

First Aid Awareness

COURSE INTRODUCTION

This is an awareness course that has been created with the aim to give you the basic knowledge and understanding of how to use First Aid in the event of an emergency accident or incident in the workplace.

Learning Aims

The aims of this course are

- To understand the rules and regulations for the use of first aid in the workplace
- Learn about appropriate equipment and PPE
- How to assess an incident
- Learn about Illnesses, Conditions and how to treat them correctly
- And How to report and record all incidents correctly

Your Training

This training has been divided into 5 modules:

1. The Rules and regulations for First Aid
2. Equipment and PPE
3. How to assess an Incident
4. Accidents, Illnesses, and other Conditions
5. Reporting and recording

Module 1 - The Rules and regulations for First Aid

The Rules and Regulations will tell you what can happen if things go wrong and guide us on what we must do to ensure the health, safety and welfare of individuals requiring First Aid support.

Legislation

The Health and Safety at Work etc. Act 1974

Health and Safety (First Aid) Regulations 1981

RIDDOR The Reporting of Injuries Diseases and Dangerous Occurrence Regulations 2013

First Aid Risk Assessment should be done by your employer that will identify possible risks and name trained personnel and first aiders needed.

An appointed person is someone who is in charge of your first aid arrangements. This includes looking after the equipment, and calling the emergency services.

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You can have more than one appointed person and they don't need to have any formal training.

An appointed person must always be available whenever people are at work.

Module 2 - Equipment and PPE

In the event of injury or sudden illness, failure to provide first aid could result in a casualty's death. The employer should ensure that an employee who is injured or taken ill at work receives immediate attention.

Your employer should by law provide adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work.

First aid boxes

First aid boxes should be available and easy to access in the event of an emergency

The contents of your first aid kit should be based on your first aid needs assessment.

A basic first aid kit may contain:

- plasters in a variety of different sizes and shapes.
- small, medium, and large sterile gauze dressings.
- at least 2 sterile eye dressings.
- triangular bandages.
- crêpe rolled bandages.
- safety pins.
- disposable sterile gloves.
- tweezers.

Disposable gloves

If available, gloves should be worn whenever you dress wounds, handle bodily fluids or other waste materials.

Protection from infection

A plastic face shield or pocket mask can help protect you from cross infection with the casualty when giving rescue breaths.

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Automated External Defibrillator (AED)

While **there is no specific legal requirement for employers to provide AEDs in the workplace**, in many modern working environments, AEDs are often being added to a company's first aid provision on site.

- This is a device that restores a normal heartbeat by sending an electric pulse or shock to the heart.
- It can also restore the heart's beating if it suddenly stops.
- AEDs were developed to save the lives of people experiencing sudden cardiac arrest.

Module 3 – How to assess an incident

You must assess what has happened, protect yourself and the injured person.

1. DANGER

Check the immediate area for dangers and remove if possible. The person should only be moved if dangers cannot be removed. Do not put yourself in danger.

2. RESPONSE

Check if the person is responsive. Talk to them, ask who they are, let them know you are here to help. Always ensure you explain what you are doing. Tap their shoulder if no response received. Shout for help.

3. AIRWAY

If the person is unresponsive, the tongue may block their airway. Check their airway is clear, remove any objects obstructing the airway. Tilt the head back using 2 fingers under the chin. (Extra care should be observed if spinal injuries are suspected).

4. BREATHING

Look for signs of breathing. Is the chest moving? Can you hear the person breathing?

If a person is unconscious but is breathing and has no other life-threatening conditions, they should be placed in the recovery position.

Putting someone in the recovery position will keep their airway clear and open. It also ensures that any vomit or fluid won't cause them to choke.

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<https://www.nhs.uk/conditions/first-aid/recovery-position/>

If the Person is Not Breathing

If the person is not responding to you then you should call the emergency services and inform them, you are trained and then begin CPR.

When you call 999 for an ambulance, you should be given basic life-saving instructions over the phone, including advice about CPR.

CPR on adults

If you have been trained in CPR, including rescue breaths, and feel confident using your skills, you should give chest compressions with rescue breaths.

If you're not completely confident, attempt hands-only CPR instead.

See latest Covid-19 guidance for CPR on adults

<https://www.sja.org.uk/get-advice/first-aid-advice/unresponsive-casualty/how-to-do-cpr-on-an-adul>

Hands-only CPR

To carry out a chest compression:

1. Kneel next to the person and place the heel of your hand on the breastbone at the centre of their chest. Place the palm of your other hand on top of the hand that's on their chest and interlock your fingers.
2. Position yourself so your shoulders are directly above your hands.
3. Using your body weight (not just your arms), press straight down by 5 to 6cm (2 to 2.5 inches) on their chest.
4. Keeping your hands on their chest, release the compression and allow their chest to return to its original position.
5. Repeat these compressions at a rate of 100 to 120 times a minute until an ambulance arrives or for as long as you can.

