

First aid learning for young people

EDUCATOR SKILL GUIDE



FIRST AID

Refusing to ignore people in crisis

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Staying safe

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	There is an emergency situation and someone may need your help.	Stay safe – don't put yourself in a dangerous situation.	<p>Assess what is going on – ask yourself 'is it safe for me to help?'</p> <p>Get someone, ideally an adult, to help you.</p> <p>If you feel it is not safe then call 999 for emergency help.</p>	<p>You are the most important person there. You can't help another person if you get hurt yourself.</p> <p>If you are concerned the situation may be dangerous, you will be helping just by calling 999.</p>

Frequently asked questions

What situations could be dangerous?

Moving traffic, violent or aggressive people, deep/cold/moving water, fire, cliffs, railway lines, unstable ground or buildings, and sharp objects can all be dangerous.

What should I do if there's an emergency and I'm alone?

If you are alone and feel unsafe, call 999 and answer all the questions the emergency call handler asks you.

What should I do if I feel unsafe in an emergency and I don't have a phone?

Find an adult you trust and explain the situation or move to a public place where you feel safe and tell someone to call 999.

Calling 999 and where to get help

The 999 emergency service should only be used in an emergency that needs an ambulance (or other emergency service). People usually know how to contact an ambulance but are often not aware that the emergency call handler will ask questions to work out what is wrong and will make suggestions as to how to help the injured or ill person.

You are not alone: as soon as you call 999 you will have people helping you – they will tell you what you need to do.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	Someone is ill or injured and needs urgent medical help.	Call 999 in an emergency and be as accurate as you can when answering their questions.	<p>Call 999.</p> <p>Listen to the call handler and answer their questions as accurately as you can.</p> <p>If possible stay with the person who needs help while waiting for the ambulance.</p>	<p>As soon as you call 999 you have a team of people to help you:</p> <ul style="list-style-type: none"> > The ambulance is on its way. > The emergency call handler can advise you on the action to take.
Nice to know				<p>Other examples of where to get help are:</p> <ul style="list-style-type: none"> > GP. > Non-emergency helpline (111). > NHS Walk-in Centre or Urgent Care Centre. > Accident and Emergency (A and E).

Frequently asked questions

Can the 999 operator always tell where you are or track your location?

The call handler may be able to locate you if you call from a landline. However they will not be able to accurately pinpoint you if you call from a mobile phone. It is important to say exactly where the injured person is. Ideally the call should be made from a phone that remains with the injured or ill person until help arrives. This will mean the emergency call handler can call back if necessary.

What if I am unsure whether to call 999?

If it is an emergency, (for example, someone's life is at risk or they need urgent medical attention) then you should call 999, even if you are unsure. The call handler will ask you questions to work out what priority your call is.

What are the non-emergency numbers for different regions of the UK?

- > England - 111
- > Scotland - 111
- > Wales - 0845 46 47
- > Northern Ireland - no equivalent service.

Frequently asked questions

What is the difference between 999 and 112?

999 is the only number young people need to remember. Only talk about 112 if a learner asks. 112 is the European emergency number and can also be used in the UK. 999 is the British emergency number. There is no difference in how these numbers work.

Do I have to give my name when calling 999?

Your name is one of the pieces of information the operator will ask for.

If I ring 999 because I need an ambulance, will the police come too?

Not usually. It can depend on the circumstances but police are normally only involved if:

- > There is believed to be a risk / danger at the site of the emergency. This could be due to a perceived threat (for example, shouting / swearing / indication of violence) noted by the ambulance call taker, or if the site / patient had been flagged as potentially dangerous due to a previous event.
- > The crew on scene request police presence because of a threat (real or perceived) or because the individual is refusing assistance and they are believed to lack the capacity to make that decision (for example, to make them go).

I am deaf, how can I call 999?

You can reach 999 using the emergency SMS service. You will need to register your mobile phone to use this service, at: www.emergencysms.org.uk/

What type of information will the call handler ask for?

You will need to have the following information available when you call 999:

- > The location where you are, including the area or postcode.
- > The phone number you are calling from.
- > Exactly what has happened.

As soon as the call handler knows where you are they will start arranging help for you. You will also be asked to give some extra information, including:

- > the ill or injured person's age, gender and any medical history;
- > whether the person is awake/responsive, breathing and if there is any serious bleeding or chest pain;
- > details of the injury and how it happened.

Answering these questions will not delay the ambulance service, but it will help the call handler give you important first aid advice while the ambulance is on its way.

The extra information also helps them to make sure you get the most appropriate help.

Resources

First aid learning for young people

<https://firstaidlearningforyoungpeople.redcross.org.uk/educator-zone/>

999 transcript

www.theguardian.com/society/2008/nov/29/unpublished-999-call-epileptic-fit

999 audio call

www.theguardian.com/society/audio/2008/nov/29/999-emergency-epileptic-fit

999 transcript: 19 year old Joel calls for an ambulance when he thinks his dad has had a stroke (he is in fact having a cardiac arrest). Note: contains swearing. www.theguardian.com/society/2008/nov/29/unpublished-999-call-transcripts-cardiac-arrest

First aid learning for young people educator skill guide

Helping someone who is having a severe allergic reaction

A severe allergic reaction – or anaphylactic shock - can quickly affect someone and make it difficult for them to breathe. It can be very frightening for the person, especially if this is the first time it has happened. Common causes of a severe allergic reaction are food (such as peanuts, shellfish), stings and latex.

Have confidence that you are doing the best you can to help them.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person has contact with something they are allergic to (for example, peanuts, a sting or latex).</p> <p>The person may develop a rash, itchiness or swelling on their hands, feet or face.</p> <p>Their breathing may slow down.</p>	Call 999.	<p>When you observe these symptoms, call 999 or ask someone else to do so.</p> <p>Reassure the person and make them comfortable while you wait for the ambulance to arrive.</p> <p>Stay with the person and monitor them in case they need additional help from you.</p>	<p>An allergic reaction can affect someone very quickly and can be very serious, resulting in swelling of their airway, which causes them to stop breathing.</p> <p>If someone is having a severe allergic reaction for the first time this will be very frightening for them; and for you to deal with.</p>
Nice to know	<p>Vomiting and diarrhoea can also occur.</p> <p>Once someone knows about their allergy, auto-injectors may have been prescribed by their doctor.</p>	Help them to use their auto-injector.	If the person knows they have an allergy, you can help them to use their auto-injector, or do it yourself following the guidance on the side of the auto-injector.	<p>An auto-injector contains medicine which helps ease the symptoms of an allergic reaction.</p> <p>Tell the ambulance personnel if the auto-injector has been used.</p>

Frequently asked questions

What sort of food items can cause a severe allergic reaction/anaphylactic shock?

The most common foods that can cause allergic reactions are things like nuts, shellfish, dairy products and eggs. Other things such as latex, bee and wasp stings, and certain medications can also cause allergic reactions.

How will I know if it is a severe allergic reaction?

Someone may have mild allergies, resulting in itchy skin and eyes. However, a severe allergic reaction can cause symptoms such as swelling of their tongue or neck and difficulty breathing. If you observe these symptoms, call 999.

Can I do anything to prevent an allergic reaction?

Once someone has a known allergy, you can prevent a severe allergic reaction by keeping them away from the cause of the allergy.

How do I use an auto-injector?

The auto-injector will have instructions on the side of its packaging which you should follow. Usually you need to remove the safety cap from the injector and place the tip of the injector firmly against the person's thigh to release the medicine. Hold the auto-injector in place for 10 seconds to ensure the dosage is fully delivered and then massage the injection site for 10 seconds. Give the auto-injector you used to the medical professionals when they arrive.

I've heard about ICE what is it?

ICE stands for 'In Case of Emergency'. A person may carry ICE information that is easily accessible (on a bracelet, mobile phone, etc) and can be used to find out information about them such as their medical conditions, medication, and next of kin.

Glossary

Anaphylaxis or anaphylactic shock – describes someone having a severe allergic reaction.

Anti-histamines - a type of medicine often used to treat a number of allergic health conditions.

Auto-injector - medical device designed to deliver a single dose of a particular (normally life-saving) drug by injection, for example an epipen.

Helping someone who is having an asthma attack

Asthma is a medical condition that affects the airways. If someone is having an asthma attack then usually they will have lived with the condition for a while and will have experienced an asthma attack before. There are many different factors that could trigger an attack (such as congestion from a cold, exercise, or allergies). Sometimes there is no obvious cause.

