

Emergency Aid

Two weeks of First Aid for the activity badge.



How to earn the badge

Stage 1: Explain to your leader or another adult about:

- the importance of getting help
- what to say when you call 999
- helping someone who is unconscious
- helping someone who is bleeding
- reassuring someone at the scene of an emergency.

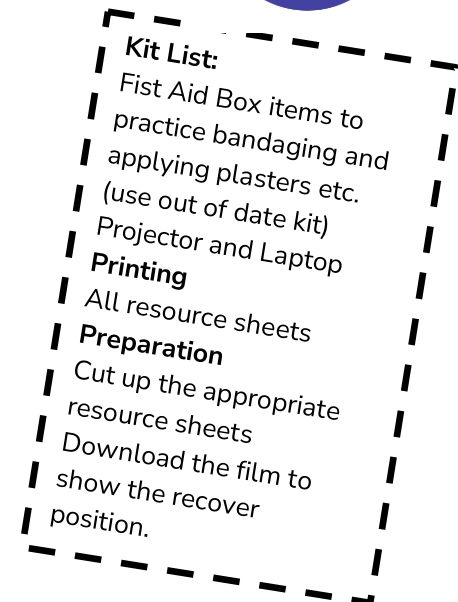
Stage 2: All of Stage 1 requirements plus:

- has a burn
- is having an asthma attack

Stage 3: Minimum two hours of training.

And all of Stage 1 and 2 requirements plus:

- is unconscious and not breathing
- has heat exhaustion or heat stroke
- has hypothermia
- is choking



Programme Planner - Week 1

Arrival	First Aid Colouring or Wordsearch
Circle	Discussion on the importance of learning first aid skills
Activity	Emergency Superheroes
Discussion	Bleeding (minor cuts and grazes, severe bleeding, nosebleeds)
Activity	First Responders
Discussion	Burns (minor burns and scalds, severe burns)

Programme Planner - Week 2

Arrival	Bandaging Practice
Dem	Dr. ABC and the Recovery Position
Discussion	Extreme Temperatures (hypothermia, heat exhaustion, heat stroke)
Activity	Emergency Scenario Cards
Discussion	Choking
Quiz	Check Your Knowledge Quiz





How to run each part of the programme

Emergency Superheroes

Prep: Cut up the scenario strips and put into a bowl.

How: The leader makes sure that everyone knows how to call the emergency services using the 999 phone number and why they would call for help using 999 and why the number must not be used as a game.

Young people work in two teams (the call handler and those making the 999 calls) and in pairs within each team. Each call handler team has a copy of the questionnaire to use.

The 999 teams pick a scenario from the "emergency bowl" and then make the call by saying "HELP".

A call handler team responds and together they play out the scenario.

Everyone completes two scenarios and then the teams swap role and play again.

First Responders

Prep: Cut up the checklist strips (one set per team).

How: Everyone sits in a circle. The leader shows the two scenario pictures, and asks what is going on, what can be seen in the pictures, and what should they do?

- First, they should check that it's safe to help – are there any hazards, like cars and motorbikes nearby?

- Ask for help if there are adults around.

- Comfort the injured person – ask if they are OK, if they can get up and if they need help.

If it's a serious accident, an adult should call 999. Talk about what counts as a 999 emergency.

Examples include a traffic collision, an unconscious person or serious bleeding.

What to do if you find an accident

Shout loudly: Shout to attract an adult's attention.

Run only to get help: The injured person needs comfort and help, so only run off to fetch help.

Tell a trusted adult: It's important to alert a parent or trusted adult.

Check it's safe to help: Before helping, make sure there aren't any cars or other hazards. If someone is on the road, stay on the pavement and call out to them.

Comfort the injured person: Always ask if they are OK and where they hurt, and stay with them until help comes.

Tell the injured person that help is coming: Reassure them that help is on its way and that you will stay with them.

Ask someone to ring 999: If the injury is serious, such as heavy bleeding or if the person is unconscious, find someone who can call 999.

First aid checklist: In small teams, rearrange the instructions to treat a small cut.

Emergency Scenario Cards

Prep: Cut out the scenario cards.

How: Everyone should be in a group of three, with one acting as the casualty and the other two as the first aiders.

Give each group a scenario card with the relevant first aid facts. Each group should think about the scenario, and what they would do.

They create a short roleplay, to show the scenario, and what they'd do. They should make sure they include the key questions on their scenario card and share with an adult.

Dr. ABC

The leader should explain that Dr. ABC stands for danger, response, airway, breathing, circulation and then demonstrate the actions outlined below.

Danger: Before going near the casualty, make sure the area is safe. Check for any possible hazards around or near the person. This is to protect you and may also help you understand what might have happened.



Response: Check if the casualty's responsive or unresponsive. As you get closer to the casualty, introduce yourself and start asking questions loudly to see if you can get a response. Then kneel next to them and gently shake their shoulders, still asking questions. What to do next depends on whether they respond:

- If they have responded, reassure them, keep talking to them, and call 999.
- If the casualty does not respond, shout for help. If someone comes, ask them to call 999 as you move on to ABC. If no one comes, call 999 on a mobile phone and put it on loud-speaker. Move on to ABC as soon as possible.

Airway: Check if the airway is open and clear by placing one hand on the casualty's forehead and two fingers under their chin. Gently tilt their head back as you lift their chin and look into their mouth to see if the airway is open and clear.

If they are unresponsive, move on to breathing as quickly as possible.

Breathing: Check if the casualty is breathing normally. Put your ear above their mouth and look down their body. Listen for signs of breathing, notice if you can feel their breath on your cheek, and watch to see if their chest moves. Do this for 10 seconds.

