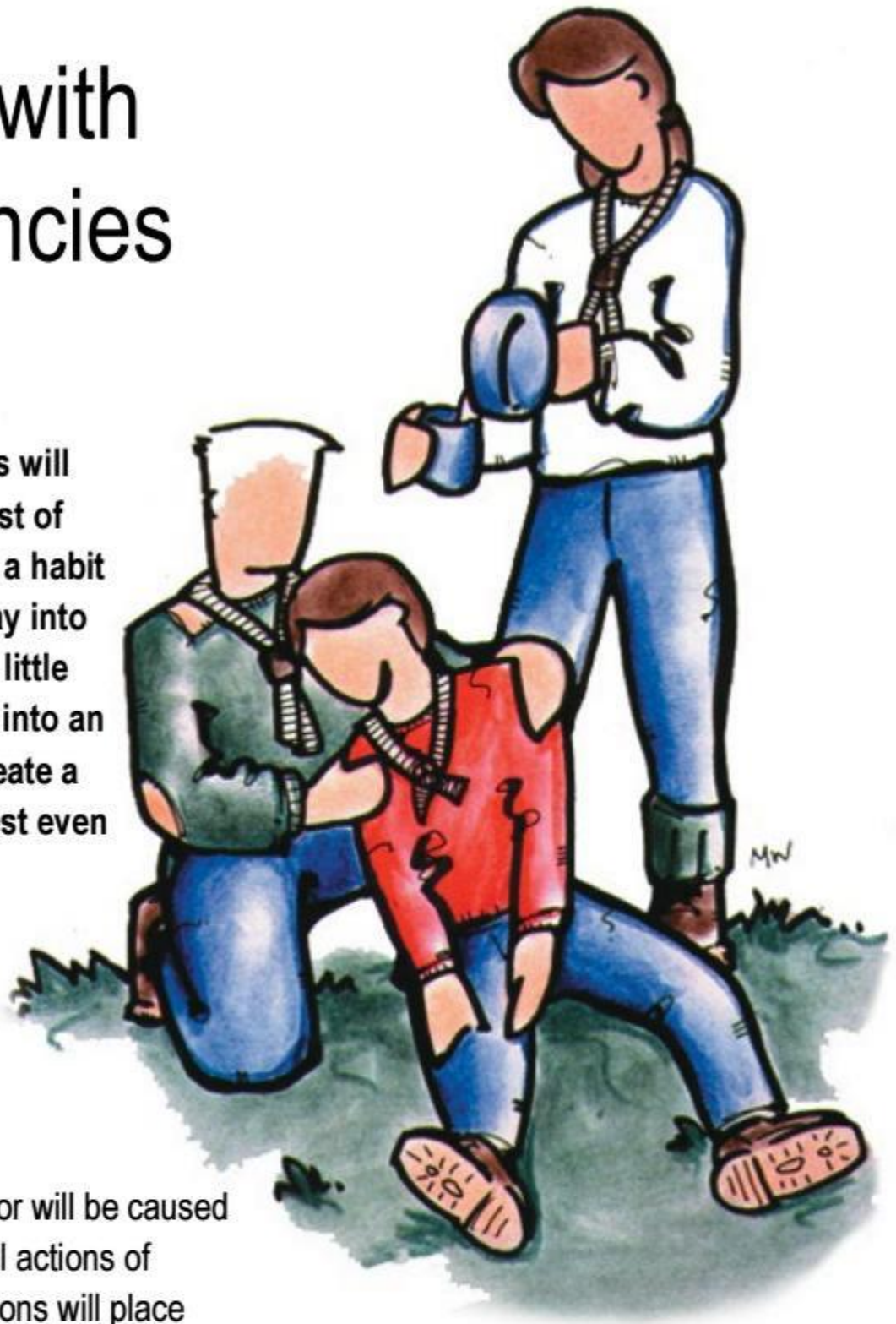


Emergencies



Dealing with Emergencies

Emergency situations will occur, despite the best of planning. Nature has a habit of turning a sunny day into a thunder storm with little notice, a well person into an ill person and can create a landscape that will test even the fittest of walkers.



EMERGENCIES

Accidents will happen or will be caused by the less than careful actions of others. All these situations will place you in the position of the patient or the first aider. How we deal with such incidents can be the difference between life and death!

It is the role of the first aider to do what is necessary to reduce the danger to the patient, to reassure the patient, to keep them warm and to get help. You should never attempt to do anything that you have not been trained to do. In a city or urban location help is usually easy to find, a phone call is all that is required to summon assistance. However risks are present in open countryside that can add extra complications to any incident. Immediate help is often some distance

away and the elements of weather can add to the severity of the situation. 'Be prepared' is the key phrase that needs to be remembered. Having the proper equipment will help you to reduce the risks. A bivvy sheet or survival bag for shelter, a first aid kit, warm clothing, water and food; each item in your rucksack will aid survival, therefore the importance of bringing such equipment with you on every trip, cannot be over emphasised.

Guidelines in emergency situations

- ***Be calm and assess the situation***
This is important. You may be frightened and prone to panic, particularly if there is a lot of blood, or the patient is unconscious. Take charge of the situation quickly and don't stand there looking on, as a quick reaction is important.
- ***Assess the situation carefully but quickly***
Ensure there is no further danger to the patient and to yourself. Stabilise any danger before approaching the patient or remove the patient to a safer location.
- ***Treat life threatening conditions first***
Breathing, serious bleeding, unconsciousness. (ABC)
- ***Send for help - ring 999 or 112***
- ***Treat the less serious injuries next***
- ***Reassure patient at all times and tell them what you are doing.***
- ***Keep the patient warm and treat for shock***
Keep the patient warm. In outdoor situations it may be necessary to insulate the patient from the cold rising from the ground and a sleeping bag is a better option for warmth.





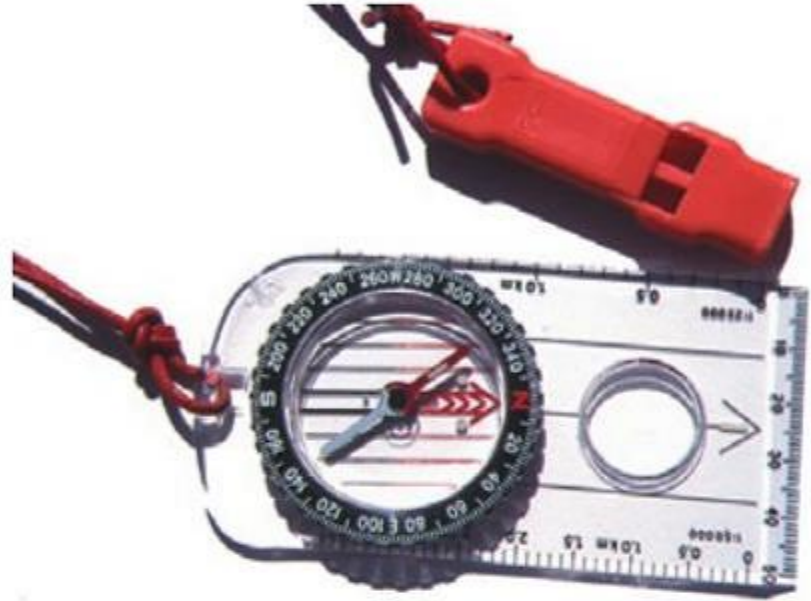
In the case of an accident in the open countryside

- Do any immediate first aid that is required and treat for shock.
- Keep the patient as comfortable as possible and ensure they are warm. If necessary erect a shelter to protect the patient from the elements.
- Assess the situation:-
 - If injuries are minor and the patient can walk then head for safety.
 - If the injuries are such that the patient can be carried to safety easily, then improvise a stretcher.
 - If the injuries are unknown or the patient is unconscious or you are unsure what to do then send for help and stay put.
- If you choose to stay then you must do the following:-
 - Erect a shelter.
 - Keep the patient and the rest of your party warm.
 - Send two experienced members of the group to seek help. The messengers should carry the following information concerning your situation to the emergency services:-
 - Exact location, giving a 6 figure grid reference and as much information as possible about the location of the patient.
 - Time of accident and any treatment given.
 - How many people are involved and/or injured.
 - Nature of injuries to patient.
- You should mark your position with survival bags, flags, or fires so that you can be found easily.

Being Prepared

These are the essential items that EVERYBODY should have in THEIR OWN RUCKSACK on EVERY ADVENTURE into the wilds.

- 😊 A OS map of the area
- 😊 A compass
- 😊 A torch with spare batteries and bulb
- 😊 Extra food
- 😊 Extra clothing
- 😊 Raingear
- 😊 A penknife
- 😊 Matches in a waterproof container
- 😊 A candle or other firestarter
- 😊 A personal first aid kit
- 😊 A survival whistle
- 😊 A survival bag



The group should also have between them

- 😊 A walking rope
- 😊 A bivvy sheet
- 😊 A sleeping bag
- 😊 A mobile phone (extremely useful in emergencies)



Note:

If working as a Patrol, you may only require one map and compass. However it is good practice for every member of the Patrol to have their own compass and map. Every member of the Patrol should be aware of where they are at all times. What happens if the Patrol Leader is injured or knocked unconscious?



Signalling

You have an emergency and need help. You have a number of options. If you have a working mobile phone try to contact the emergency services and follow their instructions. If not, then you will have to seek assistance by sending people for help. In both cases the communication of your situation is most important. Rescue personnel will have to find you and will need some idea of what to expect by way of injuries. If the situation is serious then there may be a tendency to panic and rush for assistance. In such a situation, calmness and a clear head will be of greater help for you and your patient. Before you contact the emergency services, work out exactly where you are and give a grid reference for your



position. If you are lost give the last known location and where you think you may be in relation to this position. Work out a description of the injuries of your patient and if possible write it down before you make a call or send for help.

Contact the emergency services and calmly give them whatever information they require. If you choose to send for help, write out this information so that

it can be brought to the rescue services.

Mark your location with survival bags or bright coloured clothing, and have whistles ready to signal your location. At night build a fire and have torches and whistles ready.

International Distress Signal

The International Distress Signal is six good long blasts on a whistle or six shouts or six flashes of a torch followed by a pause of 1 minute, then a repetition of the signal.