Try to stay calm, as this will help them to remain calm and help their breathing. Have confidence that you can help.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	The person is wheezing and finding it difficult to breath.	Help them to take their medication.	<p>Help them to sit in a comfortable position and take their medication.</p> <p>Reassure them.</p> <p>Stay with them until they feel better: if the attack becomes severe, call 999 or get someone else to do it.</p>	<p>When someone has an asthma attack it is difficult for them to breathe. This is because the muscles in the airways tighten and become narrow.</p> <p>Their medication will relax the muscles, allowing the airways to open and ease their breathing.</p>
Nice to know	<p>The person may also be unable to speak or cough. They may appear distressed and anxious.</p> <p>They may have jewellery (like a bracelet) that tells you they have asthma.</p>			<p>They may also have a spacer device which can be fitted to their inhaler to help them breathe in their medication more easily.</p>

Frequently asked questions

What is asthma?

Asthma is a medical condition that affects the airways – the tubes that carry air in and out of the lungs. When someone has an asthma attack, these tubes become narrowed, making it difficult to breathe in and out.

How can I tell if someone is having an asthma attack?

People with asthma manage their condition and should be able to let you know if they are having an attack. They will have difficulty breathing and speaking, and may cough and wheeze. A person having an attack may be very anxious and distressed as they struggle to breathe. In some cases, their lips, earlobes and nail beds may turn greyish-blue because there isn't enough oxygen in their body.

I have given them their medication. Is there anything else I can do to help ease the attack?

Help them to sit up and lean forward slightly as this may make it easier for them to breathe. Encourage them to breathe slowly and deeply.

What if they don't have an inhaler?

You should call 999 straight away for an ambulance to take the person to hospital.

Frequently asked questions

When should I call 999 if someone is having an asthma attack?

Call 999 if any of the following apply:

- > It is their first attack
- > They stop breathing
- > They are finding it difficult to talk.
- > They are becoming exhausted.
- > Their medication doesn't work
- > They don't have their medication with them.
- > Their condition gets worse.

What do I do if the person stops breathing?

If they stop breathing, treat them as an unresponsive person who is not breathing see: skill unresponsive and not breathing.

What sort of medication will they use?

Someone who has asthma will normally have been prescribed an inhaler by their doctor. Usually, inhalers to relieve an asthma attack are blue, while preventative inhalers may be brown or white. The person may also have a spacer which can make using their reliever inhaler more effective.

If someone is having an asthma attack they should know how to use their inhaler and spacer; they may need your help in finding them.

Is there a technique to using an inhaler?

There are different types of inhalers which vary in the way they are used. It is best to follow the instructions on the packaging.

- > The most common type of reliever inhaler needs to be shaken before use.
- > Then the person removes the cap from the mouthpiece, breathes out, places the mouthpiece in their mouth, and presses down on the canister.
- > As they press down on the canister medicine is released so they should breathe in to inhale the medicine.
- > The medicine enters their lungs with their breath and may help their breathing.
- > If the medicine has no effect, the person can take two puffs from their inhaler every two minutes until they have had ten puffs.

What is a spacer and how does it work?

A spacer is a hollow cylindrical container. An inhaler fits into one end of it and there is a mouthpiece at the other end. When a person presses on the inhaler the medicine is released and collects in the container. The person experiencing an asthma attack can then breathe the medicine in slowly. It is recommended that a spacer is used when a baby or child is having an asthma attack as they may have trouble using an inhaler effectively.

I've heard about ICE, what is it?

ICE stands for 'In Case of Emergency'. A person may carry ICE information that is easily accessible (on a bracelet, mobile phone, etc) and can be used to find out information about them such as their medical conditions, medication, and next of kin.

Glossary

Airways – the tubes that connect our mouth and nose to our lungs.

Inhaler – (or puffer) is a device used for delivering medication into the lungs.

Helping someone who is bleeding heavily

Try to think clearly – what clothing do you have on you that you can use to help?

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	Blood is flowing from a wound (and it's too big for a plaster).	Put pressure on the wound.	<p>Put pressure on the wound with whatever is available.</p> <p>Call 999 as soon as possible, or get someone else to do it.</p> <p>Keep pressure on the wound until help arrives.</p>	<p>The pressure you apply to the wound will stop or slow the flow of blood. This will help the blood clot and stop the bleeding.</p> <p>To put pressure on the wound, you can use your hand, a t-shirt, a scarf - anything that can be put over the wound.</p>
Nice to know	If they lose a large amount of blood they may look pale and feel cold and dizzy; this means the person is in shock.	Lie them down and lift their feet higher than the rest of their body.	<p>Continue to apply pressure to the wound to stop the blood coming out.</p> <p>Lie them down and lift their feet higher than their heart in this position.</p> <p>Call 999 if you haven't already done so.</p> <p>Wrap them in a blanket to keep them warm.</p>	<p>Shock is caused by a lack of blood pumping around the body.</p> <p>Raising the legs higher than the heart helps increase the blood supply (and oxygen) to their brain and heart.</p>

Frequently asked questions

What do I do if the bleeding soaks through the item I've used?

Do not remove it but add more items (like t-shirts and tea towels) and maintain firm pressure. Call 999 as soon as possible, or get someone else to do it.

Should I worry about infection or catching something from their blood?

If you are worried about infection and want to use a barrier, you can use a plastic bag or plastic gloves, or get them to use their own hand to put pressure on the wound. Remember that if you don't have a cut on yourself, you are very unlikely to get an infection, or infect them.

Should I wash the wound?

Don't wash a wound that is bleeding heavily; if you put a heavily bleeding wound under a tap, you may make it bleed more. You can however wash minor cuts and grazes to remove any dirt. You should also wash animal bites with soapy water if they are not bleeding heavily.

Should I elevate the wound?

Your priority should always be to apply pressure to the wound. This is the most effective way to stop the blood flow. Once pressure has been applied you can also elevate the wound above the level of the heart if you are able to. However you should ensure that you continue to apply pressure at the same time.

Frequently asked questions

What should I do if there is an embedded object in the wound?

Do not remove it – it is helping to plug the hole and stop the blood flow. Instead simply apply pressure around the object. Removing the object from the wound can make the bleeding much worse.

If a person has been stabbed in their chest with a sharp object and has a deep wound, what should I do?

> Tell someone to call 999 straightaway while you help them to sit down. You can help them to lean to their uninjured side as this may help with their breathing. If the wound is bleeding then apply pressure to it to stop or slow down the flow of blood. If it is not bleeding then leave the wound open to the air.

> If you are alone and there is no one around to help, put your phone on speaker to call for an ambulance while you help the person.

How do I treat nosebleeds?

Refer to skill: helping someone with a nosebleed.

What do I do for a minor cut?

You can wash minor cuts and grazes to remove any dirt if necessary and apply a clean plaster over the wound.

Resources

First Aid for knife attacks - Art Against Knives working in partnership with the British Red Cross

www.youtube.com/watch?v=xHkvJByJ1qQ (3:59)

What would you do if you were stabbed at Notting Hill Carnival? – Chris' story

www.youtube.com/watch?v=UkDVHUz0A9w (1:52)

If your friend was stabbed what would you do? DJ's story

www.youtube.com/watch?v=Wfc_A6aEtIg (0:31)

Could you save a life with a hoody? Chanel's story

www.youtube.com/watch?v=dXUOEPHFe-M (1:59)

Tomska, Stabbed feat. OneyNG,

www.youtube.com/watch?v=8tTAlI2xxSA (2:07)

Helping someone who has a broken bone

In first aid terms, a fracture, crack or misshapen limb are all the same thing: a broken bone. Someone could break a bone by a fall from a height or by being hit by an object. It is often very difficult to tell whether an injury is a sprain, strain or broken bone.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	The person has pain, bruising or swelling or they are lying in an unnatural position, following a fall or a blow from an object.	Keep the injury still and supported.	Support the injury with their hand, or use a cushion or items of clothing to prevent unnecessary movement. As soon as possible, call 999 or get someone else to do it. Continue supporting the injury until help arrives.	Supporting the injury may relieve pain and prevent further injury.
Nice to know	In severe cases the limb may be misshaped or have an open wound.			If possible support the limb above and below the injury. If the injury is to their leg gently pad the gaps between their leg and the floor to support the limb.

Frequently asked questions

What should I do if they will not let me support the injury?

Try to encourage them to support the injury themselves by holding it.

If a bone is dislocated, should I put it back in place?

No. If there is a dislocation or the limb looks broken, the person needs to go to hospital for treatment. Never attempt to put dislocations back in place; you may cause further damage.

What if everything looks normal and they only have a bruise?

Try to find out what caused the injury (for example, a fall or blow from an object), as this may indicate if there is a broken bone. However it is usually impossible to differentiate between a broken bone, sprain or strain without an x-ray. If you are in any doubt, seek medical advice.

What can I do if they are in lots of pain?

You can give them the recommended dose of paracetamol or another painkiller, to relieve the pain.

If they can move it, or can stand on it, does this mean it probably isn't broken?

Not necessarily. The person may still have a broken bone, even if they can still move the limb. The only accurate way to diagnose a broken bone is to x-ray it. The person may still have a broken bone, even if they can move their limb. If the injury causes pain or discomfort and symptoms do not improve, seek medical advice.

