Little LifeSavers Teaching Session SCRIPT

Notes:

Please follow this script as closely as possible

Please demonstrate all four skills

Please teach both the CPR skills and the Choking skill as separate skill "Stations" with one instructor repeating it every 10-12 minutes as the groups rotate.

On the final rotation, the last group stays with their final skill instructor to practice Recovery.

Welcome and introduction by Lead Instructor

Action: Set out 3 large P.E mats on the floor around the hall and a single chair at one end of the hall where you have put the manikins and the instructors are gathered. Place one of the child mannikins on the chair

***Say**: Good morning everyone and welcome. Please sit in a semicircle so you can see and hear me*

Action; Indicate to the floor space in front of the chair with one of the manikns (Child) on. Make sure you leave yourself enough room to do the floor demonstration of CPR and then the recovery position.

***Say**: Thank you all for inviting us to join you today. My name is (your name) and I'm from a charity called Little LifeSavers. Over the next hour we are going to teach you four very simple skills that will enable you to help someone who has collapsed and isn't responding to you, or who is choking. The way it's going to work is I will show you all the skills now and then we will ask your teacher to split you into three equal groups and each group will join an instructor to practise the skill on the manikin. After 10 minutes the groups will change around, moving to the next skill in a clockwise fashion until you have all done each of the first 3 skills. Then you will stay in your final positions and practice the recovery position before coming back into a big semicircle for a recap.*

Give the Four-skill Demonstration – This takes about 20 minutes so take questions at the end of the session.

Skill 1 – Choking Child

Action: Sit the child Laerdal Mannikin (hard-backed manikin) on a small chair and stand just behind

***Say**; Ok so – the first skill I'm going to show you is what to do to help someone who is choking. We are going to pretend that our plastic friend here is a child at this school. What shall we call him?*

Action: Hands will go up and this will help them to engage with the session. Allow the children to name the manikin. ***DO NOT SPEND TOO LONG DOING THIS***

***Say**: Okay so Sam here is sat on the table opposite you in the lunch hall with his friends chatting and eating his sandwiches. You are with your friends and as you look across the table you see Sam suddenly breathe in a bit of sandwich. You can see he is trying to cough but can't because his throat*

is blocked by a chunk of sandwich. He stands up and is looking extremely scared, red in the face, perhaps making some slight high-pitched gasping noise or even no sound at all. He is desperately trying to get the children around him to help him. So, imagine I am you and I am going to show you how you can quickly help Sam.

***Say**: Firstly – **Approach safety**. It's really important as a rescuer to never run up to someone in trouble because you could risk injuring yourself in the process. You must keep yourself safe. So I'm going to walk quickly to Sam but check as I approach that he hasn't spilled water on the floor I could slip and fall in, there's no broken glass or spilled food etc. I am happy it's safe for me to approach so I am going to see if he is ok.*

Action: walk to the chair with the manikin on checking the floor for danger

***Say**: "Sam! Are you okay? " I am **Assessing to see what I need to do** to help him. If Sam can talk and is coughing really well and strongly – I will ask one of the other children to get a teacher but I know at the minute the situation is not as dangerous as it could be. If Sam cannot speak, cannot cough, is blue around the mouth – then the situation is very serious and I need to help him quickly.*

***Say:** I will turn one of the other children and ask:*

Action: turn to a fellow Instructor

Say: *"Please find a teacher or go to reception. Ask them to call 999. The operator will say "Emergency. What service do you need?" Say Ambulance please. Tell them where you are (School name/ address if known) and that it is a CHILD WHO IS CHOKING. Then come back and tell me they are coming"*

Action: Turn back to the audience

***Say:** This means the ambulance crew will have the right equipment and medicines for a child rather than an adult and I know HELP IS COMING.*

***Say**: Now I have asked for help I can take action to help Sam. The first thing I need to do is Back Blows. I will aim to do five back blows using the heel of my hand in between Sam's shoulder blades to try and force the blockage from his throat.*

Action: turn the manikin and show correct position.