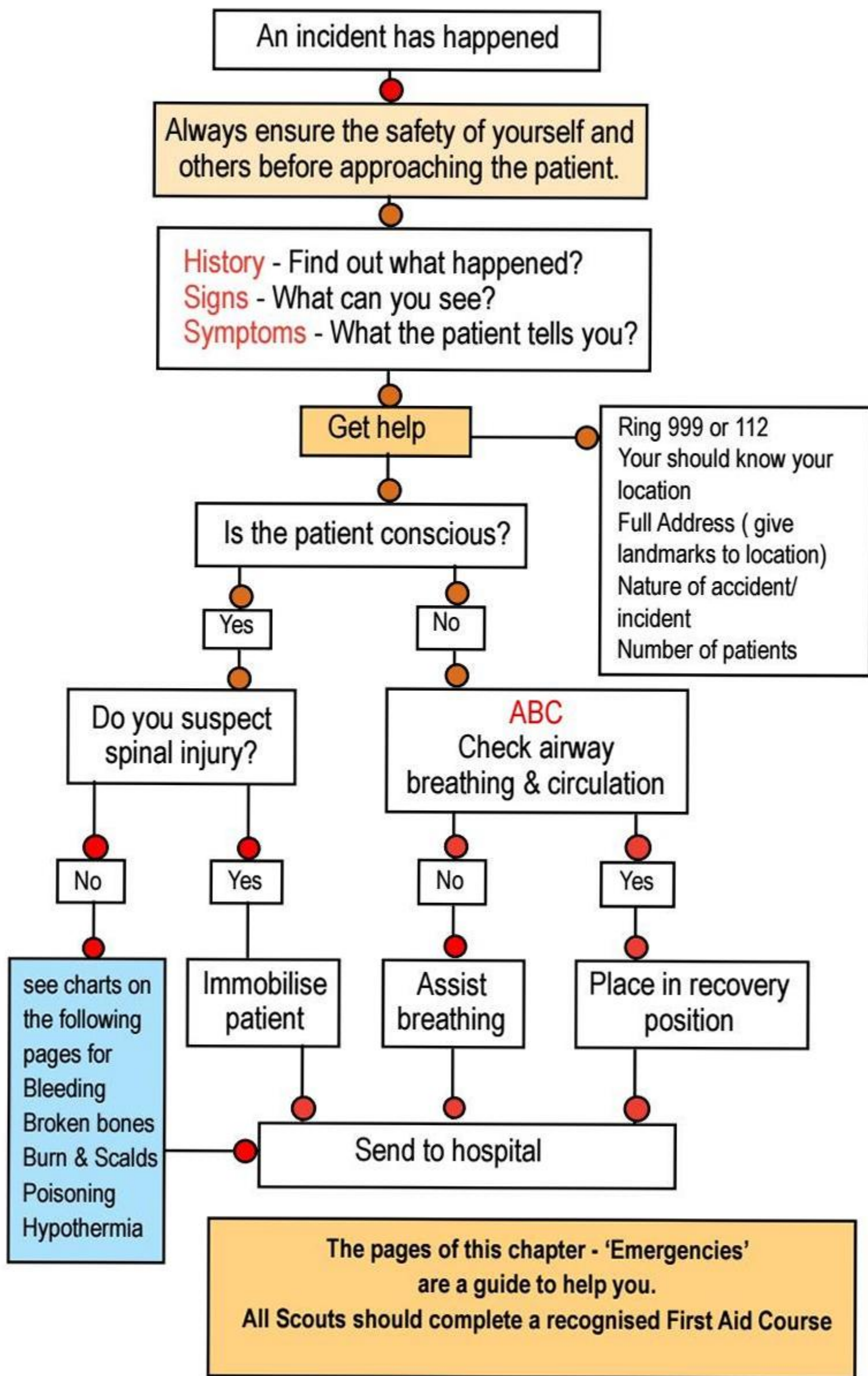
This signal should be used to alert rescuers to your location.

If the signal is heard you will hear an answering signal of three blasts followed by a pause of a minute and repeated until they find you.

Do not stop because you hear a reply, as rescuers may be using your blasts as a direction finder (especially in bad visibility).



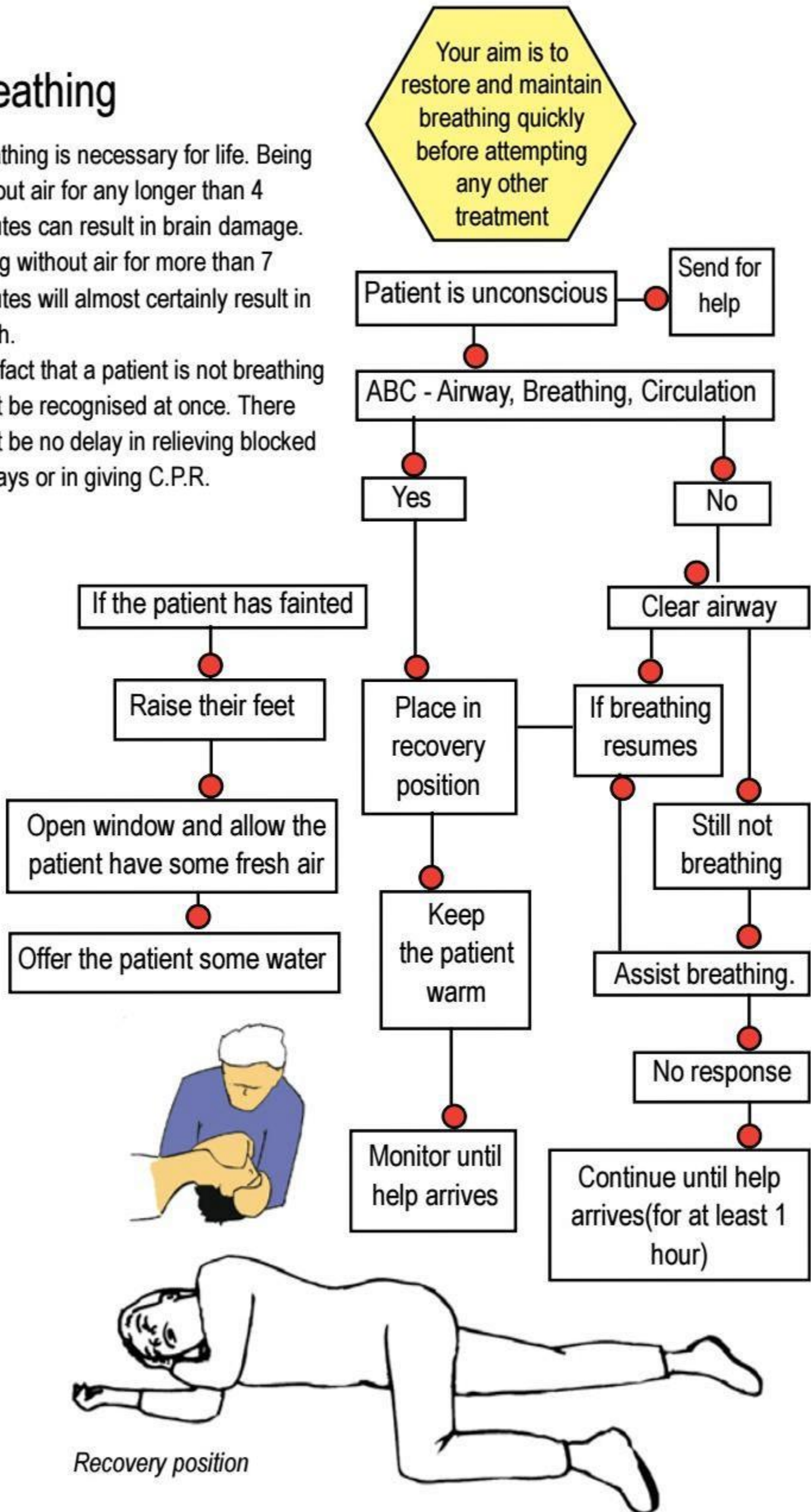
Procedure to be followed in the case of a first aid incident



Breathing

Breathing is necessary for life. Being without air for any longer than 4 minutes can result in brain damage. Being without air for more than 7 minutes will almost certainly result in death.

The fact that a patient is not breathing must be recognised at once. There must be no delay in relieving blocked airways or in giving C.P.R.



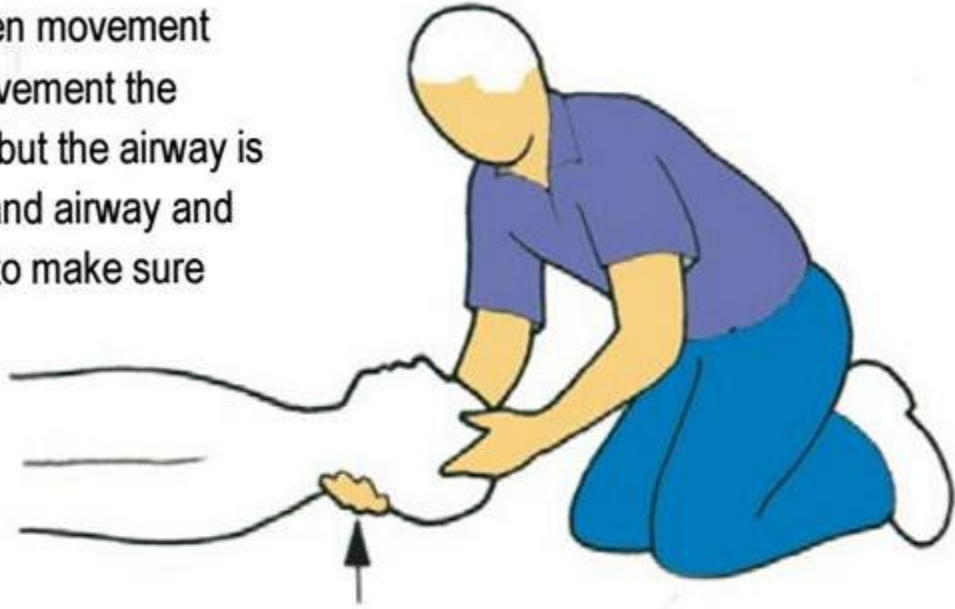
Assisted breathing

Look for movement of the chest and abdomen

Listen for the sound of air movement

Feel for air movement against the side of the cheek

If you see chest or abdomen movement without hearing any air movement the patient is trying to breathe but the airway is obstructed. Check mouth and airway and position the head and jaw to make sure airway is open.



If patient is not breathing give 4 quick breaths.



If at anytime you do not see the chest rise when you breathe in check for blockage of the airway.

Pinch the patient's nose with your thumb and forefinger while maintaining the head tilt.

Take a deep breath, open your mouth wide and make a tight seal over the patient's mouth.



Breathe into the patients mouth twice. As you breathe into the mouth, watch for the patients chest to rise. Be sure to look up and take a deep breath, to completely refill your lungs between breaths. Each breath should last at least

one to two seconds, to allow adequate time for good chest expansion. It is a good idea to learn CPR from a recognised First Aid Organisation.

Check, Call, Compress

Compression-only CPR is CPR without mouth-to-mouth rescue breaths. CPR is given by pushing hard and fast in the centre of the chest. CPR manually pumps blood to the person's brain and other vital organs.