What should I do if I think they have broken their collar bone?

For all broken bones you should follow the same treatment. If they have broken their collar bone they are likely to have pain if they move their arm (as it is attached to the collar bone). So help them to keep their arm still and supported with cushions, clothing or whatever you have to hand.

Resources

Marcus Butler, Bungee jump disaster

www.youtube.com/watch?v=JNFUZz1bqmg (3:34)

Pointless blog TV, Bungee jump fail

www.youtube.com/watch?v=T_eQ73oLNdM (3:25)

Helping someone who has a burn

The faster and longer a burn is cooled, the lower the risk of being scarred.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	The person has redness and severe pain after coming into contact with something hot.	Cool the burn.	<p>Cool the burn with cold running water for at least ten minutes.</p> <p>Call 999 if the burn is severe or a child has been burned.</p> <p>After the burn has been cooled, cover it with cling film or a clean plastic bag if available.</p>	<p>Cold running water will take the heat out of the burn; this can reduce pain and the risk of scarring.</p> <p>If you don't have cold water, use any cold harmless liquid such as milk, orange juice or fizzy drink.</p> <p>Plastic coverings like cling film help to prevent infection.</p> <p>They also reduce pain by preventing air getting to the burned area.</p>
Nice to know	They may have a blister. Serious burns may also have a burning smell.			

Frequently asked questions

If clothes are stuck to the burn, should I try to remove them?

No. Remove any clothing or jewellery near the burned area, but don't try to remove anything that's stuck to the burn. This could cause more damage.

What types of burn are there?

Burns fall into two main categories: burns and scalds. Burns are caused by contact with hot objects or flames, or by friction (for example, rope burns). Scalds are caused by steam or hot liquids, such as tea or oil. Both burns and scalds should be treated in exactly the same way.

Should I put butter or cream on a burn? I've heard that will help.

No. Butter or cream does not cool the area. All oils retain heat, which is the opposite of what you're trying to do. If you put anything on top of a burn and it later needs to be removed in hospital, it may cause further pain and damage.

Should I use ice to cool the burn?

No. Use cold water (or a cold harmless fluid) only. Ice could damage the skin.

I was told that rubbing toothpaste into a burn will sooth it—is this right?

Toothpaste is not recommended for treating burns. Many types of toothpaste contain menthol which may give a superficial feeling of cooling, but is not effective at cooling the whole of burn, deep down into the skin.

Can I use burns gels or antiseptic creams?

Gels and creams do not form part of the initial treatment for a burn. Specialist burns gels should only be used to cool a burn if no water (or similar fluid) is available. Antiseptic creams are not recommended to use for cooling a burn.

How do I know when to go to hospital?

For babies or children you should always go to hospital. For adults, if the burn looks deep or if you are in any doubt how severe the burn is, seek medical advice.

Should I put a plaster over a burn to make sure it doesn't get infected?

No. Don't use any adhesive bandages as they'll stick to the skin and may cause further damage. Cover the burn with cling film or a clean plastic bag – this will help prevent infection.

Resources

Amazing Phil, Fireworks Fail

www.youtube.com/watch?v=ml_xodjQ00I (4:47)

Helping someone who is choking

Helping an adult or child who is choking

If someone starts choking it will happen suddenly; by acting quickly and staying calm your actions will make a real difference – you will help them to breathe again.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	They may be clutching at their chest or neck and won't be able to speak, cough or breathe.	Give back blows.	Bend them forwards and hit them firmly on their back between the shoulder blades.	Hitting someone firmly on the back creates a strong vibration and pressure in the airway which is often enough to dislodge the object. Dislodging the object will allow them to breathe again.
Nice to know	If five back blows do not dislodge the object, and you feel able, you can try abdominal thrusts.	Give up to five abdominal thrusts (abdominal thrusts can also be called 'tummy squeezes').	Stand behind them and hold them around their waist forming a fist with your hands. Pull your hands inwards and upwards above their belly button. Repeat this up to five times. If the object has not cleared, call 999. Then continue with cycles of back blows and abdominal thrusts until the blockage clears.	Abdominal thrusts squeeze the air out of the lungs and may dislodge the object.

Frequently asked questions

Do I treat a child who is choking differently to how I treat an adult?

No. Treat children (aged one to puberty) the same as adults. You should modify the force of the back blows depending on the size of the child.

If a child is choking, should I hang them upside down by their feet? I've heard that's what I'm meant to do.

No, this is not effective, and it may cause further injury if you happen to drop them. Tipping them upside down may also embed the object further. If a child is choking, you should give up to five firm blows on the back.

How do I treat a baby who is choking?

For children under one year old, hold the baby face down along your thigh with their head lower than their bottom. Hit them firmly on their back up to five times to dislodge the object.

Are abdominal thrusts the same as the Heimlich manoeuvre?

Yes they are the same.

Why should I do back blows before abdominal thrusts?

Back blows are much easier to do effectively. They are a very effective way of dislodging an object from someone who is choking.

What should I do if the person becomes unresponsive?

If the person becomes unresponsive then you should support them gently to the ground and treat them as an unresponsive person who is not breathing. See: skill unresponsive and not breathing.

Resources

Danisnotonfire, Christmas Disaster

www.youtube.com/watch?v=wNqyb4mOOgE (5:47)

Tip

Using a manikin can be useful to help young people practise back blows.

Helping a baby who is choking

Newborn babies can choke on things such as curdled milk, mucus or vomit. Once babies start to wean onto solids and explore by putting things into their mouths, food or small toys can easily get stuck in their airway and stop them breathing.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	A baby who is choking will be unable to cry, cough, make any noise or breathe.	Give back blows.	Hold the baby's face down along your thigh with their head lower than their bottom. Hit them firmly on their back between their shoulder blades.	Back blows create a strong vibration and pressure in the airway, which is often enough to dislodge the object. Dislodging the object will allow the baby to breathe again. Ensure their head is supported in this position.
Nice to know	If five back blows do not dislodge the object, and you feel able, you can try chest thrusts.	Give up to five chest thrusts.	Turn the baby over onto their back and place two fingers in the middle of their chest just below the nipples. Push sharply downwards up to five times. If the object has not cleared, call 999 Then continue with cycles of back blows and chest thrusts until the blockage clears	Chest thrusts squeeze the air out of the lungs and may dislodge the object.

Frequently asked questions

Why do I have to hold the baby with their head lower than its bottom?

With babies, the blockage is often liquid (milk curdle or mucus) so ensuring the head is lower than the bottom helps the liquid to drain out - gravity will lend a helping hand.

Why do I have to support the head?

Supporting the head will help to keep the airway open, helping to dislodge the blockage from the baby's airway.

How hard should the back blows I give be?

You should modify the force of the back blows depending on the size of the baby, so you need to be gentler with a smaller baby than you are with a larger baby. The force with which you deliver the back blows should also be relative to your own strength. However, keep in mind that the most common problem when treating choking is people not delivering back blows with enough force. They need to be hard enough to cause a vibration and pressure in the windpipe and dislodge the blockage.

Can I do abdominal thrusts (Heimlich manoeuvre) on a baby?

No, don't squeeze a baby's tummy. Abdominal thrusts are used to treat choking in anyone over one year old. Using abdominal thrusts on a baby could cause further damage as their internal organs are fragile and still developing. If back blows do not dislodge the blockage, you can use chest thrusts instead.

If my baby is choking, should I hang them upside down by their feet?

No, this is not effective and may cause further injury if you dropped them. Tipping them upside down may also cause the object to go further down the throat.

Should I try to pull the object out with my fingers?

We do not recommend putting your fingers blindly into the mouth to try and remove any foreign object. You risk pushing the object further down the throat or actually damaging the soft tissue at the back of the throat; this tissue is extremely sensitive and so could swell and cause further damage. However, if you can clearly see an object in a baby's mouth and you are able to pluck it out safely with your fingertips, you could do so.

What should I do if my baby becomes unresponsive and stops breathing?

Refer to: skill unresponsive and not breathing (baby).

Resources

Baby and child first aid

redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/Choking-baby

Tip

Using a baby manikin can be useful to help young people practise how to help someone choking.

Glossary

Airway – the tube that connects our mouth and nose to our lungs.

Abdominal thrust – the action used to squeeze an adult or child's stomach if they are choking (also known as the Heimlich manoeuvre).

Back blows – the action of hitting someone firmly on the back to try to stop them from choking.

Chest thrusts – the action used to squeeze a baby's chest if they are choking.

Helping someone who is having a diabetic emergency

Diabetes is a medical condition that affects blood sugar levels. Normally people's blood sugar levels are controlled without them having to think about it (like breathing or the heart beating). When a person has diabetes their body doesn't control their blood sugar level so they have to actively manage it themselves – they may manage their blood sugar levels with injections, tablets or being careful what they eat. Sometimes someone with diabetes can experience a diabetic emergency where they need help. If someone is experiencing a diabetic emergency they will usually know what is happening and be able to tell you how to help them.