***Say**: I will tell Sam what I am doing because he is still awake and trying to cough. I cannot do back blows if the casualty is unconscious. They have to be awake. "Sam I'm going to slap your back to try and help you cough"*

***Say and Action**: I then put one hand on the manikins shoulder, lean him forward because gravity will help us and deliver five measured blows to the correct area on the back*.

Action: Indicate the correct area on a fellow instructor but do not deliver any slaps to the instructor. Demonstrate the five firm back blows. Check the manikins face after each back blow to see if they have coughed and can breathe.

Say*; *The aim is to deliver the ONE blow that will help him *cough – not to do five hits as fast as you can as this won't help him. If the back blows are not effective – repeat another five*.

Action: demonstrate another five and check the mannikins face in between each blow- again showing to check if he casualty coughs.

***Say**: Sam still has not coughed so I am going to perform Abdominal Thrusts – also called the Heimlich Manoeuvre. I stand behind Sam to do this. Now I need to know where to put my hands. On yourselves I want you to feel the bottom edge of your ribs like I am showing you on myself. Follow them to the middle and you will find there is a soft squishy area underneath where your ribs meet in the middle. In this area the big breathing muscle called the diaphragm is exposed and not covered by the ribs and this is where I am going to place my balled-up fist with my thumb knuckle sticking out a bit. So with my writing hand I place my balled up fist into the squishy area under Sam's ribs, I clasp my other hand over the top, keep my elbows in and pull him tight in towards me then perform five rapid short sharp squeezes by pulling my hands towards me- pull in and upwards slightly. This stimulates the diaphragm making the muscle contract, increasing pressure in the chest to help push the food blocking Sam's throat out. I lean Sam forward as I do this.*

Action: as you talk about the correct hand position – demonstrate it on yourself, your ribs and chest then ball up your dominant fist. Use a fellow instructor to show position on a real human – **DO NOT PERFORM THE MANOEVRE on the instructor**

***Say**: If five abdominal thrusts do not work I go back to doing back blows.*

Action; demonstrate the manoeuvre

***Say*:** *If five back blows do not work, I do five abdominal thrusts. I alternate between the two – back blows, tummy thrusts, back blows and tummy thrusts until Sam either coughs successfully; in which case I stay to see if he is okay and needs any more help, or – the ambulance arrives and takes over, or until Sam becomes heavy in my arms which will mean he is now unconscious because of low oxygen.*

*If this happens, I help him to the floor onto his back, (**perform the Action as you speak**) check that help is coming (because we really need it now) then do a SHAKE and Shout assessment – taking Sam by the shoulders "Sam are you ok?"(**perform the action as you speak**) to which there is no response and so now I need to start doing chest compressions – otherwise known as CPR .*

Skill 2. Hands-Only CPR – Child

***Say:** Ok so we use hands only CPR if someone has collapsed and is completely unresponsive. If you are in the playground, at home or wherever, and you see a child who has collapsed you can use this skill to help them. You NEVER RUN OVER TO THEM. You must KEEP YOURSELF SAFE – so if the child is in the middle of the road for example – never run out into the road yourself. You might get hit by a car and become a casualty yourself. Once you are safe to approach Assess the casualty with shake and shout. Do this firmly ad briskly. If they show any signs of life- which is movement, obvious breathing, groaning, coughing, grimacing or facial expressions, summon help (999, ambulance, location, unconscious child) then place them in Recovery Position. If they are unresponsive you summon help (999 etc) and start CPR.*

***Say**: In our scenario we are still with Sam. Sam has choked and we have been unable to help him clear his throat. He has become low on oxygen which means he is unconscious. We performed shake and shout with no response and have checked that an ambulance has been summoned. If it hasn't – send another child again with the 999 instructions (repeat the 999 instructions)*

***Say**: Now I need to start CPR. Because I am showing you as if I am a child as well, I will use two hands to do chest compressions. If the child is much smaller than me or if I am an adult helping a child – especially one that is less than 11, I will use one hand. First I need to know where to place my hands. Feel the bottom of your ribs like I am doing on myself,*