If you see an adult collapse you should start compression-only CPR. Follow three simple steps:

1. **Check:** Is the person unresponsive and not breathing*?
2. **Call:** Get someone else to call 999 or 112, or call them yourself.
3. **Compress:** Start compressions. Push hard and fast in the centre of the chest. Don't stop until help arrives

A compression is when you push hard on the chest to force the heart to pump blood around the body.

Compression-only CPR is best for adults (age 16+) who you see collapse and are unresponsive and not breathing.

In all cases, if you are not trained in traditional CPR, compression-only is better than no CPR

Check

Is the person **unresponsive** and **not breathing**?



Call

Get someone to call **999** or **112**, or call them yourself.



Compress

Start compressions.

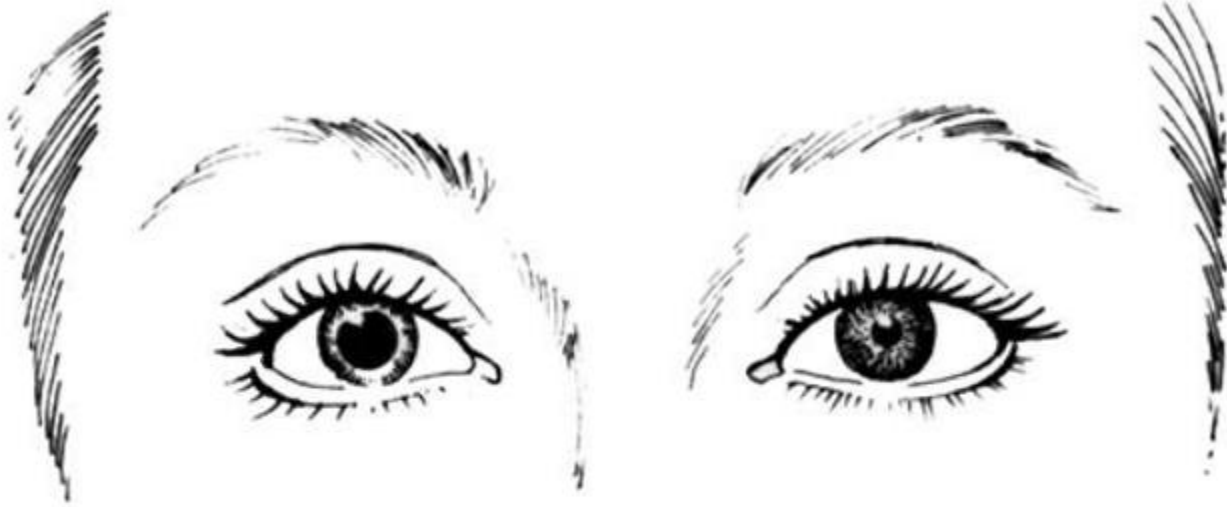
Push **hard** and **fast** in the centre of the chest.

Don't stop until help arrives.



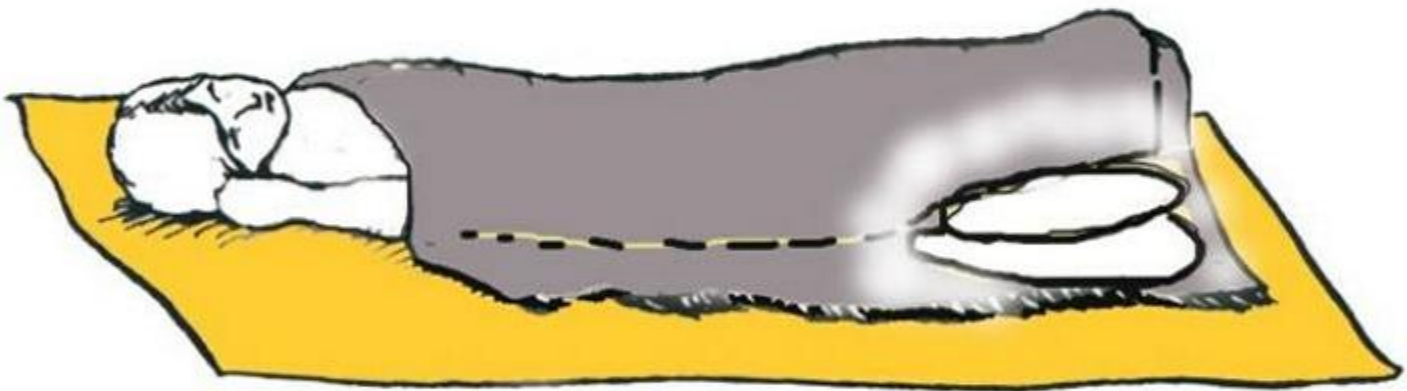
Head injuries

If a patient has bumped his/her head or has been unconscious for any period of time check their eyes. Pupils of unequal size or pupils that respond unequally to light are an indicator of a major head injury. So get help immediately.



Shock

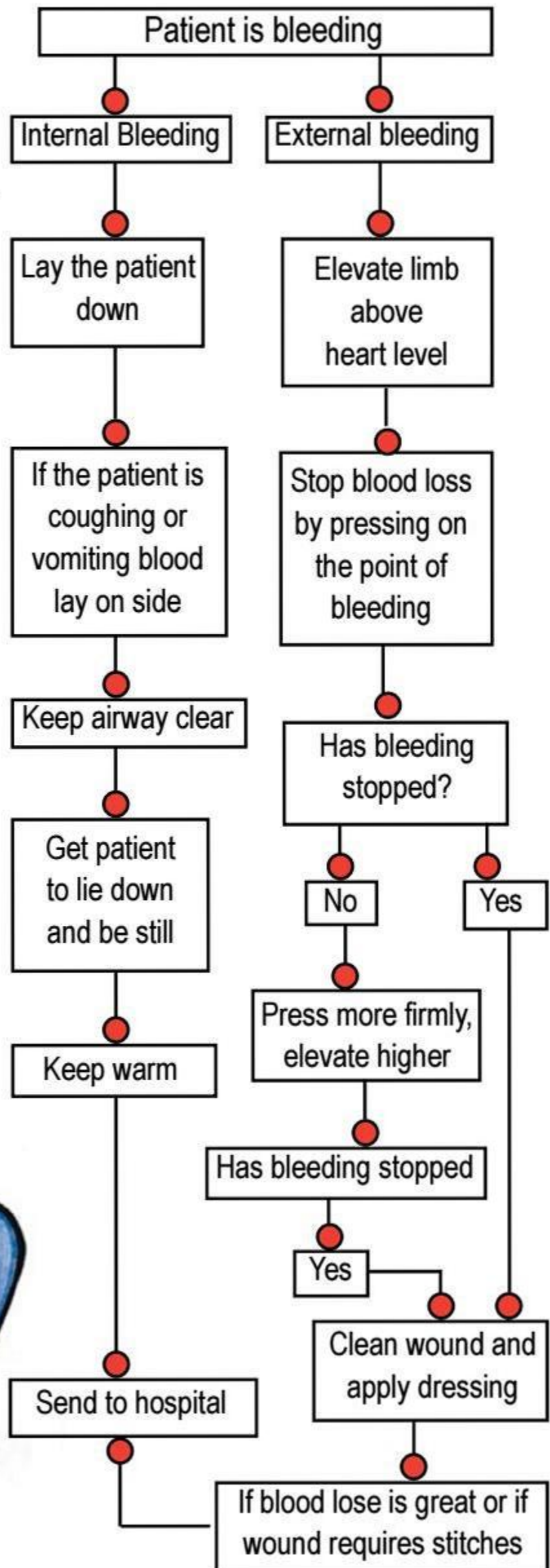
A person can suffer shock as a result of any type of accident and this can be extremely dangerous, if not treated. Patients will appear ashen or pale faced and may have a rapid heartbeat and feel faint and dizzy. Lay the patient down and raise the feet. Cover the patient with a blanket but do not overheat. Patient should recover in a short period of time when the blood supply to the brain increases.



Lay patient down. Raise feet using pillows, rucksack. Keep patient warm, cover with blanket.

Bleeding

Your aim is to stop bleeding as quickly as possible. Apply a dressing and get help if blood loss is great.



Cuts and wounds

The first step is to stop the bleeding. This can be done by applying pressure to the wound. It is essential to have examination gloves in your kit for this purpose. Next, clean the wound, working away from the

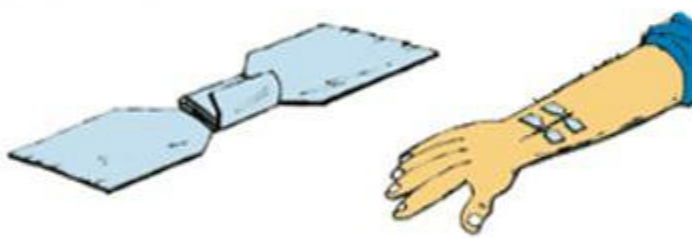


cut. If it is a simple scratch or cut apply a band aid. If it is more severe, apply a compress bandage. If the cut is deep or a long gash seek medical advice, as stitches may be required.

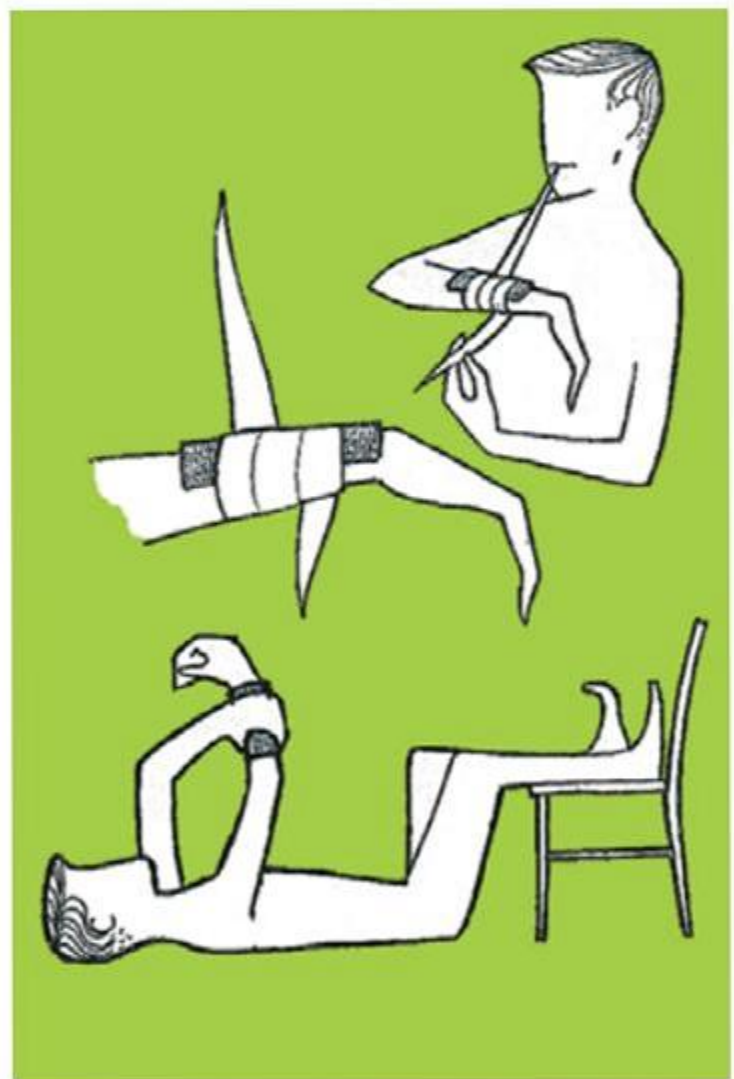
Self Help

If you injure yourself and there is no one about to help, would you be able to treat yourself? You should practice, using the tips shown in the illustration.