Have confidence that you can help. Think what you can use to help them.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>They may know they have diabetes and be able to tell you.</p> <p>They may sweat a lot or say they feel faint or weak.</p> <p>They may be drowsy, confused or appear drunk.</p>	Give them something sweet to eat or drink.	<p>Give them a sweet, sugary drink or something sweet to eat.</p> <p>Reassure them.</p> <p>If there is no improvement, call 999 or get someone else to do it.</p>	In diabetic emergencies, blood sugar levels can become low; this can cause someone to collapse. Giving them something sugary will help raise their blood sugar levels and so improve their bodily function.
Nice to know	They may have warm dry skin, be excessively thirsty and have fruity smelling breath.	Call 999.	<p>Call 999 for emergency help.</p> <p>Stay with them and reassure whilst waiting for help to arrive.</p>	Blood sugar levels can sometimes become too high.

Frequently asked questions

What are the symptoms of a diabetic emergency?

Symptoms vary, but common ones include:

- > hunger
- > convulsions
- > clammy skin
- > profuse sweating
- > drowsiness or confusion
- > weakness or feeling faint
- > sudden loss of responsiveness

What should I give them to eat or drink?

You can give them sugary drinks such as cola, lemonade, fruit juice, isotonic sports drinks or sweet foods such as jelly babies, chocolate and sugar cubes. The person may also be carrying glucose gel or tablets. Avoid giving them a diet drink, as it won't have any sugar in it and will not help them.

How will I know if this is a long-term condition for the person?

Ask them, they may be able to tell you. You may also find some form of identification on them, for example, a card, bracelet or necklace that will give you information about their condition.

What happens in a diabetic emergency?

In most cases, the person's blood sugar levels become too low. It can happen when the person has missed a meal or exercised too much. If left untreated, a diabetic emergency can become very serious.

How should I decide when to call an ambulance?

Call an ambulance if their condition doesn't improve or they become unresponsive.

Some people have high blood sugar levels, so won't giving them a sugary drink or food make their diabetic emergency worse?

Some people do have high blood sugar levels, but giving them a small amount of sugary drink or food is unlikely to do any harm. Listen to what the person tells you.

What if they have become unresponsive as a result of a diabetic emergency?

Refer to skill: unresponsive breathing and skill: unresponsive not breathing.

I've heard about ICE, what is it?

ICE stands for 'In Case of Emergency'. A person may carry ICE information that is easily accessible (on a bracelet, mobile phone, etc) and can be used to find out information about them such as their medical conditions, medication, and next of kin.

Resources

First aid for diabetes

redcross.org.uk/What-we-do/First-aid/Everyday-First-Aid/Diabetes

Helping someone who is distressed

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	The person is upset.	Calmly ask them how you can help.	<p>Calmly ask them what they want you to do.</p> <p>Show you are listening.</p>	<p>By showing you are listening and willing to help, you are more likely to establish their trust.</p> <p>Show respect and promote their dignity.</p>
Nice to know	We all react differently to different situations.	Consider their different needs and risks.	<p>Can they hear you? Do they understand? Consider who else can help.</p> <p>Try to put yourself in their position – what help would you want? Show empathy.</p> <p>Think of what support you might need at the time and afterwards.</p>	Remember people may have impairments or English may not be their first language.

Frequently asked questions

Will I be traumatised?

No, the majority of people do not become traumatised from helping others and are actually really pleased they were able to help. If you feel upset after the experience, talk to people you trust. If you are worried about your health, see your GP.

What if they do not know or can't tell me what they want?

Offer to listen and offer to contact others on their behalf. Be a calming influence and reassure the person that you can help.

How can I help if they are really distressed or very emotional?

Often, having someone notice that another person is very distressed or very emotional can make all the difference. You can help by offering to be with them, in a private place (where you and they are both safe) remaining calm and listening.

What should I do if I think they are overreacting?

Everyone has different needs and experiences of life and therefore they will react differently from you. Always try to show respect and listen to what they are saying.

If I become distressed, where can I go afterwards for help?

Talk to people you trust, consider doing further training. If you are worried about your health, see your GP.

If I become distressed after an emergency, what could I do to help myself (self-care)?

Think about the things you enjoy doing which help you feel calmer and better able to cope. This might be talking with a family member or close friend, reading, exercising, walking, watching a film, or ensuring you get enough sleep. Try and put together a list of these resources and activities so that you can turn to these when you are finding an experience difficult to manage.

Resources

First aid for someone who's distressed

redcross.org.uk/What-we-do/First-aid/Everyday-First-Aid/Distress

RSA shorts – The power of empathy

www.youtube.com/watch?v=jz1g1SpD9Zo

Glossary

Empathy – The ability to understand and share the feelings of someone (putting yourself in their shoes).

Helping someone who has a head injury

Head injuries are common and could be caused by a fall or a bang to the head (such as sporting accidents, banging your head on a low beam or falling down stairs, etc). Most head injuries are minor and don't need emergency medical attention.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>They have just had an accident where they have banged their head.</p> <p>They may have pain or a headache.</p> <p>There may be a lump on their head.</p>	<p>Apply something cold to the injury.</p>	<p>Ask them to rest.</p> <p>Apply something cold to the injury.</p>	<p>An example of something cold could be frozen vegetables wrapped in a towel. These are ideal as they mould to the shape of the head.</p> <p>This will help to relieve the pain and reduce the swelling.</p>
Nice to know	<p>If they become drowsy, vomit or their condition deteriorates this would indicate a serious head injury.</p> <p>These symptoms may present themselves after a number of hours.</p>	<p>Call 999.</p>	<p>If you think the head injury is serious, call 999 or get someone to do it.</p>	<p>In addition to a bump on the head, when someone suffers a blow to the head, the brain can be shaken within the skull. This may result in a more serious head injury (for example, concussion) which may make them feel sick or drowsy.</p>

Frequently asked questions

How long should I apply something cold to the bump for?

Apply something cold for up to ten minutes; anything over ten minutes can cause damage.

What can I apply to the injury to reduce external swelling and pain?

You could wrap a towel or clothing around frozen vegetables or ice and apply to the injury. You could also use a towel or clothing that's been soaked in cold water and wrung out. Never place ice directly on the skin because it's too cold and may damage it.

Can I give them paracetamol or ibuprofen for their headache?

No. Painkillers are not advised because they can mask the signs and symptoms of a serious head injury.

How do I know whether to call an ambulance?

If they vomit, become unresponsive or show other signs of a serious head injury call 999. You should also call an ambulance if you are unsure how bad the injury is but think it might be serious.

What is concussion?

If a person suffers a blow to the head, the brain can be shaken inside the skull. This is called concussion. It tends to result in the person becoming unresponsive for a short period of time (a few seconds to a few minutes). Most people make a full recovery from concussion, but occasionally it may become more serious. If you think someone has concussion, call 999.

What are the signs and symptoms of concussion?

Signs and symptoms of concussion include:

- > Temporary unresponsiveness.
- > Dizziness.
- > Headache.
- > Confusion.
- > Feeling sick. Blurred vision.
- > Having no memory of what happened.

Should I watch a person who has a head injury to see if they have concussion?

Yes. With all head injuries you should watch for the signs and symptoms of concussion. If you suspect they have concussion you should call 999. Sometimes you may not see the signs and symptoms immediately.

What should I do if the head injury is bleeding heavily?

If a head injury is bleeding heavily, apply pressure to the wound to stop or slow down the flow of blood and call 999.

Can I let them go to sleep?

Yes if it is their normal time to sleep and they are not displaying signs of a serious head injury. If they seem unusually drowsy this could mean they have a serious head injury and you should seek urgent medical attention.

What if they have become unresponsive as a result of a head injury?

Refer to skills: unresponsive breathing and unresponsive not breathing.

What if I am not sure if it is serious or not?

If you are unsure you should always seek medical advice. The nature of the injury can help to determine how serious it could be; for example, if the injury was caused by a fall from a height or a road traffic accident, then this could potentially be serious because of the force involved in the impact. In cases such as these you should always seek medical advice, even if the person appears unharmed.

Helping someone who is having a heart attack

A heart attack happens when the blood supply to the heart is suddenly interrupted. The blockage means the heart can't work properly and so heart attacks can be very serious. They are most common in men over 50 years of age, but can affect anyone at any age.