If they are unresponsive and not breathing, start CPR straight away. If someone comes when you call for help, ask them to bring a defibrillator (AED).

If they are responsive and breathing normally, move on to circulation.

Circulation: Look and check for severe bleeding.

If they are bleeding severely, control and treat it by applying direct pressure to the wound.

If they are unresponsive and breathing but not bleeding, put them in the recovery position.

Demonstrate the recovery position:

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Discussion Bases:

1. Bleeding

Minor cuts and grazes

Cuts are when the skin is fully broken.

Grazes happen when the top layers of skin have been scraped off.

How to help: Clean a minor cut or graze with water or sterile wipes and cover it with a plaster.

Severe bleeding

Larger wounds can cause the casualty to bleed a lot, this is where there is a larger wound and it is causing the casualty to bleed a lot.

Bleeding needs to be controlled quickly – the priority is to stop the bleeding.

How to help: Put on a dressing and tie a bandage around a wound to stem the bleeding.

Nosebleeds

Nosebleeds are when blood flows from the nose – they usually happen when tiny blood vessels inside the nostrils are ruptured (broken).

Lots of different things cause nosebleeds, incl. being hit on the nose, sneezing, or picking your nose.

How to help: Pinch the adult casualty's nose and position them to help stop the bleeding.

Signs of shock

When people have an accident, they sometimes go into shock. Signs of shock are:

Pale skin, which may be cold and clammy.

Fast pulse - as shock gets worse.

Fast, shallow breathing and a weak pulse.



Grey blue skin, especially inside the lips.

Nausea and possible vomiting as the brain's oxygen supply decreases.

Restlessness and aggressive behaviour.

Yawning and gasping for air.

The casualty could become unresponsive.

How to help: Firstly, treat any injury that has happened and then treat the shock. Help the casualty lie down and raise their legs supporting them on a chair and calling 999 for emergency help.

2. Burns

Minor burns and scalds

Burns are caused by dry heat (such as fire or irons) while scalds are caused by wet heat (such as steam or hot drinks). The longer the burning goes on for, the more severe the injury will be.

Signs and symptoms include:

Red skin and swelling.

Pain in the area of the burn.

Blistering may start to appear.

How to help:

Treating minor burns or scalds is all about cooling the burn as quickly as possible, usually by holding it under cool running water for at least 20 minutes.

Severe burns

Burns and scalds are caused by damage to the skin when it comes into contact with heat. People with severe burns may also develop shock, a life-threatening condition.

Signs and symptoms include:

Pain.

Areas of superficial, partial thickness and/or full thickness burns;

- superficial burns affect the outer layer of the skin and may look red and tender

- partial thickness burns also affect the outer layer of the skin, but the skin becomes red and raw, and blisters may form

- a full thickness burn affects all layers of the skin and can cause damage to nerves, tissues, muscles and blood vessels

Difficulty breathing

Signs of shock

How to help: Treating severe burns or scalds is all about cooling the burn as quickly as possible by holding it under cool running water for at least 20 minutes, helping the casualty to sit or lie down, and calling 999 for emergency help.

3. Extreme temperatures

Hypothermia

Hypothermia is a condition that happens when someone gets too cold. Our bodies are usually around 37 degrees – hypothermia happens when someone's body temperature drops below 35. It can become life-threatening, so it is important to treat someone with hypothermia right away.

Signs and symptoms of hypothermia include:

Shivering, cold and pale with dry skin.

Unusually tired, confused and have irrational behaviour.

Reduced level of response.

Slow and shallow breathing.

Slow and weakening pulse.

How to help: Treating hypothermia's all about warming the casualty's body up again. The exact steps will depend on where you are (and what you have available); if you're halfway up a mountain,



you won't be able to pop inside with your casualty, but if you're camping behind your usual meeting place, it is the easiest option to go inside.

Generally, treating hypothermia is about getting the casualty somewhere warm, replacing wet clothes, wrapping them in blankets, giving them a hot drink, and calling 999.

Heat exhaustion and heat stroke

Heat exhaustion is usually caused by someone losing salt and water – it usually happens to people who aren't used to hot, humid weather. Heatstroke happens when the part of the brain that regulates the body's temperature fails and the body's unable to cool down. It can come after heat exhaustion or can be caused by spending too much time in the sun, having a high fever, or taking non-prescription drugs such as ecstasy.

Signs and symptoms of heat exhaustion include:

A headache, dizziness and confusion
Loss of appetite and feeling sick
Sweat with pale, clammy skin
Cramps in the arms, legs and stomach
A fast, weakening pulse and breathing

Signs and symptoms of heatstroke include:

Headache, dizziness and discomfort.
They may be restless and confused.
Hot, flushed and dry skin.
Becoming less responsive quickly.
Pulse that is full and bounding
Body temperature above 40 degrees

How to help: Treating heat exhaustion is all about getting the casualty to a cool place, helping them to lie down and raise their legs, and giving them water.

Treating heatstroke is about getting the casualty to a cool place, helping them cool down, and monitoring them until help arrives.

4. Choking

Choking is where a person's airway is partially or fully blocked by something which means they may be unable to breathe properly. If a person is coughing it means the airway is partially blocked but if they can't cough it means the airway is fully blocked.

The signs and symptoms are:

Difficulty breathing, speaking or coughing.
A red puffy face
Signs of distress and they may point to their throat or grasp their neck.

How to help: Treating choking is about getting the airway clear as soon as possible.

This is done with back slaps and abdominal thrusts.

Check Your Knowledge Quiz

See resource sheet.