If the wound is bleeding and does not cease when pressure is applied, lift the affected area above your head. Lying on the ground with your feet above head level will help to prevent the onset of shock and dizziness.

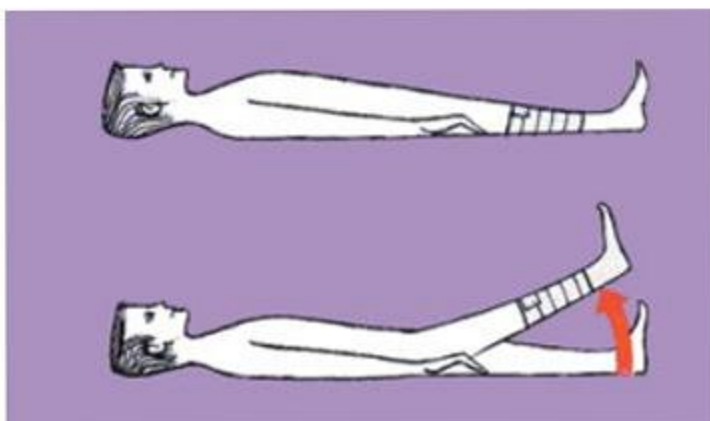


Makeshift or emergency butterfly strips can be made from clear sticky tape. These are very good at closing large gash type wounds



Leg wounds

Bleeding from leg wounds can be severe, as blood vessels are very close to the surface, in particular on the shin. Lie the patient down and apply pressure to the wound with a sterile pad until bleeding stops. Apply a cover bandage. Heavy bleeding from the upper leg can be serious. Elevate the leg, apply a pad and call for help.



Broken bones

You aim is to stop bleeding, if any. Reduce swelling. Make the casualty comfortable and get medical help

Casualty may have a broken bone

Find out what happened

Is there bleeding

Can the patient use the limb normally?

Yes

No

Yes

No



Is there swelling?

Treat bleeding before any other actions

Yes

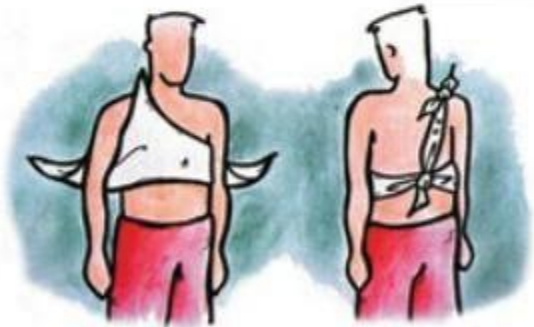
Compare with other limb to determine fracture location



Apply cold compress

If bone is protruding make ring to protect the bone.

If sprain is suspected treat as a fracture

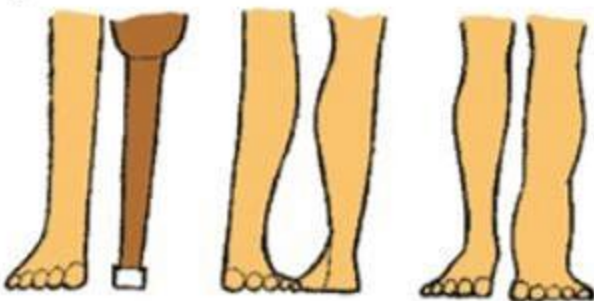


Cover wound with sterile dressing

Prevent movement

Compare the good with the injured to discover swelling or more serious injuries

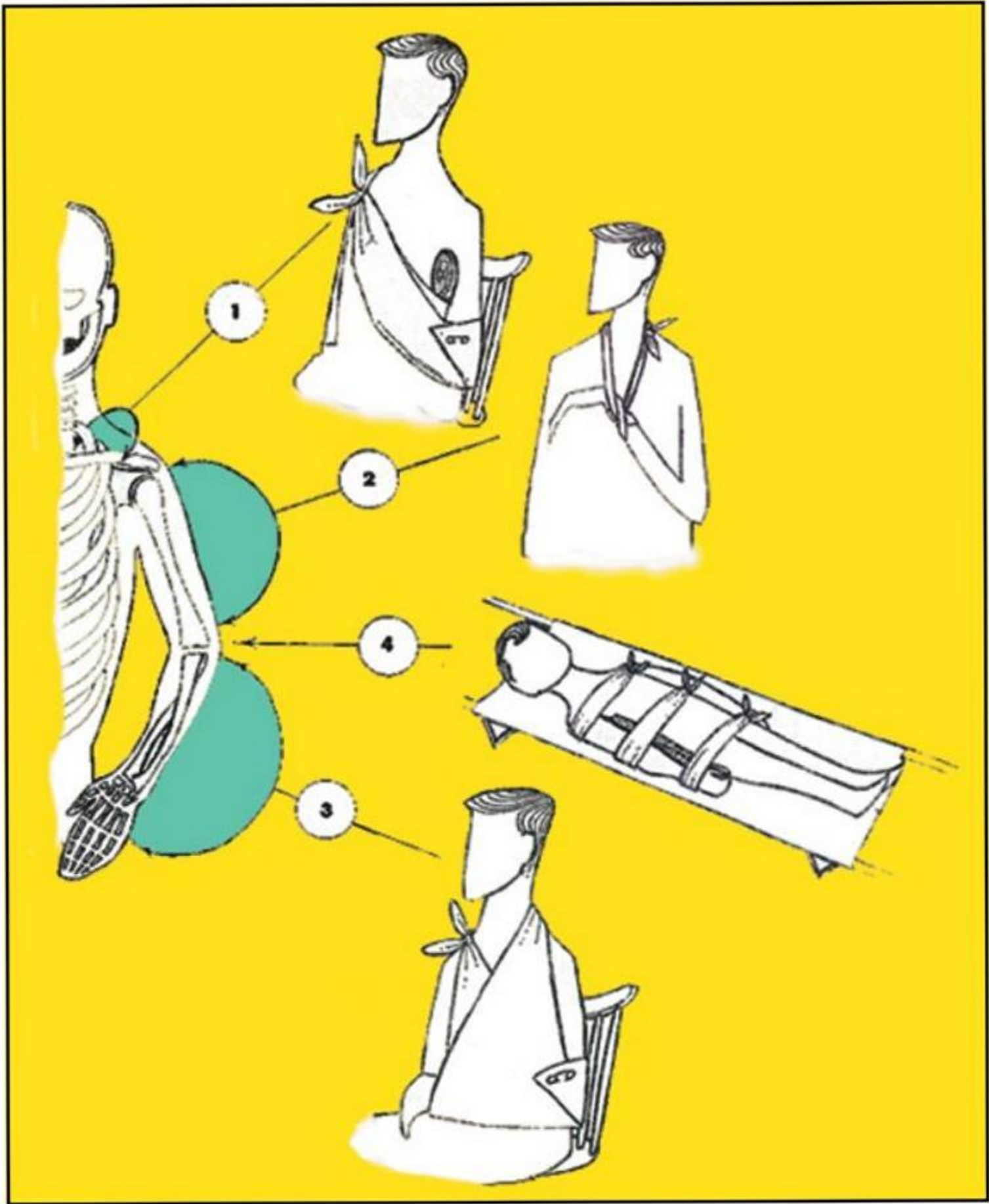
Immobilise limb - splint or to body



Keep warm and reassure patient

Get medical help

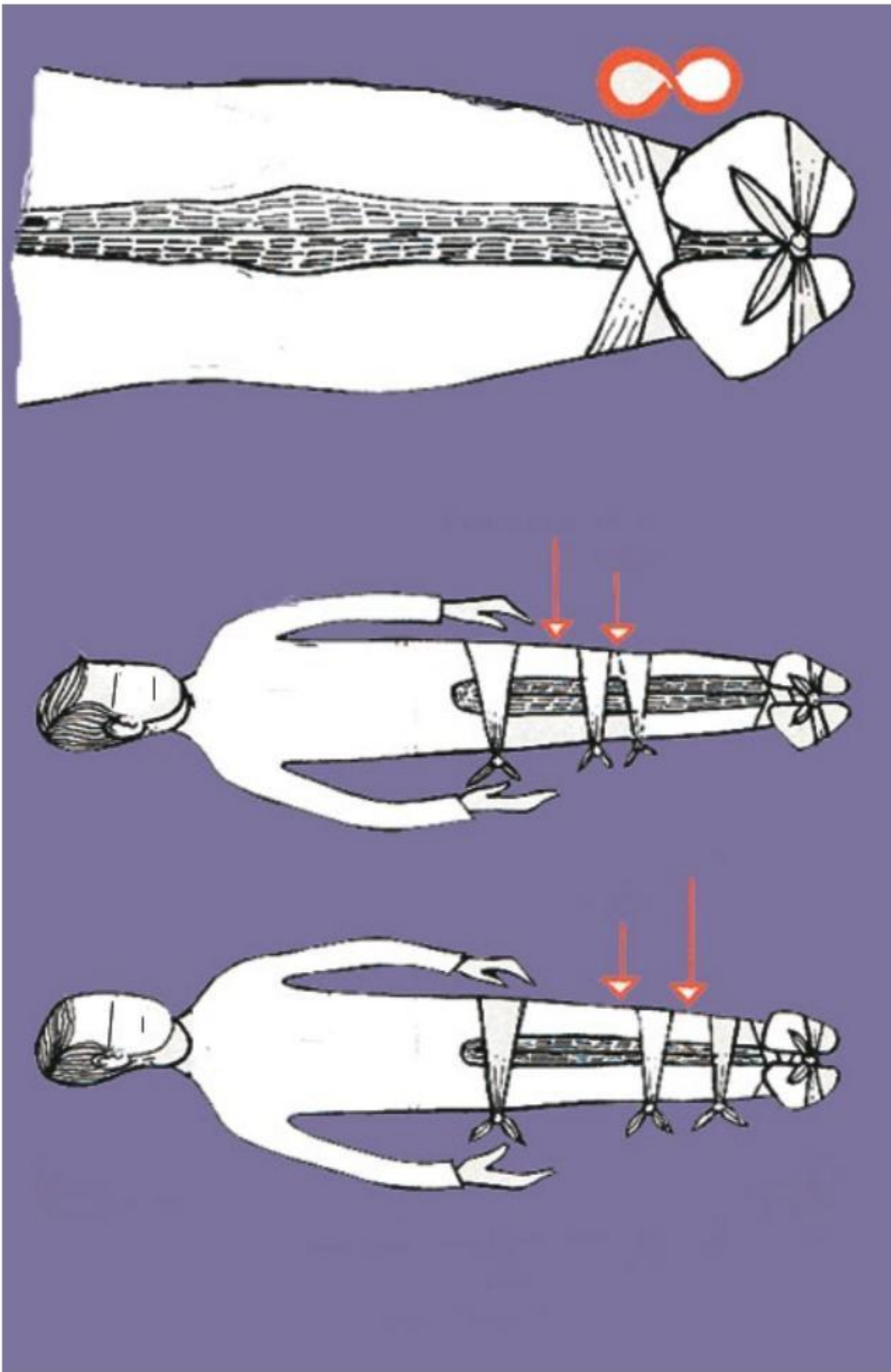
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Fractures to the arm