Try to stay calm as this will help them to stay calm too. By calling 999 you are not alone; the emergency call operator will tell you what you need to do.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person may have persistent vice like chest pain.</p> <p>The pain may spread to their arms, neck, jaw, back or stomach.</p>	Call 999.	<p>Call 999 immediately and ensure they are sitting comfortably (for example, sit them on the floor, leaning against a wall or chair).</p> <p>Give constant reassurance whilst waiting for help to arrive.</p>	<p>The person needs emergency help as soon as possible; a heart attack is very serious.</p> <p>Sitting down will ease the strain on their heart. Sitting them on the floor will mean they are less likely to hurt themselves if they collapse.</p>
Nice to know	<p>The pain will not ease with rest.</p> <p>They may be breathless, feeling unwell and/ or sweating.</p>		<p>You can offer the person an aspirin tablet to chew slowly.</p>	<p>Aspirin thins blood and may help someone who is having a heart attack.</p> <p>They should not take more than 300mg in one dose.</p>

Frequently asked questions

What is a heart attack?

A heart attack happens when the blood supply to the heart muscle is suddenly blocked. The blockage means the heart can't work effectively, so a heart attack can be fatal. The severity of the heart attack depends on the size of the area of heart muscle affected.

What if they have medication to use?

If they have tablets or a spray, let them take it. You may need to assist them.

What is the difference between a heart attack and a cardiac arrest?

A cardiac arrest is when the heart stops working completely, causing the person to collapse, become unresponsive and stop breathing. A cardiac arrest may be caused by a heart attack.

What should I do if they become unresponsive?

Refer to skill: unresponsive breathing and skill: unresponsive not breathing.

What is angina?

Angina is when the arteries narrow, restricting the blood supply to the heart. It is often associated with exercise or excitement. Symptoms include chest pain and shortness of breath but, unlike a heart attack, symptoms ease with rest and taking prescribed medication. Most people who have angina manage it with medication that comes in tablet or spray form. If, during an angina attack, the pain doesn't subside after the second dose of their medication, suspect a heart attack and call 999 immediately.

Helping someone who has hypothermia

Hypothermia happens when someone's body temperature falls so low that they have reduced blood moving around their body. In our country people can sometimes get hypothermia indoors, if the weather is cold and the heating inside is poor. If someone is older or very young they are more at risk of hypothermia.

Have confidence that you know what to do – think what you can use to help them.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The environment is cold.</p> <p>The person may be shivering, pale and cold to touch. They may also be disorientated.</p>	Warm the person.	<p>Call 999 as soon as possible, or get someone else to do it.</p> <p>Warm the person.</p> <p>Reassure the person and make them as comfortable as possible.</p>	<p>Warming the person while waiting for the ambulance may help reverse the hypothermia.</p> <p>You can warm them by wrapping them in a blanket and giving warm drinks and high-energy foods, such as chocolate.</p>
Nice to know	<p>Their breathing rate may become slower.</p>		<p>Stay with the person and monitor them in case they need additional help from you.</p> <p>If the person is outside, get them inside and replace any wet clothes with dry clothes.</p>	

Frequently asked questions

What are the symptoms of hypothermia?

The person will be in a cold place. They may be shivering, pale and cold to touch. They may also be disorientated. Their breathing rate may become slower and their temperature will be below 35 degrees

What drinks or food can I give someone with hypothermia?

You can give the person drinks such as soup or hot chocolate, or foods like chocolate.

What if I don't have a blanket?

You could use additional clothing, sheets or towels to warm the person.

What should I do if the person is outside?

If the person is outside, get them inside if you can and replace any wet clothes with dry clothes. If you have to stay outside, you could wrap the person in plastic sheeting, newspaper or cardboard to help to warm them and put something underneath them to protect them from the cold ground.

If the person is outside, will they also have frostbite?

Frostbite usually happens to fingers or toes in extreme cold conditions and is much less common than hypothermia. Fingers, toes or extremities become pale or blue and lose sensation and feeling. Gently warm their fingers or toes, such as with warm water, while waiting for help to arrive. Don't try to thaw the affected body part if there is any chance that it will refreeze.

Helping someone who has meningitis

Meningitis is a condition where the linings of the brain and spinal cord swell. It can be caused by different types of bacteria or a virus, and can happen to anyone at any age.

Trust your instincts – if you think it could be meningitis then act. Time is important.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person may have flu like symptoms, a headache and a high temperature.</p> <p>The person may also complain of a stiff neck and be sensitive to light.</p>	Call 999.	<p>If you observe these symptoms, call 999 immediately, or get someone else to do it.</p> <p>Give them constant reassurance while you wait for the ambulance.</p>	<p>A person with meningitis can have one or more symptoms, and some symptoms occur later on as the infection develops.</p> <p>Do not wait for all the symptoms to appear. Without immediate treatment meningitis can cause permanent damage.</p> <p>A person with meningitis can deteriorate very quickly. Meningitis is potentially very serious.</p>
Nice to know	<p>Other symptoms include cold hands and feet, joint pain, drowsiness and vomiting.</p> <p>At a later stage a rash may form that does not disappear when a glass is pressed against it.</p>			<p>Do not wait for a rash: a rash sometimes never occurs and if it does it will only be in the later stages.</p>

Frequently asked questions

Will the symptoms be different for a baby?

Babies may have a high-pitched cry or become floppy. The soft part (fontanelle) on their head may become hard or bulging.

What does the rash look like?

The rash is made up of small red/purple 'pin prick' spots that may spread to look like fresh bruising. The rash is more difficult to see on dark skin. The rash does not disappear when a glass is pressed against it.

How do I check whether a rash is a sign of meningitis?

Rashes usually appear in the later stages of meningitis and sometimes do not appear at all. If the person has a rash, press the side of a clear glass against their skin - most rashes will fade when pressed. If you can still see the rash through the glass it is possibly meningitis. If you suspect meningitis but they do not have a rash, call 999 immediately. Do not wait for a rash to appear to call 999.

Helping someone who is having a nose bleed

Many people will have personal experience of nosebleeds, either from having one themselves or seeing others have one.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	They are bleeding from their nose.	Pinch the soft part of their nose (or get them to) and ask them to lean forward.	Pinch the soft part of their nose (or get them to) and ask them to lean forward. Ask them to breathe through their mouth and to spit out any blood from their mouth.	Pinching the nose helps the blood to clot. Leaning them forward will prevent blood from being swallowed: which could make them sick.
Nice to know		If after ten minutes the bleeding has not stopped, continue to pinch for a further ten minutes.	Seek medical advice if the bleeding continues for more than half an hour.	

Frequently asked questions

Why don't you tilt the head backwards to treat a nosebleed?

Tilting the head backwards may cause blood to enter the airway or stomach, which may cause them to choke or feel sick. The head should be tilted forward during a nosebleed.

Should I be concerned if the nose starts to bleed again soon after it has stopped?

Not necessarily. If a person's nose starts to bleed again after stopping, it may be because they knocked, blew or picked their nose, or because the blood had not properly clotted in the first instance. Treat the nosebleed again, and then advise them to sit quietly to give the nose time to heal. If the bleeding continues for more than 30 minutes, seek medical advice.

What should I do if the person wants to blow their nose after a nosebleed?

Encourage them not to blow their nose. Blowing their nose may cause it to start bleeding again.

Resources

redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/Nosebleed

Helping someone who is having a seizure

The most common reason a person may be having a seizure is because they have epilepsy. Seizures can also be caused by a head injury, very high fever/temperature, or a reaction to medications/drugs. It can be upsetting or shocking to see someone having a seizure, especially if you have never seen one before.

Try to stay calm and think of the steps you need to take – your actions can make a real difference.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person may have collapsed.</p> <p>Their body may stiffen and they may make sudden jerky movements.</p> <p>They may also have froth around their mouth.</p>	Make them safe and prevent injury.	<p>Use a blanket or clothing to protect their head from injury. Do not restrain them.</p> <p>Call 999 if necessary.</p> <p>After the seizure, help them to rest on their side with their head tilted back.</p>	<p>Restraining them may hurt you or them. Let the seizure run its normal course.</p> <p>Putting them on their side with their head tilted back will help to keep their airway open.</p>
Nice to know			<p>Remove objects that may injure them.</p> <p>Try to respect their dignity whilst waiting for the seizure to stop.</p>	<p>If the person having a seizure has epilepsy then it is not always necessary to call 999 for an ambulance.</p>

Frequently asked questions

Should I try to keep their tongue forward or put something in their mouth to stop them biting themselves?

No, do not go anywhere near their mouth or put anything in their mouth. This may injure both of you. You should simply make the area safe and prevent injury by removing items that may cause the person harm, and wait for the seizure to finish.

How do I know if they have epilepsy?

You may find some form of identification on them such as a card, bracelet or necklace that will give you information about their condition.

When should I call 999?

If the seizure lasts longer than five minutes; if they have hurt themselves, or if you are unsure as to the cause then you should call 999.

Is a fit the same as a seizure?

Yes. They are the same thing.

I've heard about ICE what is it?

ICE stands for 'In Case of Emergency'. A person may carry ICE information that is easily accessible (on a bracelet, mobile phone, etc) and can be used to find out information about them such as their medical conditions, medication, and next of kin.