Action: Demonstrate on yourself as you talk

***Say:** then follow them to the middle and move your fingers up the middle to between your nipples (this makes them laugh so I usually say "Yes I did say nipples") Here you can feel a hard bone right? This is the chest bone – called the sternum. Our hearts sit in our chest in between the bone at the front, and our spine bones and ribs at the back. The heart is a thick muscly bag that pumps blood with oxygen to our bodies. I want you to imagine that in Sam that muscle has stopped. So what we need to do is squeeze that muscly bag between the bone at the front and the bone at the back so that blood carries on being pumped round Sam's body. We know that every minute Sam's heart doesn't do this, Sam's risk of dying gets bigger. This is absolutely the best way to help Sam now.*

***Say**: So, I kneel on the floor next to Sam and place the heel of my writing hand on the bone in the middle of his chest in between the line of the nipples.* **Action: demonstrate as you speak**. *I come up on my knees so my shoulders are over my hands and my arms and elbows are straight; place my other hand over my first hand. I do not interlock my fingers because if I grip too hard my fingers will hurt- I just allow my fingers to relax. I then bend from my hips pushing through the heel of my hands with my arms straight to push down on the chest by about 5 cm then lift so that my hands are STILL TOUCHING THE CHEST but allowing the chest to come up fully before pressing again. (**Demonstrate thirty then ask another instructor to take over so you can continue talking**) I aim for thirty compressions in the first instance. If I am with my class and I know after today all of them can do CPR, I ask them to swap in with me so I don't get too tired. We each take it in turns to do 30 and do them continuously until help arrive or Sam moves or shows signs of life – then I put him in Recovery position.*

Action: Perform 30 compressions at a steady pace counting out loud then ask another instructor to continue whilst you speak.

***** IMPORTANT POINTS – the song "Staying alive" is usually sung far too slowly for effective chest compressions. Count to thirty out loud in a steady rhythm-aiming for 100 compressions per minute.***

Do not allow them to lift their hands right off the chest of the manikin and bounce around the chest with their hands coming down in different places on the chest. It risks rib fractures, injury to the casualty, hitting the soft diaphragm area used for abdominal thrusts and reflux of tummy contents into the casualty's airway and means compressions are not effective as the heart isn't compressed properly each time.

***Say**: If I am on my own with the casualty - I do continuous compressions until help arrives or signs of life are shown. This is why it is VITAL to summon help before starting CPR – even if it means I have to LEAVE THE CASUALTY to get help. CPR is tiring and if help doesn't come I will become exhausted – and so be a second casualty myself*

I stop CPR when help arrives or Sam shows signs of life – in which case I put him into recovery position.

Say: Ok so that was skill one; how to help a child who is chocking- and you do the same if it is a grown-up who is choking, and skill 2 – how to do CPR on a child. Now I will show you Skill 3- how to do CPR on a grown-up.

Skill 3. Adult Hands-Only CPR

***Say**: Ok. Imagine you're in a café in town with mum and dad. You're in the queue for your drinks when suddenly the man in the queue in front of you turns to your parents and says "gosh it's hot in here! I don't feel so good" He looks sweaty and grey in colour and collapses to the floor right there. I am again going to pretend I am you so I can show you how to help him.*

***Say:** As always – keep yourself safe. Make sure there's no hot coffee spilled, a broken glass or anything on the floor that could cause you an injury.* **Action: Demonstrate as you speak**

Say: *I kneel by his side and place my hands on his shoulders and do a very **brisk shake and shout.***

Say and Action: "Hey Mister!! Are you ok?"