If a person has fallen and complains of a pain in the arm and holds it tightly to the chest, it may be broken. The treatment of the fracture is determined by the position of the break. Great care needs to be taken with any fracture as the break may cause internal damage to blood vessels. This is particularly important with fractures in the elbow area. Any treatment given is only to aid the comfort of the patient, until transport to expert medical assistance is organised.

The triangular bandage is used as shown. Move slowly and let the patient move injured arm into the fracture sling. The injured person knows best where it hurts - be gentle!



Fractures to the legs

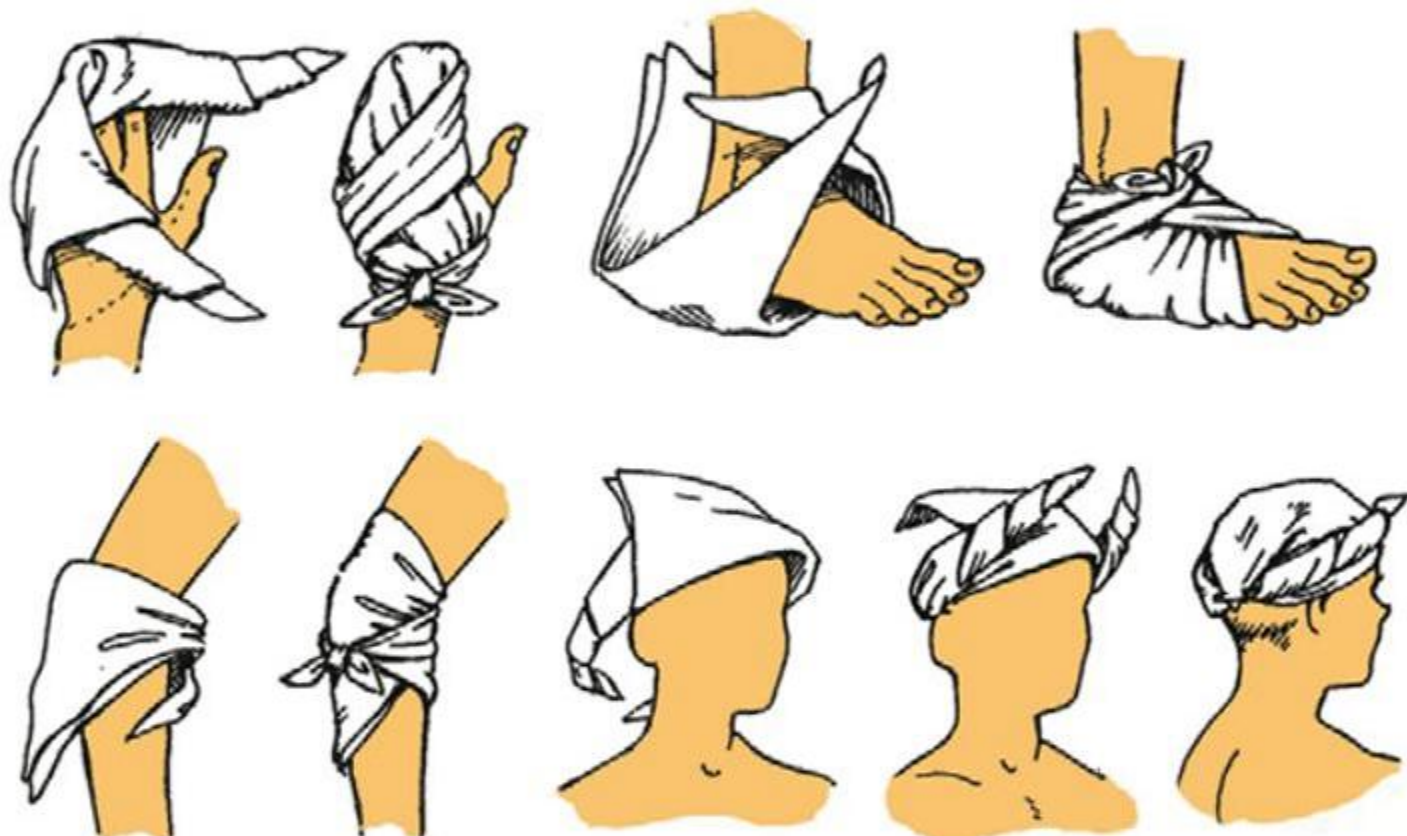
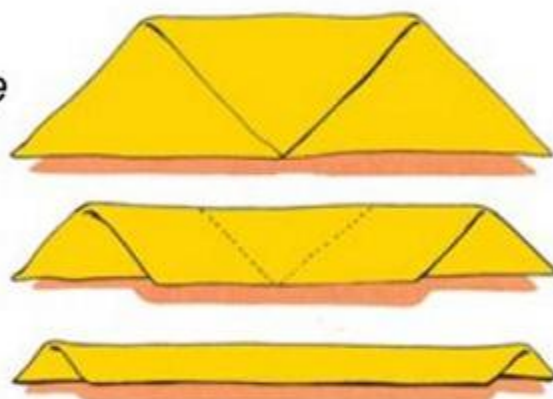
Fractures to the legs normally result from a fall or a bad twisting of the limb. The limb need to be immobilised for comfort and to prevent further damage. This is best done by strapping it to the good leg. It is important to pad between the legs for comfort. In all cases secure the feet, using a bandage tied in a figure of eight. One bandage is used to secure the hips. Then depending on where the fracture is in relation to the knee, bandages are applied as shown. For added security you can apply a splint to prevent any movement of the limb. Be careful, gentle and aware that any sudden or unnecessary movement will cause pain and may cause further internal injuries to blood vessels and nerves.

The triangular bandage or a Scout neckerchief

The triangular bandage, or a scout neckerchief, is an extremely versatile bandage and can be used in many situations. It can also be folded down to form a bandage or rolled into a doughnut shape to protect exposed and tender wounds. In all cases finish off your bandage with a reef knot tied away from the affected area.

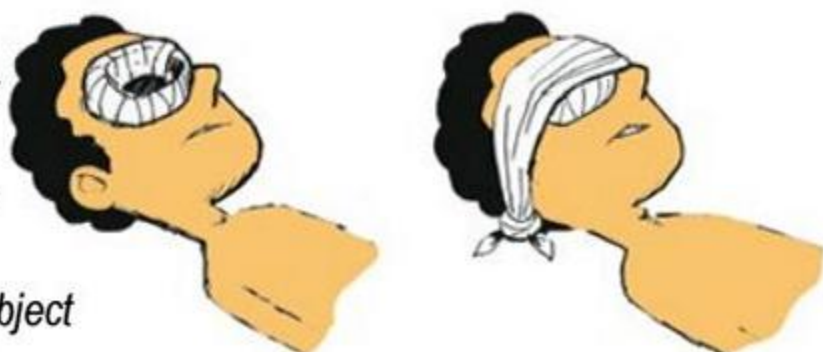


The triangular bandage can be folded down as shown to create a number of different sized bandages



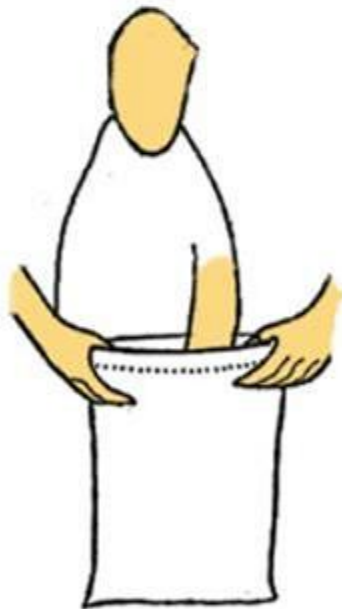
Create a 'doughnut' bandage by rolling the bandage as shown.

This bandage is used to prevent further damage to a wound, especially if an object such as a piece of metal or glass is still stuck in the wound. One or two 'doughnuts' can be used to protect the object that is protruding from the wound, so a dressing can be applied.



