

Teacher guidance

KS2 Basic life support



This guidance sheet is designed to support teachers who are new to teaching basic first aid, using our Pupil First Aid resources. Before delivering any first aid skills, teachers must feel confident that they have the relevant knowledge and competency to safely teach the required techniques.

The content of this guidance covers how to conduct an effective primary survey, recovery position and CPR, and gives direction to the appropriate next steps.

Please note that as the primary survey precedes all first aid treatments, it is important to teach our basic life support lessons before any other topic.

PRIMARY SURVEY

ASSESSING A CASUALTY

When you come across a casualty, it is essential to assess them so that you can deliver effective, safe, and prompt first aid. The process to conduct an initial assessment of a casualty is called the primary survey, which helps to identify life threatening injuries or conditions.

DRSABC

The primary survey is often referred to as DRABC or in the case of our Pupil First Aid courses, DRSABC, which stands for:

- **Danger**: Before approaching any casualty, check that there is no danger to you. Move any potential sources of danger if possible, so that you can carry out first aid without risking injury to yourself, the casualty, or any bystanders. If it is too dangerous for you to approach the casualty, the most helpful thing you can do is make an effective call to the emergency services and provide reassurance to the casualty that help is on its way
- **Response**: Upon approaching the casualty, check to see if they are responsive. Call their name, if you know it, or alternatively ask them to open their eyes, or ask if they can hear you. Firmly tap the casualty's shoulders to see if they can feel you
- **Shout**: Shout for help or ask bystanders to be on standby to provide support. If somebody arrives to help, ask them to wait until you have assessed breathing before dialling 999 or 112 for an ambulance
- **Airway**: Open the airway of the casualty by placing a hand on their forehead, and gently tilt the head back so their mouth opens. Place your index and middle finger of the opposite hand under the point of their chin. Lift and hold the chin to keep the airway open. In the case of an infant, use only one finger to lift their chin. Opening the airway is extremely important to ensure that air can enter the lungs and allow breathing to take place. The tongue (a muscle) of an

unresponsive casualty may relax and block the airway, however performing the head and chin tilt prevents this from happening

- **Breathing:** Check whether the casualty is breathing normally by placing your cheek just above their nose and mouth, facing down the length of the body. Listen, look, and feel for breath in this position for no longer than 10 seconds. If the casualty is breathing normally you may be able to hear this, feel their breath on your cheek, or see their chest rising and falling. It is important to be able to recognise agonal breathing, where a casualty takes short and infrequent gasps for breaths. This should not be mistaken for normal breathing. If the casualty is not breathing, perform cardiopulmonary resuscitation (CPR) immediately
- **Circulation:** Injuries or conditions which cause severe bleeding can be life threatening because of the risk of shock. Once you are sure that the casualty is breathing normally, check for any signs of circulatory problems such as bleeding.

Once you have completed the primary survey and concluded that the casualty is breathing and has no life-threatening injuries, such as severe bleeding, place the casualty into the recovery position and make an effective call to the emergency services.

RECOVERY POSITION

Please note that placing somebody into the recovery position will only happen once you have conducted the primary survey.

WHEN TO PERFORM THE RECOVERY POSITION

The recovery position is used to place an unresponsive casualty who is breathing normally into a safe position that allows them to breathe easily. The position for infants is slightly different to that for a child or adult, and both are detailed below:

1. For all casualties, it is important to maintain an open airway throughout the procedures. This can be achieved by opening the airway of the casualty by placing a hand on their forehead, and gently tilting the head back so their mouth opens. Place your index and middle finger of the opposite hand under the point of their chin. Lift and hold the chin to keep the airway open. In the case of an infant, use only one finger to lift their chin
2. Monitor the casualty's level of response and breathing until the emergency services arrive. Be prepared to perform CPR if the casualty stops breathing normally
3. For an infant, cradle them with their head pointing down to prevent them choking on their vomit, and to stop their tongue from blocking the airway. Always support the infant's head with your hand
4. For a child or adult, kneel beside the casualty. Straighten their legs
5. Place the arm nearest to you at right angle to the casualty's body with their elbow bent and palm facing up
6. Take the arm furthest from you and place it across their chest so the back of their hand is against the cheek nearest to you. Hold it in position

7. With your other hand, grasp the casualty's furthest leg just above the knee. Pull it up until their foot is flat on the floor
8. Keeping the casualty's hand pressed against their cheek, and using the leg you have bent, roll them towards you
9. Adjust the casualty's upper leg so that both their hip and knee are bent at right angles
10. Tilt the casualty's head back to keep their airway open and clear.

ADDITIONAL INFORMATION

- It is important to check whether an unresponsive casualty has any objects in their pockets which may cause damage as you place them in the recovery position
- Check their pockets by running the back of your hand over the outside of their pockets
- If they are wearing glasses, carefully remove them to avoid breaking them upon rolling the casualty
- Place any items you remove in the outstretched hand of the casualty.

CPR

WHEN TO PERFORM CPR

If the primary survey has been completed and a casualty is found to be unresponsive and not breathing normally, emergency help should be called for and CPR commenced immediately.

PERFORMING CPR

1. **Call 999/112** for emergency help. Ask a bystander to locate an AED
2. **Kneel beside the casualty.** Place one hand on the centre of the chest. Place the heel of the other hand and interlock them to lift them off the chest
3. **Begin chest compressions** by leaning your body weight over the casualty with arms straight. Press downwards on the breastbone to a depth of about 5-6cm. Release pressure but keep your hands in place. Try to perform compressions at a rate of 100-120 per minute. Perform 30 chest compressions
4. **Perform two rescue breaths** by opening the airway and pinching the nostrils together. Take a breath and blow air into the casualty's mouth until the chest rises
5. **Repeat** the cycle of 30 compressions and two rescue breaths until help arrives.

ADDITIONAL INFORMATION

- A child may not be strong or confident enough to do CPR on a casualty. They could however tell somebody else what to do
- It is important to understand that sometimes even CPR cannot save somebody
- Anything somebody can do to help, even just calling someone else to help, could be lifesaving
- Never do CPR on someone if they are responsive and breathing normally.