



Essential First Aid for Children's Activity Providers and Centres



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6 vital first aid skills

There are 6 vital first aid skills that all children's activity providers and play centres should know to ensure that they are able to cope with the most life-threatening emergencies.

It is essential for everyone working with children to know how to help if a child begins to choke, stops breathing, has a seizure, a head injury, is burnt or is bleeding. These topics form the basis of even my shortest emergency first aid courses and this guide is an introduction to these vital skills.

Choking

Choking is extremely common and very frightening, but in the vast majority of cases, with the right help, given quickly, the choking child will make a full recovery.

When a child is choking it is really frightening. If they are coughing and spluttering and able to make a sound; it is best to see if they can cough the obstruction up themselves. However, if the child is red in the face, struggling to breathe and unable to make any sound at all, their airway is completely blocked and they need urgent help, fast!

Signs of Choking



- Unable to speak or cry
- Clutching their throat
- Struggling to breathe

What to Do

If a child shows signs of choking, stay calm and ask them to cough to try and remove the obstruction themselves. For a small child or baby have a quick look in their mouth and remove anything obvious with your finger and thumb. Never finger sweep as you can push things down and make things worse.

If they are unable to cough

Bend the child forward, supporting them on their chest with one hand. Use the flat of your other hand to give a sharp back blow between the shoulder blades.



Check to see if the blockage has cleared before giving another blow. Give up to 5 back blows, checking each time to see if the blockage has cleared.

If 5 back blows have not helped:

Get an ambulance on the way, then continue and administer abdominal thrusts (previously known as the Heimlich manoeuvre).

Abdominal thrusts:

Perform up to 5 abdominal thrusts, checking each time to see if the obstruction has cleared.

NEVER give abdominal thrusts to a baby, they should receive chest thrusts in the same place as you would push when giving baby CPR.

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NB: Anyone who has received abdominal thrusts must be seen by a doctor.

If the child is still choking, call 999 (or 112) and alternate five back blows and five abdominal thrusts until emergency help arrives. If at any point the child becomes unconscious, commence CPR.

If they are still choking, call the emergency services and start chest thrusts straight away.

For more information on how to prevent choking and how to give chest thrusts for a baby, click here <https://firstaidforlife.org.uk/baby-choking/>



CPR – Cardio, Pulmonary Resuscitation

If the casualty is unconscious, but still breathing, they must be put into the recovery position to ensure their airway remains clear and monitored closely to ensure they continue to breathe.

If someone is unconscious and not breathing it is vital that you open their airway and commence CPR as quickly as possible. If there is a defibrillator (AED) available, you should use that and call an ambulance as a matter of urgency too.

If an adult has a Cardiac Arrest they are likely to have residual oxygenated blood in their system which can sustain them for 3 or 4 minutes whilst someone is pushing on their chest to pump that blood round their body.

After this time, or after about 30 compressions, they will start to run out of oxygenated blood.

- Place the heel of your hand on the centre of the person's chest, then place the other hand on top and press down by 5-6cm at a steady rate of 100 to 120 compressions per minute.
- After every 30 chest compressions, give two rescue breaths.

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Children are unable to retain oxygen in their system as efficiently as adults (and they are also more likely to have experienced a respiratory problem leading to their collapse) and therefore for children it is advised to start with 5 rescue breaths – tilt their head and lift their chin to open their airway and then breathe into them sufficiently for their chest to rise.

This should then be followed by 30 chest compressions, pushing down on the chest by about a third and pushing hard and fast.

Get an ambulance on the way and then continue: 2 breaths: 30 compressions....



Click to read full article on adult and child CPR and for information on why it is so important that you give breaths and well as compressions
<https://firstaidforlife.org.uk/breaths-cpr-important/>

[What to do if a baby is unconscious and not breathing](#)

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As with the adult and child advice; first check Danger, Response, open their Airway and check for Breathing – If you think they are not breathing properly (less than 2 breaths in a 10 second period), start CPR (Cardio Pulmonary Resuscitation)



Tilt the head and lift the chin to horizontal and give up to 5 rescue breaths

Carefully tilt the head and lift the chin to roughly a horizontal position to take the tongue off the back of the airway then give 5 rescue breaths to re-oxygenate them. Babies and children are much more likely to have had a breathing problem first resulting in a respiratory arrest – their heart will stop later.

Seal your mouth around their mouth and nose (if you can fit your mouth over both) and blow into them gently with a puff of your cheeks (their lungs are about the size of a teabag – so don't breathe too hard).

If they start to gurgle when you breathe into them, briefly turn them onto their side and empty any vomit from their mouth, before continuing with the breaths.

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**Push down by a third of their depth
with two thumbs or fingers**

Push hard and fast on the centre of their chest – roughly between the nipples at a rate of about 120 beats per minute – roughly 2 per second

After about 30 compressions...you will need to give them 2 more breaths and then continue with the compressions again. 30:2:30:2:30:2...



Keep going

When you push on the chest – you are being the heart

When you breathe into them – you are being the lungs. If you are on your own, you should perform 1 minute's CPR before phoning for an ambulance (5 breaths, 30:2, 30:2 is about a minute).

Continue until the paramedics arrive.