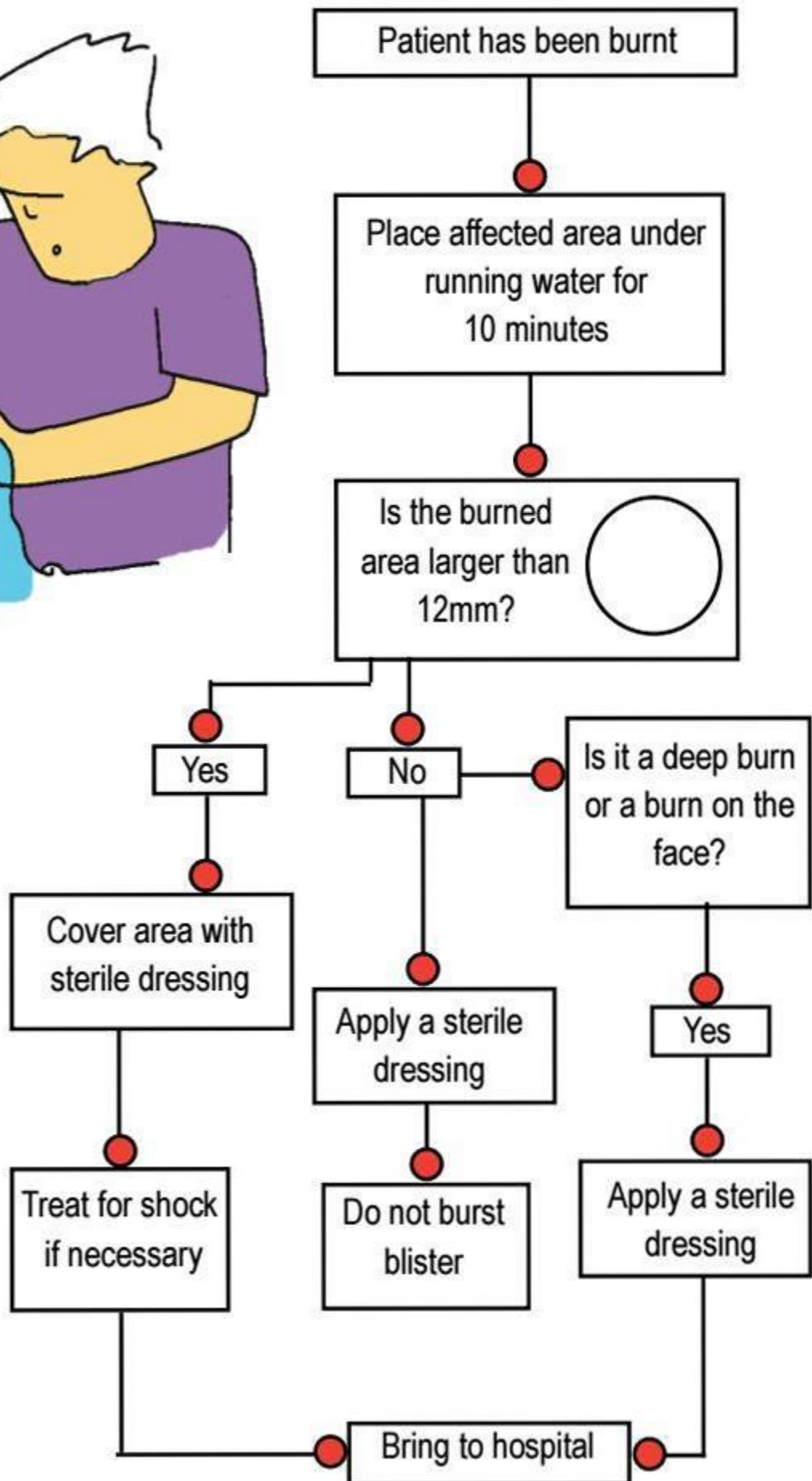
Burns and Scalds

Burns can be caused by hot objects, chemical substances and electrical contact. Burns caused by hot liquids are called scalds. Most burns and scalds result in an immediate reaction by the patient - dropping a match or hot pot etc. so before it is possible to treat the patient make the situation safe - put out fire, disconnect the electrical appliance or turn off the cooker.



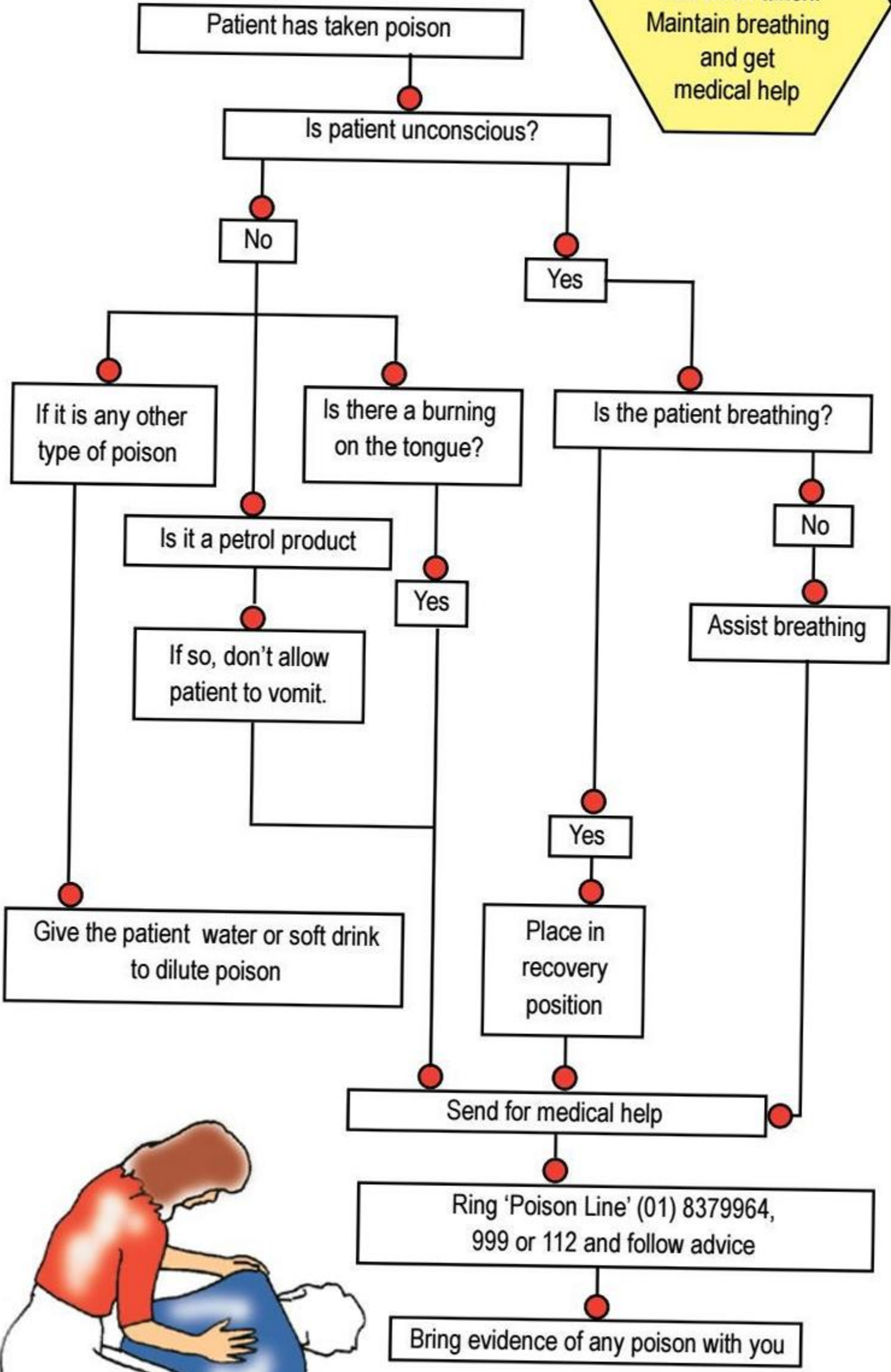
Cover burned area with a sterile dressing such as a clean pillow case. You can also cover the burn with cling film.

Your aim is to
make the situation safe
Place the burned area
under running water
Cover the burned area
and get medical
help.



Poisoning

Your aim is to find out what poison has been taken. Maintain breathing and get medical help



Hypothermia

Your aim is to shelter and restore the core body temperature (37 degrees) of the patient. Get medical advise if necessary.



Signs of onset of hypothermia
 Mood change
 Uncharacteristic actions
 Slurred speech
 Complaining of being cold
 Shivering
 Staggering and stumbling in a drunken manner

You think patient is suffering from hypothermia (exposure)

Is the patient unconscious?

No

Yes

Is the patient breathing?

Yes

No

Insulate from ground and heat loss

Assist breathing

If the patient responds

If no response

Start core body rewarming process

Get immediate help and evacuate to hospital

Is the patient shivering or showing early signs of hypothermia?

Sit the patient down in sheltered position and rewarm core body slowly

Evacuate when warm

Consult with doctor on return to safety

EMERGENCIES

Common Ailments

Cuts and scratches

Minor cuts and scratches need to be treated immediately to prevent infection, particularly when camping. Always start by cleaning your own hands. Next, clean the skin around the wound thoroughly, then the wound itself, using a mild mix of antiseptic and water. Apply a dressing to the wound.



Nose bleeds

Pinch the nose just below the hard part and at the same time keep the head forward over a basin or bowl. This should be done for at least 10 minutes. Tell patient not to blow nose for the next few hours. If bleeding does not stop seek medical help.



Splinters

Remove splinters with a tweezers if possible. If the splinter is small it can be eased out using a sterilized pin (sterilise by burning pin until red hot or boiling it for 3 minutes). When removed, clean area with antiseptic fluid. If the splinter is deeply embedded in the skin, and impossible to remove, infection can set in, so seek medical advise.



Sunburn

Prevention is the best treatment. However if sunburn occurs:-
Rest the patient in the shade.
Give the patient cold fluids to drink.
In mild cases, calamine lotion may have a soothing effect.
If sunburn is severe, seek medical help.





Stings and bites

In the case of a sting, and it can be seen in the skin, then remove it with a tweezers. Treat area with a antihistamine cream or with antiseptic.

If the sting is in the mouth, throat or ear, then seek medical help, as swelling in these parts may be dangerous. Insect bites should be treated by cleaning the area with antiseptic and applying an antihistamine cream to prevent itching.

Choking



Heimlich
Manoeuvre



A piece of food or some other substance can easily become stuck in the airway causing choking. Choking patients may have as little as 7 minutes from time of obstruction to death, so quick action is required to restore breathing.

Try to remove the obstruction by slapping the patient hard between the shoulder blades. If this is unsuccessful put your arms around the patient's waist and making a fist with one hand, place the thumb side

halfway between the navel and the rib cage. Hold your fist with the other hand and give 3-4 quick strong pulls - upwards towards you. Use your hand to create the pressure; do not squeeze with your arms. If the patient collapses, continue procedure as shown. If the patient vomits, clear their mouth to prevent further choking. Place in recovery position.

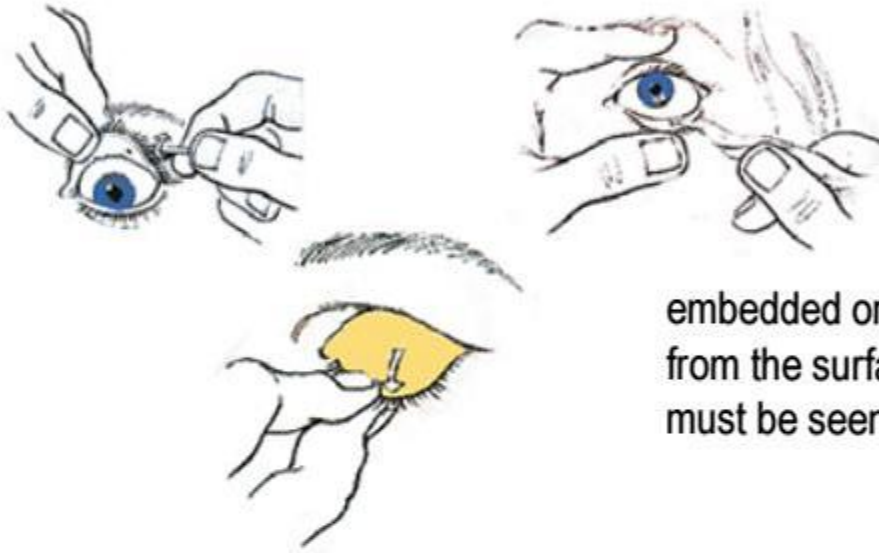


Something in eye

Warn the patient not to rub the eye.

