

In the event of an accident or a U3A member being taken seriously ill, regardless of whether you have a member present with a current first aid qualification, you are advised to contact the emergency services immediately (999/112). You must state the address where you are, including the postcode, your phone number or the phone number you are calling from and as clearly and concisely as you can, what has happened.

If you are familiar with the Ordnance Survey Grid Reference System and are confident that you can give an accurate number, then do so.

First aid treatment should only be administered under their direction, unless you are facing any of the emergency scenarios listed below. If a trained first aider is present then that person should be the one to make the emergency call and follow any instructions.

In the event of a fall keep the person warm and dry - DO NOT attempt to move the person unless he/she is in immediate danger.

Emergency Scenarios

1. Struggling to breathe normally



Open the airway by placing your hand on the casualty's forehead and gently tilting the head back. Then lift the chin with 2 fingertips. Check for normal breathing by looking for chest movement, listening for sounds or feeling for air on your cheek.



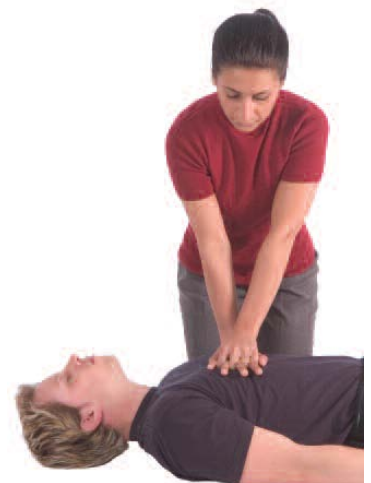
If normal breathing has been restored

- place in the **recovery position** – chin up, mouth open, legs and arms locked – and keep the person warm and dry.
- Maintain check on continued breathing.

2. Failure to restore normal breathing/person is unconscious

Commence CPR

- place one hand on the centre of the chest and the heel of your other hand on top and interlock fingers keeping them away from the ribs
- Lean directly over and with your arms straight press down about 5-6 cm then release the pressure. Don't remove your hands. The compression rate should be about 100 a minute.
- After 30 compressions open the airway again, pinch the casualty's nose and allow the mouth to open. Take a normal breath and place your mouth around the casualty's mouth and blow steadily into the mouth whilst watching the chest rising. Remove your mouth and watch for the chest falling. Give a second breath and then resume 30 compressions without delay.
- Continue with chest compressions and rescue breaths in the ratio of 30:2 until qualified help arrives or the casualty starts breathing normally, in which case place in the recovery position.



3. Severe Bleeding

- Apply direct pressure to the wound.
- Raise and support the injured part (unless broken).
- Apply a dressing/bandage if available

4. Burns

- Cool the affected part with cold water until the pain is relieved.