRIMARY SURVEY



DANGER

Stay Calm! Assess for **danger** & make area safe.



RESPONSE

Communicate with the casualty, gently shake or use a Sternum Rub.



AIRWAY

Is the airway clear? Open airway by tilting head of casualty.



BREATHING

Look for chest movements. Check for breathing, maximum 10 seconds - whilst looking down the length of the body.



CIRCULATION

Check circulation using capillary refill. Control any visual bleeds.

You have now completed the Primary Survey.





WOUNDS & BLEEDS

When it comes to bleeding, there are two types: external and internal. External bleeding involves the loss of blood from a part of the body that can be seen, such as a nosebleed or a cut on the skin. Internal bleeding is hidden, occurring when an organ or internal body part has been damaged.

EXTERNAL BLEEDS

CAPILLARY

MINOR LACERATIONS OFTEN RESULT IN CAPILLARY BLEEDING, BLOOD TRICKLES OUT, USUALLY SEEN WITH SMALL CUTS OR GRAZES.

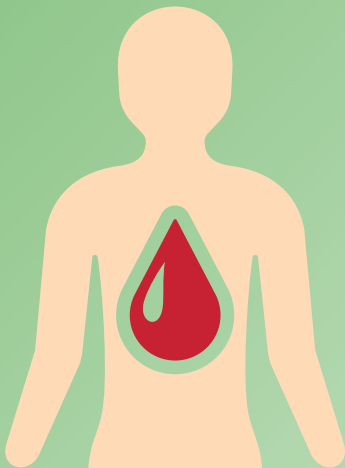
VENOUS

WHEN A VEIN HAS BEEN RUPTURED OR SEVERED, VENOUS BLEEDING IS EXPERIENCED. THE BLOOD THAT EXITS THE BODY APPEARS DARK RED AND OOZES OUT AT A CONTINUOUS AND SLOW RATE.



ARTERIAL

WHEN AN ARTERY BLEEDS, THE BLOOD WILL OFTEN SPURT OUT, LEADING TO A SIGNIFICANT AND RAPID LOSS OF BLOOD THIS CALLED A CATASTROPHIC BLEED.



INTERNAL BLEEDS

TRAUMA OR INJURY CAN HAVE **LIFE-THREATENING** CONSEQUENCES WHEN DAMAGE IS CAUSED TO BLOOD VESSELS. LOSS OF BLOOD LIMITS THE AMOUNT OF OXYGEN THAT REACHES VITAL ORGANS, POTENTIALLY LEADING TO SHOCK AND ULTIMATELY DEATH.



TYPES OF WOUNDS

Different types of wounds may range from minor scrapes to more serious puncture wounds.

ABRASION

AN **ABRASION** IS AN OPEN WOUND CAUSED BY SKIN SCRAPING AGAINST A COARSE SURFACE.



CONTUSIONS

CONTUSIONS, OTHERWISE KNOWN AS BRUISES, ARE TYPICALLY CAUSED BY TRAUMA TO THE BONE, MUSCLE, OR THE LAYER OF TISSUE LOCATED DIRECTLY BELOW THE SKIN.



LACERATION

A **LACERATION**, OR CUT, IS A TYPE OF SKIN WOUND THAT OCCURS WHEN AN OBJECT, SUCH AS A PIECE OF GLASS, CAUSES A BREAK IN SOFT BODY TISSUE.



INCISION

DURING A MEDICAL OPERATION, AN **INCISION** - ALSO KNOWN AS A SURGICAL WOUND - IS MADE IN THE SKIN. THE SIZE OF THE INCISION DEPENDS ON THE KIND OF SURGERY YOU HAD.



PUNCTURE

A **PUNCTURE** WOUND OCCURS WHEN A SHARP OBJECT PUNCTURES THE SKIN, LEAVING BEHIND AN EMBEDDED OBJECT. IN SUCH CASES, THE FOREIGN OBJECT SHOULD **NOT** BE REMOVED.



CONTROL THE BLEEDING BY APPLYING **PRESSURE** AROUND THE WOUND SITE. **STABILISE** ANY FOREIGN BODY.