For full article <https://firstaidforlife.org.uk/what-to-do-if-your-baby-is-unconscious-and-not-breathing/>

How to help someone experiencing a seizure

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Help for a generalised seizure or febrile convulsion

- Make sure they are safe, ease them to the ground if they are on a chair.



Time the seizure

- Protect their head without restraining them.
- Loosen any tight clothes.
- Remove any objects against which they could hurt themselves.
- Ask bystanders to move away and maintain the casualty's dignity.
- If possible, observe what is happening during the seizure as this can be useful for future diagnosis.
- Once the seizure has stopped, check the airway and breathing and place in the recovery position if they remain unresponsive.
- Stay with them and talk to them reassuringly throughout the seizure.

Phone for an ambulance:

- if it is their first seizure,
- if the seizure lasts for more 5 minutes
- If they have another seizure immediately after the first one
- If they are injured
- If they are known to have seizures and this one is different
- If you are worried at all
- If unresponsive for more than 5 minutes after the seizure

Never put your fingers or anything in their mouth to try and prevent them biting their tongue – as this will cause serious injury

Do not try and move them unless they are in immediate danger

Do not restrain their movements whilst they are fitting

Do not give them anything at all to eat and drink until fully recovered

Never try and 'bring them round'

Click to read full article on febrile convulsions

<https://firstaidforlife.org.uk/febrile-convulsions-seizure/>

Click to read full article on seizures

<https://firstaidforlife.org.uk/fitting-seizures-and-convulsions/>

Burns

Knowing what to do can radically reduce the amount of pain and scarring experienced and can mean a full recovery without even needing to be admitted.

1. Extremely carefully, remove loose clothing covering the burn.

Do not take clothes off if there is any risk the skin has stuck to them or if the skin has blistered.

2. Put the affected area under cool running water for at least 10 minutes (ideally longer). Remember you are cooling the burn and not the casualty, so try and keep the water running over just the burnt area.
3. Keep the rest of the casualty as warm and dry as possible and watch for signs of shock.
4. Phone an ambulance, particularly if a large area is affected, or if the skin is broken or blistered. Keep the area under the water while you wait for the ambulance to arrive.

A burn is measured using the size of your hand, which is roughly equivalent to 1% of your body. Therefore, a burn measuring just the size of a 50p piece or a postage stamp can be very serious for a baby or small child. Burns to the hands, face, feet, genitals, airways, or a burn that extends all the way round a limb are particularly serious.

Never:

- Remove anything that has stuck to a burn
- Touch a burn
- Burst blisters
- Apply any creams, lotions or fats
- Apply tight dressings, tapes or use anything fluffy

Always get burns assessed by a health professional.

Click to read full article and to learn how to dress a burn

<https://firstaidforlife.org.uk/burns-what-to-do-2/>

Head Injuries

The most common symptoms that you may see following a head injury are as follows: Headache, confusion, blurred vision, nausea, difficulty concentrating, fatigue, drowsiness, dizziness, feeling in a fog, memory impairment, but you should remain vigilant for any unusual behaviour or symptoms for the next 48 hours.

Most head injuries are superficial, but it is vital to look for the above signs which could indicate that the brain has been injured and they should be assessed by a health professional asap.

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Most important advice following a head injury –

- Don't make things worse – sit out and and rest
- Do not risk further injury
- Rest your brain = lots of sleep, avoid reading, screens and sports for at least 24 hours / 48 hours for child

Click to read when to play on in sport following a head injury

<https://firstaidforlife.org.uk/head-injury-advice-play-on/>



If you would like a copy of this poster, please email emma@firstaidforlife.org.uk

Call 999 or 112 if a baby or child is injured and they lose consciousness, even momentarily.

Or if they:

- won't stop crying
- are unable to walk normally

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If the child has not lost consciousness, is alert and behaving normally after the head injury:

- Reassure the child and remain calm.
- Control any bleeding with direct pressure using a clean, non-fluffy cloth.
- Apply a wrapped ice pack or instant cold pack to the injured area for 10 minutes (this will reduce bruising but has no effect on the severity of any internal head injury).
- Observe the child carefully for the next 24/48 hours. If you notice any worrying signs, get medical help immediately.
- If the incident has occurred close to bedtime or naptime and your child falls asleep soon afterwards, check in continually to look for anything unusual.

Worrying signs:

- Twitching limbs
- Disturbances in colour
- Disturbance of breathing.

It's fine for your child to go to sleep following a minor head injury, however do not confuse falling asleep with losing consciousness!

<https://onlinefirstaid.com/head-injuries/>

Bleeding

If someone is bleeding the priority is to stop the blood coming out! It is never a priority to wash an injury – it will be cleaned in hospital.

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Keep them warm and get emergency help.

If the person is pale, cold, clammy and showing signs of shock, or if there is a lot of blood – help their circulation by lying them down and raising their legs.



Apply direct pressure to control the bleeding and elevating the wound can help to slow the flow of blood.

Click to read full article on bleeding including information on the signs and symptoms shock and how to treat it <https://firstaidforlife.org.uk/severe-bleeding-and-clinical-shock/>

It is strongly advised that you attend a practical or online First Aid course to understand what to do in a medical emergency.

Emma Hammett

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