While the patient looks up, gently draw the lower lid down and out. If particle is seen on lower lid it can be removed with a moistened cotton bud or the corner of a clean handkerchief.

If the particle is thought to be under the upper lid, then, while the patient looks down, grasp the upper lid and draw it down and out over the lower lid as this action may wipe away any foreign particle.



Wash eye with water when finished, or if the above methods are unsuccessful. Do not try to remove any particle that appears to be

embedded or cannot be wiped away easily from the surface of the eye. These cases must be seen by a doctor.

Footcare

Blisters are most likely to form on the feet and ankles if boots are too tight, new, stiff or ill - fitting in any way. At the first sign of discomfort, a dressing should be applied to the area to prevent a blister from forming.

If it is too late, the blister needs to be assessed. If you are on camp, it is best to cover the blister with a sterile dressing and wait for nature to do its job. However, if you are hiking across open countryside it may be better to burst the blister with a sterile needle

(the movement of the foot will cause it to burst shortly anyway) and cover with a sterile dressing.

Blisters can be avoided by wearing two pairs of socks or by placing a



folded plastic bag between the boot and your sock. This transfers the possible friction to the plastic bag, rather than to your skin.

Personal Conditions

EMERGENCIES

Asthma

Asthma is a difficulty in breathing which is caused by a spasm in the muscles that control the air tubes to the lungs. It can be caused by many factors, such as stress, physical exertion, dust and pollen. People who suffer from asthma will have a difficulty in breathing out and will appear to be in distress and gasping for air.

Most people who suffer from asthma are aware of their condition and will often be able to control the asthma attack with inhalers and drugs.

If you are confronted with the condition do the following :-

- Stop what you are doing.
- Reassure the patient.
- Make sure that the patient can find the inhaler or prescribed drugs to treat the condition.
- Stay calm, confident and unexcited.

If the person suffering the attack, does not have an inhaler or drugs to control it, or, if after taking the drugs, there is no improvement in the condition in a short period of time, then seek immediate medical assistance.

Diabetes

Diabetes is a condition which affects the way in which the body converts glucose into energy. Natural insulin produced by our bodies normally does this job. However people who suffer from diabetes have to inject insulin into their bodies to do this. People who suffer from diabetes know how to deal with their condition, and if treated correctly they can live normal lives. They may inject themselves with insulin perhaps twice a day - once in the morning and also in the evening. As well as taking insulin they must also control their diet. Therefore it is most important that meals and breaks during the day, are taken at set and regular times. A common problem encountered is a 'hypo' or low blood count. The sugar levels run low and will result in the person becoming hungry, dizzy, and confused, or even going into an unconscious state. If the patient is awake give them something sweet - a piece of chocolate, a sweet or a drink of full sugar drinks such as 7 up or Coke.

Within a minute or two the patient will come around. They should then be given a meal or snack to recover their sugar levels. If the patient does not recover get medical help immediately.

Do not attempt to give food or drink to a person who is unconscious.

Epilepsy

Epilepsy is a condition in which the sufferer can experience a seizure, brought on by increased activity in the brain, which results in an interference with messages in the brain.

People who suffer with epilepsy are normally aware of their condition and will control it by prescribed drugs which allow them to lead normal lives.

Problems can sometimes happen when the drug routine is not maintained.

A seizure can happen at anytime, sometimes a patient may feel a seizure coming on, however there may not be any noticeable signs

If seizure occurs do the following:-

Stay calm.

Lay the patient down and prevent the patient from hurting themselves from falling or rolling by holding the patient carefully.

Loosen all tight clothing.

Make sure the patient can breathe. Seizures normally don't last for very long. When the seizure has ceased, reassure the patient and give them something to drink.

The patient may be confused and will often have a need to sleep after a seizure. If in the open, erect a shelter or tent and let the patient sleep for a short while before making for safety.

The patient will often know how to deal with the situation. However, during the seizure your role is to ensure that the patient does not injure themselves and is reassured and comforted after the ordeal.



Other Disabilities

People can suffer from many different types of disabilities, but this should not stop their enjoyment of Scouting. People with such conditions will be aware of the treatment and care that they require, on a regular basis. If you know of such people in your Patrol talk to them about their condition and the special needs

they may have, so that you can help if required.

If you suffer from a disability yourself you should also make sure that the members of your Patrol, in particular your Patrol Leader and Scout Leader, are aware of your needs and treatment, so that they can assist you if required.

Lifting and Carrying

An injured person should only be moved if in immediate danger - from weather conditions or patient is in an unsafe place.

If the person is conscious and only slightly injured then simple carrying methods can be used, such as the shoulder support or the piggy back. If the person has an injury, that prevents movement, or is unconscious then you will have to use the fireman's lift or seek help so that you can use stretchers.

Moving an injured person by any method will be a strain. Be careful when lifting the person or moving over rough



ground, so that you do not injure yourself, or fall, perhaps causing further injury, pain and discomfort to the patient.

EMERGENCIES



Shoulder Lift



Piggy back



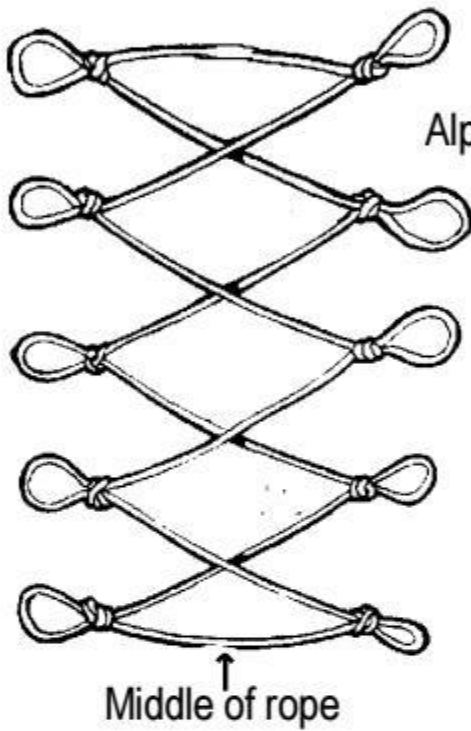
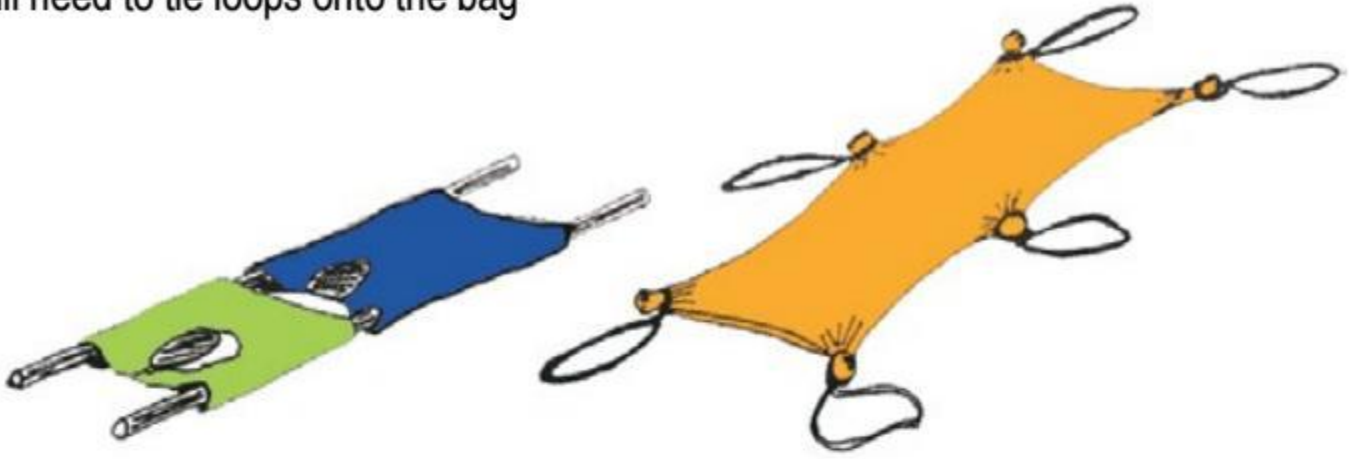
Fireman's Lift



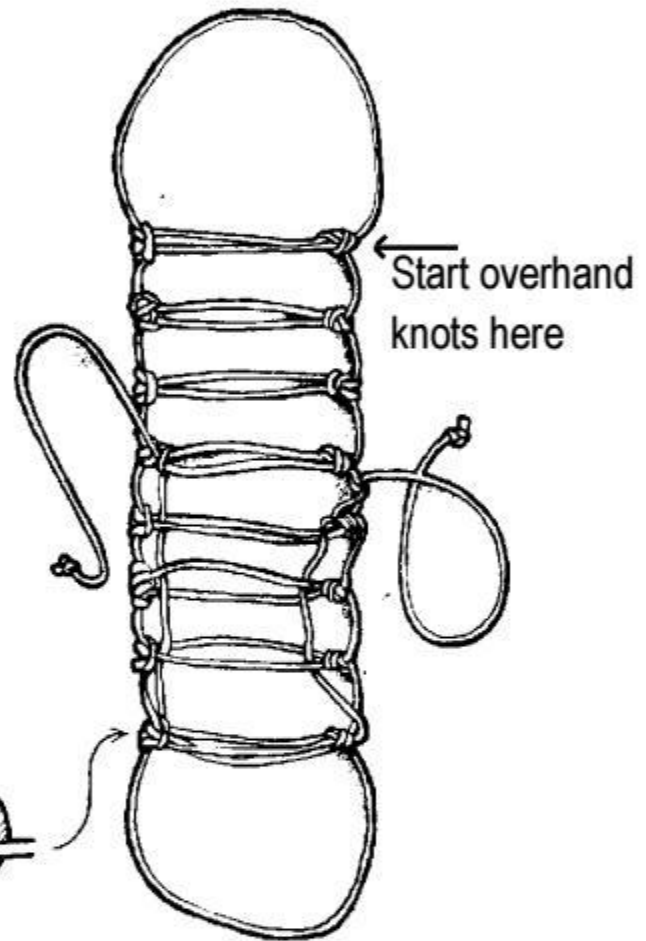
Four Hand Lift

Stretchers can be made by turning clothing inside out and placing poles up the arms. Survival/bivvy bags make excellent stretchers. They can be difficult to carry so you will need to tie loops onto the bag

or support it underneath by rope loops or belts. Handles are secured to the bag using a stone wrapped in the plastic to prevent ripping and tearing.