***Say**: If he groans or moves, put him into recovery and **summon help** (999, Ambulance, location, Adult collapse) In our scenario he does not respond. Say to the nearest adult "Please can you call 999. Ask for an ambulance and tell them it's a collapsed adult at park Coffee shop and can they come quickly" (Use a fellow instructor as your helper)*

*Now I need to **do CPR**. If the casualty is wearing a coat that is zipped or buttoned over the chest, then undo the coat so you can tell where on his chest to put your hands.* **Action: demonstrate as you speak** *Place your hands in the centre of his chest between the nipples like you did for the child CPR, come up onto your knees so your shoulders are directly over your hands with straight elbows and start chest compressions. You will need to press harder than for a child-especially if he is a big man. Again this is why getting help first is so important. If you are alone and begin CPR without first getting help you will tire quickly. Aim to do thirty compressions – again keeping hands on the chest wall so no bouncing around and allow the chest to come up completely before the next compression. Aim for 100 per minute and swap with someone else. Do not be afraid to show others who are standing and watching how to do the CPR. Compress continuously until he shows signs of life (so then put him into recovery position) or Ambulance arrives and takes over.*

If a casualty is in recovery position in ANY scenario – check on them every 2 minutes to see if they

- ***Respond to shake and shout***

***If they do not or you are not sure, turn them back onto their back, do shake and shout again and start CPR if you are in any doubt of a clear sign of life**.*

Skill 4. Recovery Position

***Say**: And finally I'm going to show you the Recovery position. This is for when any casualty in any of the scenarios we have been though shows signs of life, whether at the first "shake and shout" or after CPR. There are lots of different ways to remember it but we teach it like this. Imagine you are in class and you really need to go to the toilet for a wee*.

Action: Demonstrate the movements whilst standing and talking through the skill

Say: "I really need a wee!" Place right arm across lower tummy

"Please miss can I go to the toilet?" Raise left hand to the side of the head with elbow bent – don't touch the head with your hand.

"I really need to go" Bend RIGHT Knee up

"Now" and indicate that you will roll towards the LEFT hand that is raised.

Action: Now ask a fellow instructor to lie on the floor to demonstrate. They pretend to be the casualty so do not move but allow you to put them into recovery position as you talk through the steps

***Say**; Okay so this is our collapsed grown up in the coffee shop. He's groaned and moved a bit during CPR so I've stopped and I need to make him safe by putting him into Recovery position. So I take his right arm and think "I really need a wee" And place it across his lower tummy. "Please can I go to the toilet?" I move his left hand up to by the side of his head making sure the ELBOW is BENT. "I really need to go" Bend the RIGHT knee up placing the instructor casualty's foot flat on the floor then mover so that you are at the side of the casualty. Reach across and place your RIGHT hand on the casualty/ instructors RIGHT shoulder and place your LEFT hand on the casualty/instructors RIGHT KNEE then TURN them TOWARDS YOU onto their side. Now make sure the RIGHT KNEE THAT IS UPPERMOST is very bent so the knee is in a straight line with the right hip. Untangle the instructor/casualty's feet so the RIGHT FOOT is free and resting on the floor in a straight line BELOW THE RIGHT KNEE. Move the instructor/ Casualty's RIGHT ARM (the one across the tummy) to place the HAND FLAT near to the chest and make sure the LEFT ELBOW is BENT with the LEFT HAND NOT UNDER THE HEAD. Finally LIFT THE CHIN to OPEN THE AIRWAY.*

***Say**: The bent elbow and especially the BENT KNEE PREVENTS THE UNCONSCIOUS CASUALTY FROM ROLLING ONTO THEIR FACE AND BLOCKING THEIR AIRWAY.* **Action: Show them by trying to roll the instructor/casualty onto their face – you won't be able to because the Right knee being bent at 90 degrees to the right hip prevents it.**

***Say**: It also means that if the casualty is sick, it will not go into their throat-blocking their airway. It will drain out of the side of their mouth. I STAY WITH MY CASUALLTY – CHECKING THEM WITH SHAKE AND SHOUT UNTIL HELP ARRIVES. If I am in any doubt as to their response I will turn them back onto their back, do shake and shout and if there are no clear signs of life I start chest compressions. If they respond to chest compression or to my shake and shout- I put them back into recover position as I have shown.*

***Say**: Ok we will get you into 3 groups and each group will join an instructor on one of the mats to practice the skills. We will rotate every 10-12 minutes so it is very important you PAY ATTENTION because time is short and there will be no time to practice at the end.*

Action: Now the teacher will divide the children into 3 groups and walk around the groups making sure they are behaving. If photographs are being taken make sure any children without consent are in THE SAME GROUP so no-one gets accidentally pictured.