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CPR with rescue breaths

1. Place the heel of your hand on the centre of the person's chest, then place the palm of your other hand on top and press down by 5 to 6cm (2 to 2.5 inches) at a steady rate of 100 to 120 compressions a minute.
2. After every 30 chest compressions, give 2 rescue breaths.
3. Tilt the person's head gently and lift the chin up with 2 fingers. Pinch the person's nose. Seal your mouth over their mouth and blow steadily and firmly into their mouth for about 1 second. Check that their chest rises. Give 2 rescue breaths.
4. Continue with cycles of 30 chest compressions and 2 rescue breaths until they begin to recover or emergency help arrives.

Coronavirus (COVID-19) advice

If there's a chance the person who's unwell has COVID-19, place a cloth or towel over their mouth and nose and do hands-only CPR until an ambulance arrives.

For more information, see:

[Resuscitation Council UK statement on COVID-19 in relation to CPR and resuscitation](#)

[COVID-19 guidance for first responders on GOV.UK](#)

CPR and DNAR

DO NOT ATTEMPT RESUSCITATION (DNAR)

DNAR is a document that is issued and signed by a Doctor which identifies an individual's wish not to be resuscitated.

This is not legally binding but communicates to professionals and carers that CPR should not be attempted.

It is important that you find out whether any individual that you support has a DNAR in place, and what your workplace procedure is if an individual is not resuscitated.

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Module 4 - Accidents, Illnesses, and other Conditions

Slips, trips and falls can impact on employees and prevent them from working following injury. Individuals who live in care homes, live in their own homes or attend other activities are also vulnerable to injuries from falls.

Slip, trip and fall injuries include:

- Minor wounds and bruises
- Severe bleeding
- Shock
- Head injuries / Concussion
- Fractures
- Sprains and Strains

How to clean and dress a cut or graze

If the bleeding has stopped, you can clean a small wound and then put a plaster or dressing over it.

1. Wash your hands thoroughly and dry them. Put on disposable gloves if you have some.
2. Clean the wound by rinsing it with clean water
3. Clean the skin around the wound– but try not to get antiseptic into the wound.
4. Pat the area dry using a gauze swab or a clean tea towel.
5. Put on a sterile dressing or a plaster.

Keep the dressing clean by changing it as often as you need. You can take it off after a few days, once the wound has closed.

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Severe Bleeding

- Alert emergency services
- Use firm pressure on the wound
- Lay the person down and raise their legs
- Check for anything that may be embedded; do not remove
- Cover wound with sterile dressing; work around anything that may be embedded
- If further bleeding occurs apply a second dressing

Shock

Shock happens when the blood is not circulating effectively for the body to function.

This can damage cells and cause organs, like the brain and heart, to fail.

Causes of shock include:

- Heart problems
- Severe internal / external bleeding
- Loss of body fluids from dehydration, diarrhoea, vomiting or burns
- Severe allergic reactions and severe infection

Signs of Shock

The person:

- Is pale
- Has cold, clammy skin
- Has fast, shallow breathing
- Has a fast, weak pulse
- Is yawning or sighing
- Appears confused, or is
- Unresponsive (in extreme cases)

Head Injuries and Concussion

Some head injuries are obvious to detect like cuts, grazes and wounds.

Concussion is difficult to detect.

If concussion is suspected you must seek medical advice.

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Signs and Symptoms: The person appears pale and feels nauseous or is vomiting. They are cold to touch and their pulse is rapid.

Treatment: Lay the person down with legs raised. Assess consciousness frequently. If there is no response from the person, check airway / breathing, proceed with CPR if necessary.

Fractures

A fracture can be used to describe the following:

- a crack, chip or a break in a bone

Signs and symptoms: person appears to be limping or unable to use affected limb. There is swelling and bruising around the area.