Resources

Ali A saves the day!

www.youtube.com/watch?v=tml-Bk7Xmnl (7:03)

Helping someone who has a strain or sprain

This is a common injury where there has been a very sudden movement to part of the body. It could be as a result of a sporting injury, going over on an ankle, or a fall. It is often very difficult to tell the difference between a sprain or strain or a broken bone.

Try to think what you can use to help them – improvise.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>There has been a sudden movement to a part of the body.</p> <p>The person has pain, swelling and or bruising around a joint or muscle.</p>	Apply an ice pack to the injury.	<p>Apply an ice pack to the injury for up to ten minutes.</p> <p>Get them to rest the injured part of the body.</p> <p>If there is no improvement seek medical advice.</p>	<p>Applying something cold, such as frozen vegetables wrapped in a cloth will help to reduce pain and swelling.</p>
Nice to know	<p>They may experience difficulty in moving a limb if the injury is at a joint.</p>		<p>If able and comfortable, raise the injured part of the body.</p>	<p>A strain is when a muscle is damaged. A sprain is when a joint, such as a knee, ankle or wrist, is damaged.</p>

Frequently asked questions

How long should I apply an ice pack to the injury for?

No longer than ten minutes; anything over ten minutes can cause further damage.

What do I do after I have put an ice pack on the injury?

Support the injured part of the body in a raised position and apply a bandage. The bandage should not be tightly wrapped around the injury. Periodically check that the bandage has not become tight.

I was taught that to treat a strain or sprain I should use RICE. Can I still use this?

Yes, RICE is a great way to remember how to treat a strain or sprain. The letters in RICE stand for:

Rest

Ice

Comfortable support (such as an elasticated bandage)

Elevate

What can I do if they are in lots of pain?

You can give them the recommended dose of paracetamol or another painkiller, to relieve the pain.

Should I call for an ambulance if someone has a strain or sprain?

No. Most strains and sprains will feel better after rest and cooling. If you suspect that the bone is broken, if there are other injuries, or the injury does not improve, seek medical advice.

I've heard that you can use a warm cloth or alternate between warm and cold treatment. Is this true?

This is not recommended first aid. An ice pack is the most effective way of reducing the swelling.

If a bone is dislocated, should I put it back in place?

No. If there is a dislocation or the limb looks broken, the person needs to go to hospital for treatment. Never attempt to put dislocations back in place; you may cause further damage.

What if everything looks normal and they only have a bruise?

Try to find out what caused the injury (for example, a fall or blow from an object), as this may indicate if there is a broken bone. However it is usually impossible to differentiate between a fracture, sprain or strain without an x-ray. If you are in any doubt, seek medical advice.

Helping someone who is having a stroke

A stroke is caused by a blockage of the blood supply to the brain. Parts of the brain become damaged and this can affect the person's face, body, speech and sight. If someone is having a stroke they may appear confused and not be able to speak properly. They will probably feel scared as they may not understand what is going on and why they are feeling this way.

Try to stay calm and act quickly – the faster the person gets help, the better their outcome.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>Think F.A.S.T:</p> <p>FACE: is there weakness on one side of their face?</p> <p>ARMS: can they raise both arms?</p> <p>SPEECH: is their speech easily understood?</p> <p>TIME: to call 999.</p>	Call 999.	<p>Call 999 immediately or get someone else to do it.</p> <p>Help them to sit down.</p> <p>Talk to the person to reassure them while you wait for the ambulance.</p>	<p>A stroke needs immediate attention. The faster the person receives medical help, the less damage is caused.</p> <p>The person may be frightened and feel anxious about what is happening to them.</p>
Nice to know	They may be slurring their speech, appear confused or have difficulty expressing themselves.			

Frequently asked questions

How can I help the person if they are frightened or anxious?

Stay calm, let them know that help is on the way and reassure them while you wait for the ambulance. Help them sit or lie down and reassure them that help is on its way.

Why do people have symptoms like a drooping face, a weak arm and slurred speech when they have a stroke?

Strokes are caused by an interruption in the blood supply to the brain. Brain cells become damaged and begin to die, which may affect the body's functions. This may result in facial or limb weakness (sometimes only in one area and sometimes down one side of the body).

What if I can't understand what they are saying?

Don't worry; continue to reassure them and get medical help urgently.

What other symptoms could someone having a stroke have?

Symptoms include:

- > Drooling.
- > Numbness.
- > Blurred vision.
- > A sudden severe headache.
- > Difficulty maintaining balance.
- > Dizziness or feeling lightheaded.
- > Difficulty expressing themselves or understanding other people.

Why does a stroke tend to affect only one side of the body?

The right half of your brain controls the left side of your body and vice versa. If a stroke damages the right side of the brain, symptoms will often occur on the left side of the body (for example, being unable to lift the left arm).

Helping someone who has swallowed something harmful

Harmful substances may be swallowed by accident for example – young children might swallow something they shouldn't, or someone might take too much of a substance (such as alcohol or drugs). Sometimes it may not be accidental, such as an act of self-harm.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>There may be empty containers nearby (e.g. pill pots, alcohol bottles or cleaning products).</p> <p>They may vomit and have stomach pain.</p>	<p>Find out what they have taken, when they took it and how much.</p>	<p>Find out what they have taken, when they took it and how much.</p> <p>Call 999 or get someone else to do it.</p>	<p>The medical staff will need to know this to be able to help them.</p> <p>The substance could be extremely harmful and the person may need urgent medical attention.</p>
Nice to know	<p>They may have evidence of the harmful substance around their mouth, or smell of it.</p> <p>Babies and children can have different reactions to harmful substances, and sometimes it may take some time for symptoms to occur.</p>	<p>Get them to sit or lie down.</p>	<p>Get the person to sit or lie down on their side.</p> <p>Reassure them and listen to what they tell you.</p>	<p>You should not make them sick as it can cause more damage to their throat.</p>

Frequently asked questions

What should I do if I'm not sure whether someone has swallowed something harmful?

Seek medical advice or take them to hospital, even if they seem to be showing no symptoms.

I think the person has taken poison or another harmful substance, but they seem fine. What should I do?

Call 999 anyway, even if the person seems to be showing no symptoms.

Can I give them something to drink if they have taken a harmful substance?

No, we advise that you don't give them anything to drink because the fluid will enter their stomach and break down the harmful substance. This may result in the harmful substance being absorbed into their body more quickly.

What are harmful substances?

Anything that, when consumed into the body, can make the person unwell. Examples could be drugs (prescription and non-prescription), alcohol, and poisonous substances like cleaning products. Some plants can be harmful if you swallow them.

Why shouldn't I make the person sick?

Making them vomit can cause more damage to the throat or block their airway. If they have swallowed something corrosive, the liquid will burn the throat on the way back up, causing more pain and distress.

What should I do while I wait for the ambulance to arrive?

Get them to sit still and reassure them.

What should I do if there are sharps (like needles) near the person?

Think about your safety. Don't go near any sharps.

What should I do if they become unresponsive?

See skill: unresponsive breathing and skill: unresponsive not breathing.

Resources

Sprinkle of glitter. Self harm: your questions answered.

www.youtube.com/watch?v=22_kotDLxdY

Helping someone who is unresponsive and breathing

Helping an adult or child who is unresponsive and breathing

Someone could become unresponsive through an injury; someone could become unresponsive through an illness; or it could be that someone has collapsed through drinking too much alcohol or taking drugs.

Have confidence that you can help them.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person is not moving or does not respond when you call their name or gently shake their shoulders.</p> <p>Check if they are breathing: tilt their head back and look at their chest or stomach to see if it is moving, listen and feel for breaths on your cheek.</p> <p>If they are breathing, their chest or stomach will be moving, you should also hear or feel signs of breaths.</p>	<p>Move them onto their side and tilt their head back.</p>	<p>Move them onto their side and tilt their head back.</p> <p>Call 999 immediately, or get someone else to do it.</p>	<p>Putting them on their side with their head back helps keep their airway open by making sure their tongue falls forward and blood and vomit can drain out.</p>
Nice to know		<p>Talk to the person and reassure them.</p>	<p>While waiting for the ambulance, talk to the person and reassure them.</p> <p>Check every few minutes that they are still breathing.</p> <p>Make sure their head remains tilted back.</p>	<p>Even though they are unresponsive, they may be able to hear you.</p>

Frequently asked questions

Why do I have to tilt their head back to check for breathing?

When a person is unresponsive, their muscles relax and their tongue can fall backwards and block their airway. Tilting their head back pulls their tongue forward and unblocks their airway which may be enough to help them to breathe.

What do I do if the unresponsive person's breathing doesn't seem normal?

Sometimes when a person is unresponsive their breathing may become noisy or irregular. This is usually a sign that their heart and lungs are not working properly. If a person is unresponsive and they have noisy or irregular breathing or are gasping, treat them as an unresponsive person who is not breathing.