End of Demonstration

Part 2 – Teaching the Skills to the Groups

Each instructor chooses a skill to teach and takes a manikin to use, kneeling on the mat with the manikin with the children forming a circle with them.

Run through the scenario verbally-do this quickly.

Say: Right everyone – we are going to practice – CPR/ Choking. We're in the lunch hall/ café and this is our choking casualty Sam/ collapsed adult casualty. I am you. What do I need to do first?

Make sure they tell you:

- ***Safe approach***
- ***Shake and shout***
- ***Summon help***
- ***Begin skill***

Demonstrate the back blows or the CPR then pass the manikin to the child on your left and ask them to continue.

For the CPR Skills – they do 30 compressions while you watch. Correct any bent arms, incorrect hand positions and sitting back on their heels, instead of being upright with their shoulders over their hands. When they have done their 30 pass the manikin to the next child for their thirty – correcting and encouraging. Do this with all the children and move swiftly. The children sitting behind you may well talk and not pay attention. Draw them back gently by asking them "So when do we stop?" and "So what do I do if I feel a rib break?" keep checking the child doing the compressions but engage the others to watch in this way.

For the Choking Skill: Pass the manikin to the child on the left and ask them to show you back blows. Correct their technique and then after five, pass the manikin to the next child asking them to do tummy thrusts. Correct their technique. Then pass to the next child for back blows. Then pass to the next child for tummy thrusts and so on. Be fast because when the last child – the one next to you on your right has done either back blows or tummy thrusts, you need to ask them to do the other skill – ie. if they have just done tummy thrusts then they do five back blows. When they have

done their five, you pass the manikin to the child on their right to do the back blows or tummy thrusts – whichever they didn't do last time. You then pass to the next child for their five and so on-back around the circle alternating skill with each subsequent child until all of the group have done both skills. Keep them engaged by asking questions like "When do I stop?" And what do I do if they give a good cough and move away?"

IMPORTANT NOTE: The abdominal thrust can make the manikins head snap back suddenly and hit the child performing it on the chin. Place one of your hands on the head of the manikin so the child doesn't get unintentionally hit.

Recovery position.

Keep the last group at your skill station and when they have all completed your skill, pair them up and get them to do recovery. Walk among them and correct technique. It often becomes quit noisy and light hearted. Be careful of hands and fingers as you walk amongst the pairs of children as you don't want to tread on them

Summary

The lead instructor summons the children back into the semicircle as they were in the start. Be quick! You are usually out of time by now.

Say: *well done everyone – so a quick recap – Sam is choking in the lunch hall what do I do?*

Ok it's safe for me to approach – what next?

Ok – He can't cough and is purple in the face – what do I do?

Ok help is summoned what now

How many back blows

They don't work- what now

How many tummy thrusts?

They don't work – what do I do now?

Ok he's getting heavy in my arms as I do tummy thrusts what do I do?

Ok he's on the ground and we know help is coming what next?

Ok when do I stop CPR?

I'm in a coffee shop with dad and the man in front collapses – what do I do?

It's okay for me to approach and he hasn't responded to my shake and shout- what do I do?

Okay he's groaning and moving after twenty chest compressions – what now?

Say: Well done everyone: A couple of important things*:*

- Never Ever do CPR or the choking skills on each other in the playground, or a sibling at home or anyone who obviously doesn't need it
- Sometimes you might break a rib doing CPR. It's ok – keep going! Broken ribs heal only if the casualty survives.
- Sometimes – despite perfect CPR or resuscitation attempts people don't survive. It isn't because you did anything wrong.
- Do you know where your nearest Defibrillator is? They are needed to help with CPR so knowing where one is can really help. Find out where the one in school is.
- Finally – show mum and dad these skills on your favourite teddy tonight.

Congratulations! You re all Little LifeSavers