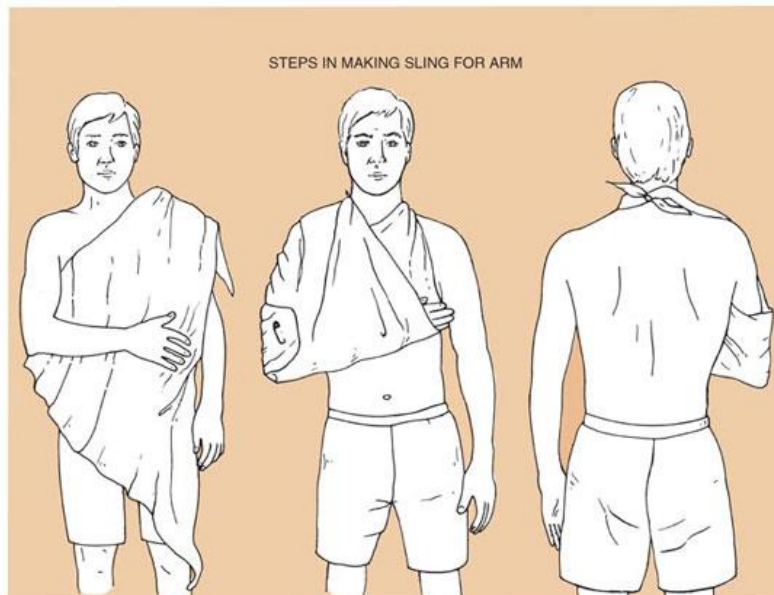
Treatment: Prevent movement of affected body part. Do not move the person unless they are in danger.

Upper Limb: Slings can be used to support upper limb injuries. See next page.

Lower Limb: Immobilise lower limb by using uninjured limb as support; bandage together, maintain circulation.

Arm Sling

This is how to put an arm in a sling.



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Sprains

A sprain is an injury to ligaments. The severity of injury to ligaments can vary from stretching to tearing.

It is difficult for a first aider to tell the difference between a sprain or a fracture without an X-Ray. Always seek medical advice.

Treatment

- REST
- ICE (10-20minutes)
- COMPRESSION
- ELEVATION

Choking

Choking can happen to anyone at any time. Regardless of whether you work in a role that requires you to understand how to recognise and respond to a choking incident, having even a basic understanding of how to act in such circumstances can be beneficial to everybody.

Signs of Choking

Some of the more common signs a person is choking include:

- Coughing or gagging.
- Watery eyes.
- An inability to talk properly or at normal volume.
- Having a red, puffy face.
- Wheezing or abnormal breathing sounds.
- Signs of distress, such as throat clutching or panicked hand gestures.
- A blue colouring to their lips or skin.
- Passing out.

How to Administer Back Blows

To perform back blows on adults or children over one year of age, you should:

- Stand behind them, slightly to the side. Hold out your forearm and lean them forward so you are supporting their chest.
- Lay a small child over the age of one face down on your lap to perform back blows.

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- Use the heel of your free hand to give a maximum of five sharp back blows, between their shoulder blades. The heel is the part of your hand between the palm and your wrist.
- Check to see if the obstruction has cleared.
- Move on to five abdominal thrusts if it has not cleared.

Asthma

Asthma is a common lung condition, affecting approximately 5 million people in the UK.

Breathing difficulties occur when muscles in the airway and lungs spasm, causing the airway to narrow.

Did you know Asthma attacks kill 3 people in the UK each day. But many of these deaths could be avoided.

What are the most common asthma symptoms?

- **Coughing** - a cough that keeps coming back is a symptom of asthma. However, not everyone with asthma coughs.
- **Wheezing** - a whistling sound when you breathe.
- **Breathlessness** - some may find it difficult to take a deep breath in, or a long breath out.
- **Chest tightness** - also described as a heavy weight on the chest; may also feel like a dull ache, or a sharp stabbing pain in the chest.

Hyperventilation

Hyperventilation is excessive breathing. This is usually caused by anxiety and can happen at the same time as a panic attack. An individual that is hyperventilating will breathe unnaturally fast or deep.

Signs and Symptoms

- Fast, deep breathing
- Anxiety
- Dizziness, feeling faint
- Trembling or tingling in the hands
- Muscle cramps in the hands and feet

If there are no improvements following Steps 1-3 call 999.

If the individual becomes unresponsive check airway and breathing. Place in recovery position if breathing.

If the individual has stopped breathing undertake CPR with rescue breaths.

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Drowning

Drowning occurs when an individual cannot breathe because their nose and mouth have been submerged in water or another liquid.

After the individual is rescued check if they're breathing. Ask someone to call 999.

After the individual is rescued check if they're breathing.

Start CPR

If they start breathing again, cover them with warm clothes and blankets. Wait for the emergency services to arrive.

Dehydration

Dehydration occurs when the body loses fluid. This can occur through:

- Exposure to heat
- Excess sweating
- Vomiting
- Diarrhoea
- Lack of drinking

Signs and Symptoms of Dehydration:

- Headache
- Light-headedness, fainting
- Dry mouth, eyes and lips
- Small amounts of dark urine
- Muscle cramps
- Listless, lack of movement

The fastest way to cure dehydration is to **take an oral rehydration solution and treat the underlying cause of fluid loss**. With mild or moderate dehydration, drinking plenty of fluids should be enough to replenish your fluids.