WOUNDS & BLEEDS

HOW TO ARREST EXTERNAL BLEEDING

- CARRY OUT YOUR ABC'S
- SIT OR LAY THE CASUALTY DOWN
- QUICKLY **ASSESS & EXAMINE** THE WOUND (**REMEMBER** YOUR FIRST AID KIT & DISPOSABLE GLOVES!)
- APPLY DIRECT PRESSURE TO THE WOUND
- **INSPECT IT! CLEAN IT!**
- APPLY A STERILE DRESSING - MAXIMUM OF TWO
- USE OF HAEMOSTATIC AGENTS AND/OR TOURNIQUETS IF TRAINED TO DO SO (CATASTOPHIC BLEEDS)
- **REST & REASSURE** THE CASUALTY
- TREAT FOR SHOCK (IF REQUIRED)



APPLYING PRESSURE



BANDAGING



PALM WOUNDS



NOSE BLEEDS

- LEAN THE CASUALTY FORWARDS
- ENCOURAGE THE CASUALTY TO BREATHE THROUGH THEIR MOUTH
- **PINCH** THE SOFT TISSUE ON BOTH SIDES OF THE NOSE, JUST ABOVE THE NOSTRILS FOR 10 MINUTES
- ENCOURAGE THE CASUALTY NOT TO SPEAK, SWALLOW, COUGH OR SNIFF AS THIS COULD DISLodge THE NEWLY FORMED BLOOD CLOT
- **RELEASE SLOWLY**
- IF STILL BLEEDING, REAPPLY FOR A FURTHER 10 MINUTES
- IF NOT CONTROLLED WITHIN 30 MINUTES, REFER TO HOSPITAL





BASIC LIFE SUPPORT

THE CHAIN OF SURVIVAL

The strength of the Chain of Survival relies on its weakest link.

IN TIMES OF EMERGENCY, **EVERY SECOND COUNTS**. KNOWING THE STEPS IN THE CHAIN OF SURVIVAL CAN MAKE ALL THE DIFFERENCE. HERE'S WHAT YOU NEED TO KNOW:

EARLY ACCESS

IF YOU SUSPECT SOMEONE IS IN NEED OF EMERGENCY MEDICAL ATTENTION, DON'T HESITATE TO ACT. CALL FOR HELP RIGHT AWAY BY DIALING EMERGENCY SERVICES AT 999 OR 112, PROVIDE AS MUCH INFORMATION AS POSSIBLE ABOUT THE CASUALTY.

EARLY BASIC LIFE SUPPORT (BLS)

WHILE YOU WAIT FOR HELP TO ARRIVE, PROVIDE BASIC LIFE SUPPORT TO THE CASUALTY. THIS CAN INCLUDE PERFORMING CPR, MAINTAINING AN OPEN AIRWAY, AND CONTROLLING ANY BLEEDING.

EARLY AUTOMATED EXTERNAL DEFIBRILLATOR (AED)

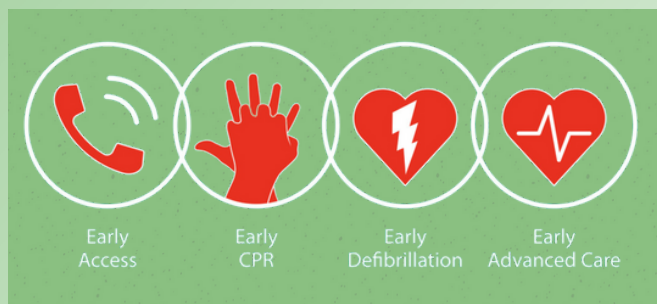
IF YOU HAVE ACCESS TO AN AED, USE IT AS SOON AS POSSIBLE TO HELP RE-START THE CASUALTY'S HEART.

ADVANCED PAEDIATRIC LIFE SUPPORT

ONCE MEDICAL PROFESSIONALS ARRIVE, THEY WILL TAKE OVER CARE OF THE PATIENT. STAY CALM, ANSWER THEIR QUESTIONS, AND PROVIDE ANY INFORMATION YOU CAN.

BY FOLLOWING THESE STEPS IN THE CHAIN OF SURVIVAL, YOU CAN HELP IMPROVE THE OUTCOME FOR SOMEONE IN NEED OF EMERGENCY MEDICAL ATTENTION.

REMEMBER, EVERY SECOND COUNTS!





BASIC LIFE SUPPORT

CHILD AND BABY

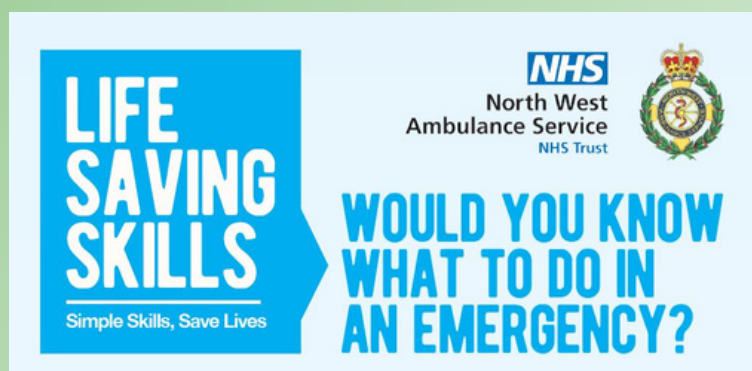
Five essential steps for Basic Life Support Assessment of child & baby - know them!