Is it called the 'recovery position' when you move a person onto their side and tilt their head back?

Yes, 'recovery position' is a commonly used term to describe how an unresponsive and breathing person should be placed so that their airway stays open.

What if they have a back or neck injury, do I still turn them on their side?

If you suspect a neck or back injury, you should still move them onto their side so they can keep breathing. Try and keep their spine in a straight line when turning them. If possible get someone to help you turn them.

What should I do if someone is feeling faint?

If someone is feeling faint, advise them to lie down on their back and raise their legs to improve blood flow to the brain. Fainting is caused by a temporary reduction in the flow of blood to the brain and can result in becoming unresponsive for a brief period of time. A person who has fainted should quickly become responsive again. If they don't, treat them as an unresponsive person.

How do I treat a baby who is unresponsive and breathing?

Hold them on their side, with their head slightly tilted back, supported and lower than their bottom. Call 999 or get someone else to do it.

Resources

Kick the PJ, The pushover with Danisnotonfire www.youtube.com/watch?v=FtsxR3ZQbec

Keep the party alive!

www.youtube.com/watch?v=_8XzYBky7KQ

Alcohol and First aid Lesson (includes the Story of a night out short video)

www.redcross.org.uk/What-we-do/Teaching-resources/Lesson-plans/Alcohol-and-first-aid

Helping a baby who is unresponsive and breathing

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The baby is not moving or does not respond when you call their name or tap their foot.</p> <p>Check if they are breathing: tilt their head back and look at their chest or stomach to see if it is moving, listen and feel for breaths on your cheek.</p> <p>If they are breathing their chest or stomach will be moving, you should also hear or feel signs of breaths.</p>	Move them onto their side and tilt their head back.	<p>Hold them on their side, with their head slightly tilted back, supported and lower than their bottom.</p> <p>Call 999 immediately, or get someone else to do it.</p>	<p>Holding them on their side with their head slightly back helps keep their airway open by making sure their tongue falls forward and blood and vomit can drain out.</p>
Nice to know		Talk to them and reassure them.	<p>While waiting for the ambulance, talk to them and reassure them.</p> <p>Check every few minutes that they are still breathing.</p> <p>Make sure their head remains tilted back.</p>	<p>Even though they are unresponsive, they may be able to hear you.</p>

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When a baby is unresponsive, their muscles relax and their tongue can fall backwards and block their airway. Tilting the baby's head back pulls their tongue forward and may be enough to help them to breathe.

How far should I tilt their head back?

Only slightly. With babies if you hyperextend their neck it can block their airway.

Should I put the baby down while I call emergency services?

If you are able, continue to cradle the baby on their side in your arms while you call emergency services. If necessary, you could put the baby down on their side while you make the call.

Should I try to talk to the baby?

Yes, talk to the baby and reassure them. Even though they might not respond to you, they may still be able to hear what is going on.

Resources

Baby and child first aid

[redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/unresponsive-and-breathing-baby](https://www.redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/unresponsive-and-breathing-baby)

Glossary

Airway – the tube that connects our mouth and nose to our lungs.

Unresponsive – when someone does not respond when you speak to them or try to wake them up.

Helping someone who is unresponsive and not breathing

Helping an adult who is unresponsive and not breathing

It would be extremely stressful and upsetting to be faced with someone who is unresponsive and not breathing.

Doing something is better than nothing – you cannot make this situation any worse. As soon as you call 999 you will have someone to help you.

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The person is not moving or does not respond when you call their name or gently shake their shoulders.</p> <p>Check if they are breathing: tilt their head back and look at their chest or stomach to see if it is moving, listen and feel for breaths on your cheek.</p> <p>If they are not breathing their chest or stomach will not be moving, you won't hear or feel signs of breaths.</p>	Give chest compressions	<p>Call 999 immediately or ask someone else to do it.</p> <p>Push firmly in the middle of their chest and then release.</p> <p>Push firmly at a regular rate until help arrives.</p>	<p>Chest compressions keep blood pumping around the body and help keep the vital organs, including the brain, alive.</p>

Nice to know	There is an AED available.	Follow the voice prompts of the AED.	<p>Continue pushing firmly on their chest at a regular rate.</p> <p>Ask someone to get the AED.</p> <p>Ask them to open the AED, turn it on if necessary and follow all its voice prompts.</p> <p>Ensure minimal interruption to chest compressions.</p>	<p>An AED (automated external defibrillator) is a machine that can be used to shock the heart back into a normal rhythm.</p> <p>Many public places, such as train stations, shopping centres, and schools now have one available.</p> <p>Once opened, the machine gives full instructions on what you should do. You just have to listen and do what it says.</p>
		If you feel able to, after about 30 chest compressions, you can give two rescue breaths.	<p>Seal your mouth over their mouth or nose, closing the other, and blow air into them, with two steady breaths.</p> <p>Keep repeating the sequence of 30 chest compressions and two rescue breaths until help arrives.</p>	<p>Breathing into their mouth or nose tops up the oxygen in their lungs.</p> <p>Giving chest compressions is most important because their body already has some oxygen in it and compressions will keep that blood pumping around their body, taking oxygen to their brain.</p>

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When a person is unresponsive, their muscles relax and their tongue can fall backwards and block their airway. Tilting their head back pulls their tongue forward and unblocks their airway which may be enough to help them to breathe.

What if they are breathing but it doesn't appear normal?

Sometimes when a person is unresponsive, their breathing may become noisy or irregular. They may also be gasping for air. This is usually a sign that their heart is not working properly. If a person is unresponsive and their breathing does not seem normal, call 999 and then start chest compressions straight away.

How long should I do chest compressions for?

Keep going until help arrives or you can't continue. If there is someone else who can help, you can ask them to alternate with you. Change over every one to two minutes, with minimum interruption to chest compressions.

Will I break their ribs?

You might; remember your priority is to keep the blood circulating. A damaged rib will mend (but without delivering chest compressions, their chances of survival are significantly reduced).

What if I am on my own when I find someone unresponsive and not breathing?

If you are on your own, call 999 before you start chest compressions. Put the phone on speaker phone to allow you to start giving chest compressions immediately.

What if I make a mistake and do chest compressions, but the person is still breathing?

It's not ideal but don't worry - there's no evidence to suggest you will cause any serious damage.

Will I restart the heart if I give chest compressions?

The chance of restarting the heart by chest compressions alone is very slim. To restart, a heart usually needs an electric shock from a defibrillator. Chest compressions pump a small amount of blood around the body to keep the organs - most importantly the brain - alive. You may not see any change in the person's condition, but don't give up. Chest compressions significantly increase the chance of the person surviving.

What should I do if someone has been rescued from drowning and is unresponsive and not breathing?

Once you have got the person onto dry land without endangering yourself, check to see if they are breathing by tilting their head back and looking and feeling for breaths. If they are unresponsive and not breathing, call 999 and then push firmly downwards in the middle of their chest at a regular rate. In the event of someone drowning, it is ideal to give rescue breaths in addition to chest compressions to build up a supply of oxygen in the blood.

How fast should I do the chest compressions?

You are aiming for a speed of two chest compressions per second.

How hard should I press when doing the chest compressions?

You are aiming to press down to around a third of the depth of their chest.

Frequently asked questions (continued)

Will I restart the person's heart if I use an AED?

If the AED delivers a shock to the person, it doesn't always mean that their heart will restart. The machine will detect this and give you further instructions. You may need to resume chest compressions. Continue to follow the AED voice prompts until help arrives.

If I am alone, should I leave the person to get an AED?

Stay with them and continue to give chest compressions. Call out for help and if someone arrives send them to get the AED.

Do I have to use an AED even if I'm not confident?

AEDs are very easy to use. Voice prompts will guide you through the process of using the AED, so you don't need to worry if you have never used one before.

Note: Defibrillation within three to five minutes of collapse can produce survival rates as high as 50-70%. This can be achieved when a bystander uses a nearby AED to deliver the first shock. Each minute of delay to use of an AED reduces the likelihood the person will survive and go home from hospital by 10%.

In the UK currently, fewer than 2% of people in cardiac arrest have an AED on the scene before the ambulance arrives.