Burns and Scalds

Burns and scalds are the effects of excess heat on the skin.

Shock may also be experienced due to fluid loss.

Burns and Scalds – What To Do

If the burn is on the face/hands/feet, or larger than a hand size, or is a deep injury this is a serious burn.

Call 999 for emergency medical help.

STEP 1: Remove the person away from the heat, cool the burn down immediately by running it under cool or lukewarm water for **at least 20 minutes**.

(Infection risks will be increased if creams or gels are used)

STEP 2: Do not remove anything stuck to the burn. Remove jewellery or any clothes near to the burn.

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STEP 3: Protect the burn from infection by covering with cling film or clean plastic bag. Do not use any material that will get stuck in the wound.

STEP 4: Treat for shock if necessary.

Allergies

Allergies are triggered by allergens. The body's immune system thinks that the allergen is a threat and tries to fight it.

Allergic reactions usually happen quickly within a few minutes of exposure to an allergen.

They can cause:

sneezing

a runny or blocked nose

red, itchy, watery eyes

wheezing and coughing

a red, itchy rash

worsening of asthma or eczema symptoms

Most allergic reactions are mild, but occasionally a severe reaction called anaphylaxis or anaphylactic shock can occur.

Allergic Reactions – What To Do

If the individual becomes unresponsive, check airway and breathing.

Place in recovery position if breathing.

If the individual has stopped breathing undertake CPR.

Call 999, let them know any details you may have e.g. what the trigger may be.

The person may have medication with them, help them to use it or follow the instructions if the person is unable. Auto injectors contain adrenaline / epinephrine. This will reduce the reaction.

Diabetic Emergencies - What To Do

Hyperglycaemia.

High blood sugar levels:

Call 999 for emergency help

Check their breathing, pulse and response

- If the individual becomes unresponsive check airway and breathing
- Place in recovery position if breathing
- If the individual has stopped breathing undertake CPR procedures

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Hypoglycaemia.

Low blood sugar levels:

The immediate treatment for hypoglycaemia is to **have some food or drink that contains sugar, such as dextrose tablets or fruit juice, to correct your blood glucose levels.** After having something sugary, you may need to have a longer-acting "starchy" carbohydrate food, such as a sandwich or a few biscuits.

Seizures

Seizures occur when there is an interruption of electrical activity in the brain.

Signs

There are five key things to look for:

1. Loss of responsiveness
2. Rigid body, arching back
3. Breathing difficulties
4. Convulsions (uncontrolled movements)
5. Loss of bladder / bowel control

Symptoms

Seizures can be a symptom of:

- Epilepsy - a condition which affects the brain causing repeated seizure
- Head injury
- Alcohol poisoning
- Hypoglycaemia

Seizures – What To Do

If the individual becomes unresponsive check airway and breathing. Place in recovery position if breathing.

If the person has stopped breathing undertake CPR procedures.

Don't restrain or move the individual. Protect them by removing any danger. Protect their head by placing a pillow underneath it. Loosen clothing. Observe how long the seizure lasts.

Call 999 for medical assistance if:

- It's the individual's first seizure or cause is unknown
- The individual is having repeated seizures
- The seizure lasts longer than 5 minutes
- The individual is unresponsive for longer than 10 minutes

After the seizure the individual may fall asleep. Monitor

Medication:

- You may be trained to administer medication during a seizure e.g. Buccal Midazolam
- You must be specifically trained in this procedure and when to administer to a certain individual

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Stroke

If the blood flow to the brain is cut off then a stroke will occur. The brain needs oxygen in the blood to function. Lack of oxygen will damage brain cells. Use the **FAST** test:

What are the warning signs of a stroke FAST?

Warning Signs of Stroke

- Sudden numbness or weakness in the face, arm or leg (especially on one side of the body).
- Sudden confusion or trouble speaking or understanding speech.
- Sudden vision problems in one or both eyes.
- Sudden difficulty walking or dizziness, loss of balance or problems with coordination.

- **F = Face Drooping** – Does one side of the face droop or is it numb? Ask the person to smile. Is the person's smile uneven?
- **A = Arm Weakness** – Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
- **S = Speech Difficulty** – Is speech slurred?

- **T = Time to call 911**

Module 5 – reporting and recording

Accident Book

Every workplace should have an accident book. This can be computerised or in hard copy. It must be accessible to all employees. If an employee has an accident, it must be recorded.

Individuals Receiving Care and Support

Records must be kept of any accident or incident involving an individual that you support.

Facts about what happened are usually recorded on an Incident Form.

Once the necessary actions have been carried out the form can then be stored in the individual's personal file.

You should be guided through the procedures for recording and reporting during your practical training, so that you are familiar with your workplace procedures and documentation.