- **SCENE SAFETY** – ASSESS THE ENVIRONMENT FOR ANY POTENTIAL RISKS OR DANGER. LOOK FOR ANY HAZARDS THAT MIGHT CAUSE HARM AND MAKE SURE THE AREA IS SAFE TO WORK IN.
- **RESPONSE** – ATTEMPT TO GAIN A RESPONSE FROM YOUR CASUALTY BY SHOUTING AND TAPPING THEM ON THEIR SHOULDER OR HAND. CHECK IF THEY RESPOND TO YOUR TOUCH OR SOUND.
- **AIRWAY** – ONCE YOU HAVE CONFIRMED THAT THE AREA IS SAFE AND THE CASUALTY HAS NOT RESPONDED TO YOUR INITIAL ATTEMPTS, MOVE ON TO THE AIRWAY. OPEN THEIR MOUTH AND CHECK FOR ANY BLOCKAGES, CLEAR ANY FOREIGN OBJECTS, AND GENTLY TILT THEIR HEAD AND LIFT THEIR CHIN TO CREATE A CLEAR AIRWAY.
- **BREATHING** – CHECK IF THE CASUALTY IS BREATHING OR NOT. PLACE YOUR EAR CLOSE TO THEIR MOUTH AND LISTEN FOR BREATH SOUNDS OR LOOK FOR THE RISE AND FALL OF THEIR CHEST OR ABDOMEN. CHECK FOR BREATHING FOR A MAXIMUM OF 10 SECONDS.
- **CIRCULATION/CONTROL BLEEDING** – IF THE CASUALTY IS BREATHING, CHECK THEIR CIRCULATION BY EXAMINING THE CAPILLARY REFILL IN THEIR FINGER OR TOE. CHECK FOR ANY OBVIOUS BLEEDING AND CONTROL IT WITH PRESSURE.

BY FOLLOWING THESE FIVE STEPS, YOU WILL BE ABLE TO ENSURE THE SAFETY AND SURVIVAL OF CHILDREN AND BABIES IN AN EMERGENCY SITUATION.

REMEMBER TO CALL FOR EMERGENCY SERVICES IMMEDIATELY AFTER PERFORMING BLS AS TIME IS OF THE ESSENCE WHEN IT COMES TO SAVING LIVES.

Remember, performing CPR can make all the difference in saving a life. So if you come across a casualty who is not breathing, stay calm and act fast.





BASIC LIFE SUPPORT

CPR PROCEDURE

In the case of an emergency where your casualty is not breathing, the key to saving their life is performing CPR as quickly as possible. In order to do so effectively, it is important to follow these simple instructions.

- HAVE A COLLEAGUE OR BYSTANDER CALL EMERGENCY SERVICES (999/112) IMMEDIATELY, PROVIDING AS MUCH INFORMATION AS POSSIBLE
- START WITH FIVE INITIAL BREATHS, ENSURING THAT THE CASUALTY'S NOSE AND MOUTH ARE COVERED.
 - FOLLOW UP WITH 30 CHEST COMPRESSIONS.
 - GIVE TWO RESCUE BREATHS.
- CONTINUE THIS CYCLE, WITH 30 COMPRESSIONS FOLLOWED BY 2 RESCUE BREATHS, UNTIL AN AED ARRIVES OR THE CASUALTY STARTS BREATHING AGAIN.
- IF YOU ARE ALONE, PERFORM BASIC LIFE SUPPORT FOR ONE MINUTE BEFORE SEEKING ASSISTANCE.
 - MAKE SURE THAT YOUR COMPRESSIONS ARE BEING DONE AT A RATE OF 100/120 COMPRESSIONS PER MINUTE.
 - THE DEPTH OF YOUR COMPRESSIONS SHOULD VARY DEPENDING ON THE AGE OF THE CASUALTY - 4CM FOR A BABY, 5CM FOR A CHILD, AND 5/6CM FOR AN ADULT.

REMEMBER THAT **EVERY SECOND COUNTS** IN A MEDICAL EMERGENCY. WITH THESE EASY-TO-FOLLOW INSTRUCTIONS, YOU CAN BE THE DIFFERENCE BETWEEN LIFE AND DEATH FOR YOUR CASUALTY.