Resources

Fabrice Muamba article

www.nhs.uk/Livewell/nhs-anniversary/Pages/doctor-who-saved-Fabrice-Muamba.aspx

Helping a child (over the age of one year) who is unresponsive and not breathing

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The child is not moving or does not respond when you call their name or gently shake their shoulders.</p> <p>Check if they are breathing: tilt their head back and look at their chest or stomach to see if it is moving, listen and feel for breaths on your cheek.</p> <p>If they are not breathing their chest or stomach will not be moving, you won't hear or feel signs of breaths.</p>	Give rescue breaths and chest compressions.	<p>Tell someone to call 999.</p> <p>Tilt their head back, sealing your mouth over their mouth and pinch their nose. Blow into the child's mouth. Repeat this five times.</p> <p>Push firmly in the middle of their chest with one hand, then release. Repeat 30 times.</p> <p>Give two rescue breaths, then continue with cycles of 30 chest compressions and two rescue breaths until help arrives.</p>	<p>Giving rescue breaths means you are acting as the lungs by blowing into them and topping up the oxygen levels in the child's blood. This oxygen is needed to keep their organs alive.</p> <p>Chest compressions act as the heart, by keeping blood pumping around the child's body and helping to keep their vital organs, including the brain, alive.</p>
Nice to know	They may also look pale and blue.		<p>If you are on your own carry out rescue breaths and chest compressions for one minute, and then call 999.</p> <p>Then continue with rescue breaths and chest compressions.</p>	<p>When giving rescue breaths you should blow until you see their chest rise.</p> <p>When giving chest compressions push firmly at a regular rate.</p> <p>If you are small or the child is large, you may need to use two hands.</p>

<p>Nice to know</p>	<p>There is an AED available.</p>	<p>Follow the voice prompts.</p>	<p>Continue to give rescue breaths and chest compressions. Tell someone to get the AED.</p> <p>When the AED arrives ask someone to open the AED, turn it on if necessary and follow all its voice prompts.</p> <p>Ensure minimal interruption to chest compressions.</p>	<p>An AED (automated external defibrillator) is a machine that can be used to shock the heart back into a normal rhythm.</p> <p>Many public places, such as train stations, shopping centres, and schools now have one available.</p> <p>Once opened, the machine gives full instructions on what you should do. You just have to listen and do what it says.</p>
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Frequently asked questions

Why do I have to tilt their head back to check for breathing?

When a child is unresponsive, their muscles relax and their tongue can fall backwards and block their airway. Tilting the child's head back pulls their tongue forward and may be enough to help them to breathe. If someone's tongue had been blocking the airway, then tilting their head back should pull the tongue forward, enabling them to breathe again. Sometimes, saving a life really is as simple as that.

Do I have to give rescue breaths?

Ideally you should deliver rescue breaths, if you are able and willing, as this increases the chances of a successful outcome for a child. However, if you can't give rescue breaths for any reason, just give chest compressions.

How long should I do chest compressions and rescue breaths for?

You should keep going until help arrives or, in rare cases, they start to breathe.

What if I'm on my own and the child is unresponsive and not breathing?

It's best to top up the level of oxygen in the child before calling 999. If you are on your own, do rescue breaths and chest compressions for one minute and then call 999 – then continue rescue breaths and chest compressions until help arrives. Obviously, if someone else is with you, they should call the ambulance immediately.

If I press too hard during chest compressions, could I break their ribs?

The rib cage of a child is very flexible, so the risk of breaking their ribs by giving chest compressions is very small. However, it is important to remember that the point of doing chest compressions is to keep them alive. Without chest compressions and rescue breaths before the ambulance arrives, their chances of survival are much lower.

How hard should I press when doing the chest compressions?

You are aiming to press down to a third of the depth of their chest.

How fast should I do the chest compressions?

You are aiming to press down at a regular rate; aim for around two chest compressions per second.

Will giving rescue breaths and chest compressions bring them back to life?

The aim of rescue breaths and chest compressions is to give them the best chance of survival by acting as their heart and lungs, buying vital time until the ambulance service arrives: not to bring the child back to life. In fact, the chance of restarting their heart by rescue breaths and chest compressions alone is slim.

Will I see an immediate response to my chest compressions and rescue breaths?

Many people think they will see an immediate response to chest compressions and rescue breaths. However, often you will not see any change at all in the child's condition, but your actions may still be having a beneficial effect.

What is CPR?

CPR is the term used to describe the combination of chest compressions and rescue breaths. It is short for cardiopulmonary resuscitation.

What if I make a mistake and deliver rescue breaths and chest compressions but the child is actually still breathing?

It is not ideal but don't worry - there's nothing to suggest you will smother them or cause any serious damage. Obviously you should stop delivering rescue breaths and chest compressions as soon as you realise they are still breathing.

Continued overleaf...

Frequently asked questions (continued)

What should I do if I am unsure whether the person is a child or an adult?

A child moves from childhood to adulthood with the onset of puberty. When helping in an emergency, it's not necessary for the helper to formally work out whether the person has reached puberty or not. If the helper believes the person to be a child then he should use the guidance for a child. If the person then turns out to be a young adult, there is very little chance that the helper will have caused any harm.

Who can use an AED?

Anyone can use an AED. You do not need any training. The machine will only shock someone if they need it – it would never shock a healthy heart.

Can I use an AED on a child?

Yes you can use an AED on any child over the age of one year. If the child is aged between one and eight years old, use paediatric pads. If there are no paediatric pads available use the standard ones placing one in the centre of the child's chest and the other in the centre of the child's back.

Will I restart the child's heart if I use an AED?

If the AED delivers a shock to the child, it doesn't always mean that their heart will restart. The machine will detect this and give you further instructions. You may need to resume chest compressions and rescue breaths. Continue to follow the AED voice prompts until help arrives.

If I am alone, should I leave the child to get an AED?

Stay with the child and give chest compressions and rescue breaths. Call out for help and send someone else to get the AED if they arrive.

What should I say on the phone to the emergency services?

Call the emergency services as soon as possible and they will prompt you with questions. In this case, it is important to tell them that the child is unresponsive and not breathing. The more information you can give the emergency call handler about the child the better, as it will help them to prioritise your call.

Resources

Baby and child first aid

www.redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/unresponsive-and-breathing-child

Helping a baby (up to one year of age) who is unresponsive and not breathing

	Recognising what to do	Key action	Steps to take	Supporting knowledge
Got to know	<p>The baby is not moving or does not respond when you call their name or tap their foot.</p> <p>Check if they are breathing: Tilt their head back slightly and look at their chest or stomach to see if it is moving, listen and feel for breaths on your cheek.</p> <p>If they are not breathing their chest or stomach will not be moving, you won't hear or feel signs of breaths.</p>	Give rescue breaths and chest compressions.	<p>Tell someone to call 999.</p> <p>Tilt their head back slightly, seal your mouth over their mouth and nose and blow steadily. Repeat five times.</p> <p>Push firmly in the middle of their chest with two fingers and then release. Repeat 30 times.</p> <p>Give two rescue breaths, then continue with cycles of 30 chest compressions and two rescue breaths until help arrives.</p>	<p>Giving rescue breaths means you are acting as the lungs by blowing into them and topping up the oxygen levels in the baby's blood. This oxygen is needed to keep their organs alive.</p> <p>Chest compressions act as the heart by keeping blood pumping around the baby's body and helping to keep their vital organs, including the brain, alive.</p>
Nice to know	They may also look pale and blue.		<p>If you are on your own carry out rescue breaths and chest compressions for one minute, and then call 999.</p> <p>Continue with rescue breaths and chest compressions.</p>	<p>When giving rescue breaths you should blow until you see their chest rise.</p> <p>When giving chest compressions push firmly at a regular rate.</p>

Frequently asked questions

Why do I have to tilt their head back to check for breathing?

When a baby is unresponsive, their muscles relax and their tongue can fall backwards and block their airway. Tilting their head back opens the airway by pulling the tongue forward. If a baby's tongue had been blocking the airway then tilting their head back should pull the tongue forward, enabling them to breathe again.

Do I have to give rescue breaths?

Ideally you should deliver rescue breaths, if you are able and willing, as this increases the chances of a successful outcome for a baby. However, if you can't give rescue breaths for any reason, just give chest compressions.

How long should I do chest compressions and rescue breaths for?

You should keep going until help arrives or, in rare cases, they start to breathe.

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Will I see an immediate response to my chest compressions and rescue breaths?

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What if I make a mistake and deliver rescue breaths and chest compressions but the baby is actually still breathing?

It is not ideal but don't worry - there's nothing to suggest you will smother them or cause any serious damage. You should stop delivering rescue breaths and chest compressions as soon as you realise they are still breathing.

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You are aiming to press down to a third of the depth of their chest.

How fast should I do the chest compressions?

You are aiming to press down at a regular rate; aim for around two chest compressions per second.

What if I'm on my own and the baby is unresponsive and not breathing?

It's best to top up the level of oxygen in the baby before calling 999. So if you are on your own, do rescue breaths and chest compressions for one minute and then call 999. Then continue rescue breaths and chest compressions until help arrives. If someone else is with you, they should call the ambulance immediately.

What should I say on the phone to the emergency services?

Call the emergency services as soon as possible and they will prompt you with questions. In this case, it is important to tell them that the baby is unresponsive and not breathing. The more information you can give the ambulance controller about the baby the better, as it will help them to prioritise your call.

Resources

Baby and child first aid

[redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/unresponsive-and-breathing-baby](https://www.redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/unresponsive-and-breathing-baby)

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