STAY CALM, STAY FOCUSED, AND MOST IMPORTANTLY, KEEP PERFORMING CHEST COMPRESSIONS AND RESCUE BREATHS UNTIL HELP ARRIVES OR THE CASUALTY STARTS BREATHING.

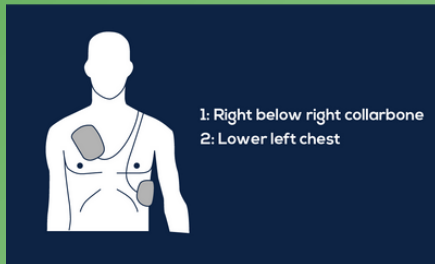




AUTOMATED EXTERNAL DEFIBRILLATORS (AED'S)

Automated external defibrillators (AED's) are renowned for their safety, dependability, and state-of-the-art computerised analysis of heart rhythms, which make them suitable for use by people of all ages and backgrounds.

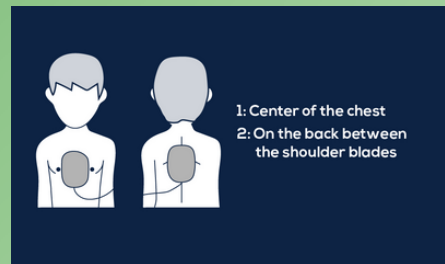
AED PAD PLACEMENT ADULT



- 1: Right below right collarbone
- 2: Lower left chest



AED PAD PLACEMENT CHILD



- 1: Center of the chest
- 2: On the back between the shoulder blades

HOW TO USE A DEFIBRILLATOR:

- PRESS THE GREEN BUTTON TO ACTIVATE THE DEVICE, THEN FOLLOW THE AUDIO PROMPTS.
- PEEL OFF THE TWO ADHESIVE PADS AND ATTACH THEM TO THE PATIENT'S BARE CHEST ACCORDING TO THE IMAGE ON THE DEFIBRILLATOR PADS.
- AFTER AFFIXING THE PADS, DISCONTINUE CHEST COMPRESSIONS AND DON'T TOUCH THE PERSON.
 - THE DEFIBRILLATOR WILL DETECT A SHOCKABLE RHYTHM.
- ONLY PRESS THE 'SHOCK' BUTTON IF THE DEVICE DIRECTS YOU TO DO SO, OR IT WILL SHOCK AUTOMATICALLY FOR MODELS WITH AN AUTOMATIC FEATURE.
- AFTER THE SHOCK HAS FINISHED (OR IF A SHOCK ISN'T ADVISED), START CPR UNTIL THE EMERGENCY PERSONNEL COME OR THE PATIENT REGAINS CONSCIOUSNESS.
- AFTER TWO MINUTES OF CPR, THE AED MAY INDICATE ANOTHER ANALYSIS WHICH COULD LEAD TO MORE SHOCKS.
 - KEEP FOLLOWING THE INSTRUCTIONS OF THE AED AND ADMINISTER TWO MINUTES OF CPR IN BETWEEN EACH ANALYSIS UNTIL EMERGENCY PERSONNEL ARRIVE.





CHOKING CHILD (PART ONE)

Choking is the result of a piece of food or object entering the TRACHEA (windpipe) instead of the OESOPHAGUS (gullet). This causes a blockage of the airway, potentially stopping the flow of air if the blockage is significant. Generally, a mild obstruction can be relieved by coughing, but a severe obstruction may require medical assistance.

SIGNS & SYMPTOMS OF CHOKING

- THE CASUALTY MAY HAVE BEEN SEEN CONSUMING FOOD.
- IT IS LIKELY THE CHILD PUT AN OBJECT IN THEIR MOUTH.
- IF THE AIRWAY OBSTRUCTION IS **MILD**, THE CASUALTY IS STILL ABLE TO TALK, COUGH, OR BREATHE.
- IF THE OBSTRUCTION IS **SEVERE**, HOWEVER, THE CASUALTY WON'T BE ABLE TO TALK OR HAVE A WEAK COUGH, AND WILL STRUGGLE TO BREATHE; THEIR FACE MIGHT BECOME CONGESTED AND BLUISH WITH VISIBLE VEINS IN THEIR NECK.
- THE CASUALTY MIGHT BECOME UNCONSCIOUS.

INFANT UNDER 1 BACK BLOWS & CHEST THRUSTS

LAY THE CHILD DOWN SO THAT THEIR HEAD IS LOWER THAN THEIR CHEST AND ADMINISTER UP TO FIVE STRONG **BACK BLOWS** BETWEEN THEIR SHOULDER BLADES. IF THIS FAILS TO FREE THE OBJECT BLOCKING THE AIRWAY, PROCEED TO GIVING UP TO FIVE **CHEST THRUSTS**. PUSH FIRMLY WITH TWO FINGERS WHEN GIVING CHEST THRUSTS TO A BABY.

WHAT TO DO IF YOUR BABY IS CHOKING

1. Slap it out

- > Lay your baby face down on your thigh and support their head
- > Give up to five back blows between their shoulder blades with the heel of your hand



2. Check their mouth

- > Lay your baby on your thigh face up
- > Carefully pick out any obvious objects with your fingertips

3. Squeeze it out

- > Using two fingers, give up to five downward chest thrusts
- > Check the mouth. If the obstruction hasn't cleared call 999/112 for emergency help



4. Call 999/112

- > Take your baby with you and call 999 or 112
- > Repeat steps 1 to 3 until help arrives or your baby stops choking.

AFTER COMPLETING ONE CYCLE OF BACK BLOWS AND CHEST THRUSTS, **CALL 999** IF THE OBJECT REMAINS LODGED. REPEAT THE CYCLE OF BACK BLOWS AND CHEST THRUSTS UNTIL THE OBSTRUCTION IS CLEARED, EMERGENCY SERVICES ARRIVE, OR THE PERSON BECOMES UNRESPONSIVE.



CHOKING CHILD (PART TWO)

CHILD OVER 1
BACK BLOWS & ABDOMINAL THRUSTS

WHAT TO DO

- IF A CHILD IS CHOKING, THE FIRST STEP SHOULD BE TO **INSTRUCT THEM TO COUGH** IN ORDER TO CLEAR THE OBSTRUCTION. HOWEVER, IF THE CHOKING IS SEVERE, THEN THE FOLLOWING STEPS SHOULD BE TAKEN:

STEP ONE

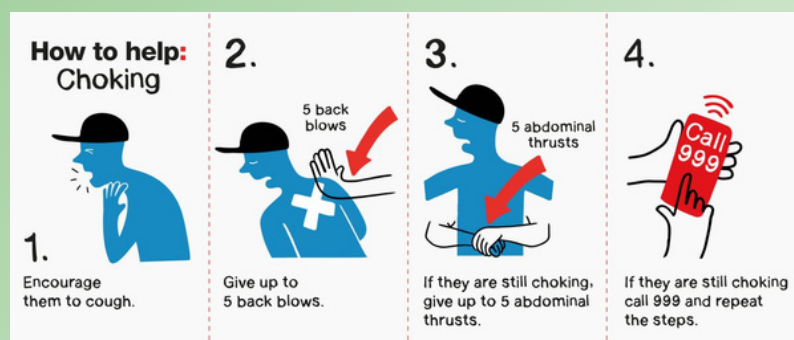
- **SHOUT FOR HELP** IMMEDIATELY AND DO NOT LEAVE THE CHILD UNATTENDED.
- THEN, HOLD THE CASUALTY IN A FORWARD-LEANING POSITION AND **DELIVER UP TO FIVE SHARP BLOWS** WITH THE HEEL OF YOUR HAND TO THE CENTER OF THEIR BACK.

STEP TWO

- POSITION YOURSELF BEHIND THE CASUALTY AND SECURE THEM WITH YOUR ARMS, FORMING A FIST WITH ONE OF YOUR HANDS AND GRASPING IT WITH THE OTHER.
- IN A SWIFT MANNER, PULL INWARDS AND UPWARDS UP TO FIVE TIMES.
- IF NO VISIBLE BLOCKAGE IS PRESENT, CALL EMERGENCY SERVICES.
- REPEATEDLY ADMINISTER BACK BLOWS AND ABDOMINAL THRUSTS UNTIL THE OBSTRUCTION IS GONE, HELP ARRIVES, OR THE INJURED PERSON IS NO LONGER RESPONSIVE.



IT IS ESSENTIAL TO **ACT FAST** IF SOMEONE IS CHOKING. ONCE A CYCLE OF BACK BLOWS AND ABDOMINAL THRUSTS HAS BEEN COMPLETED AND THE OBSTRUCTION IS STILL BLOCKING THE AIRWAY, EMERGENCY SERVICES SHOULD BE CALLED IMMEDIATELY. ANY CHILD WHO HAS RECEIVED ABDOMINAL THRUSTS MUST GO TO HOSPITAL TO BE EXAMINED BY A MEDICAL EXPERT. **REMEMBER!** **ACT FAST**, ASPHYXIATION CAN LEAD TO DEATH WITHIN 5 MINUTES.



CONTACT

Enquire now to discuss your training needs and train to save lives
with FAB First Aid



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