Alpine Basket

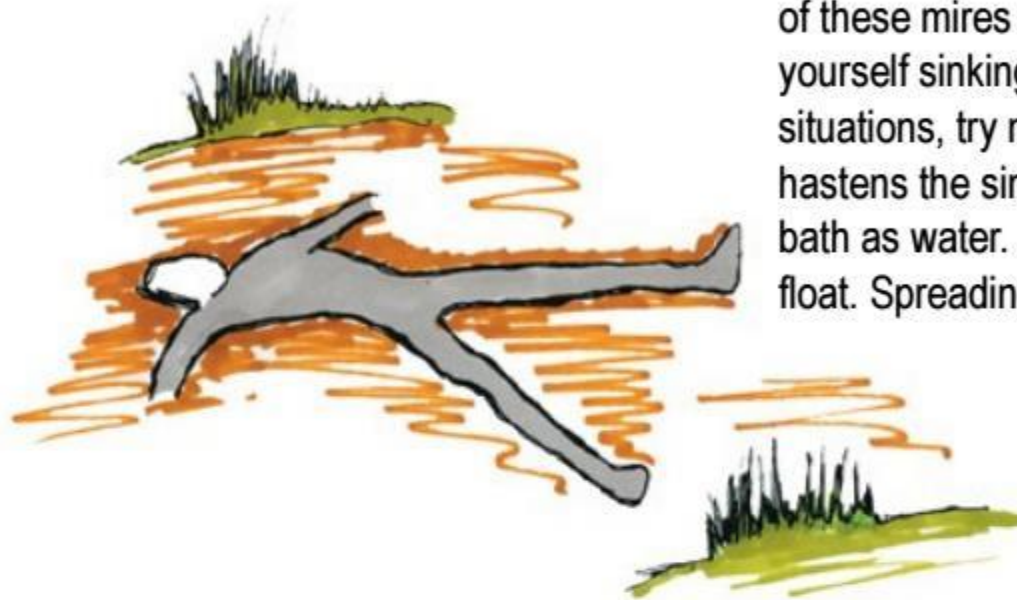


Pigott Stretcher

There are two kinds of emergency rope stretchers- the Alpine basket and the Pigott stretcher. Both stretchers require a climbing rope and a large number of people to carry them successfully. The preference would be towards the bivvy bag stretcher.



Rescue Techniques



As you travel across wild countryside you may come across boggy ground. Whilst most of this ground can be crossed with ease, great care is needed. Sometimes what appears safe can in fact be bog holes, 'quick sand' and mire. If you are unfortunate enough to walk into one of these mires you will suddenly find yourself sinking very quickly. As with most situations, try not to panic as this only hastens the sinking. Think of this mud bath as water. Lie on your back and try to float. Spreading your weight in this way

will prevent you from sinking. Gradually, move your body towards more solid ground and pull yourself free.



Helping someone trapped in a bog or swamp

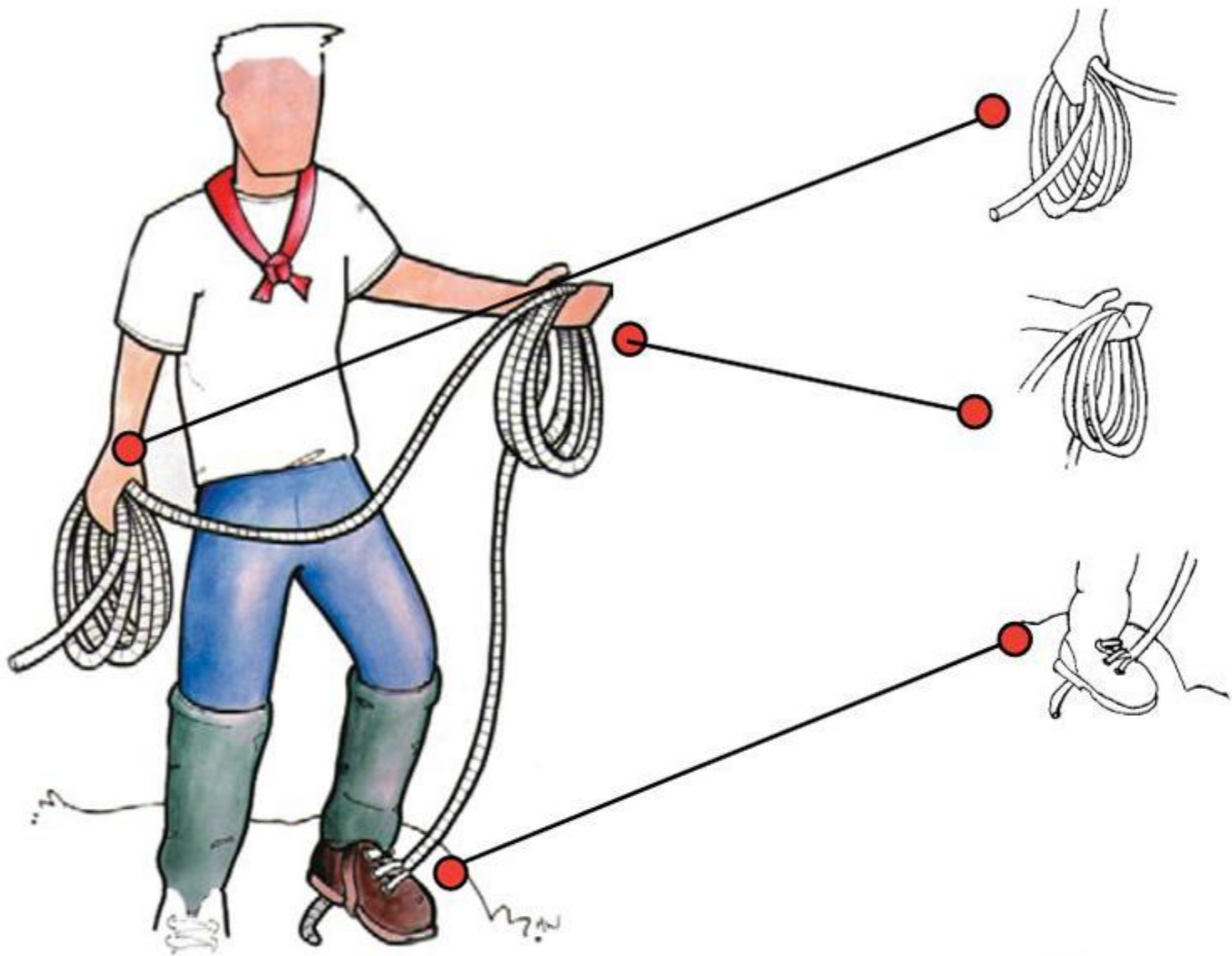
The technique used to rescue someone who is trapped in a bog, swamp or has fallen through ice is the same as for someone who has fallen into water. In the first instance the rescuer does not enter the bog, or danger area, to reach the person. Find something - such as a stave, stick, coat or rope, that can be thrown to the person and you can pull them free.

Reassure the person that you are making progress, and that it will help greatly "if we both stay calm".

If the trapped person is carrying a rucksack, or other equipment, this may be used as a flotation device to aid the rescue.

Branches, logs and indeed other rucksacks can also be used to act as

platforms to reach those in difficulties. Beware of the extra weight, pulling someone from a bog is a lot harder than pulling someone through water. When the person has been brought to safety, remove wet clothes, replaced them with dry clothes and warm the patient. Make a fire if possible or provide a warm drink. The patient will be stunned by the experience and perhaps suffer from shock. Even in summer the mire and bog will be cold and will quickly cool the body so exposure can be a real threat. Find a safer route to your destination. A stave is a great tool for testing ground for stability before crossing.



Line throwing

Line throwing is not as straightforward as you might think! Practice, from time to time, to improve distances and accuracy of throw. Coil the rope carefully to prevent snagging when throwing. Don't forget to keep a foot on the end of the rope, better still secure the end of the rope before throwing.

Rescue ropes and lines

Whenever you travel in wild countryside, a safety rope or webbing line should be part of your equipment. It has many uses, and in rescue situations it can prove a valuable tool for reaching those in difficulties. It can also assist when crossing rivers and climbing over difficult terrain, as a support for a lean-to shelter or for the construction of a stretcher.

Rescue services

Many mountain and general rescue services exist around the country. These teams are comprised of volunteers who agree to help and assist other people who get into trouble on land or sea. These services should only be called out in a real emergency. Rescue services are activated by calling the emergency services phone number - 999 and 112

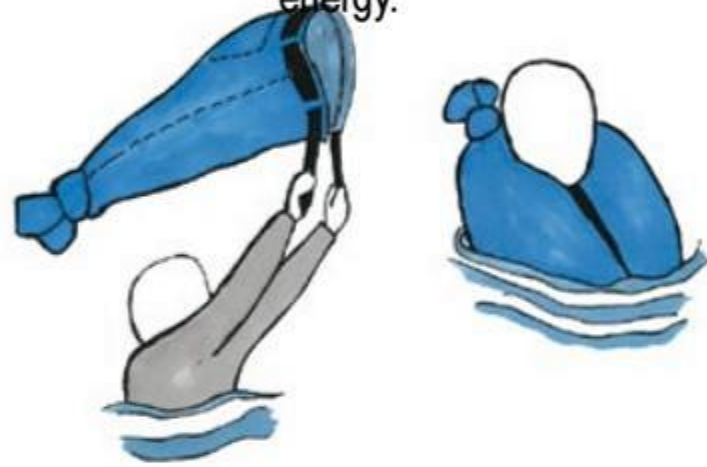


Survival in Water



Drown proofing. Raise your head and take a breath. Lower your face into the water and press down your arms in water. As you breathe out rise up and take another breath. This method conserves energy. Threading water keeps your head out of the water but uses more energy.

In most water emergencies it is more important that you stay afloat for a long period of time rather than swim to safety.



Items of clothing, such as rain jackets and trousers, can be turned into buoyancy aids.

If you are wearing a lifejacket use the Heat Escape Lessening Position (H.E.L.P.), shown above, to prevent heat loss and the onset of hypothermia. This position helps to keep the head, and core body area covered. Water is always cold and will quickly draw away the heat from your body. Don't flap about and use up valuable energy which is needed to provide heat to your body.

If a number of people find themselves in the same unfortunate position, huddle together for security and warmth. Place the smallest member of group in the middle.




Always stay with the overturned craft; as it will provide buoyancy and is easier to spot than individuals in the water.

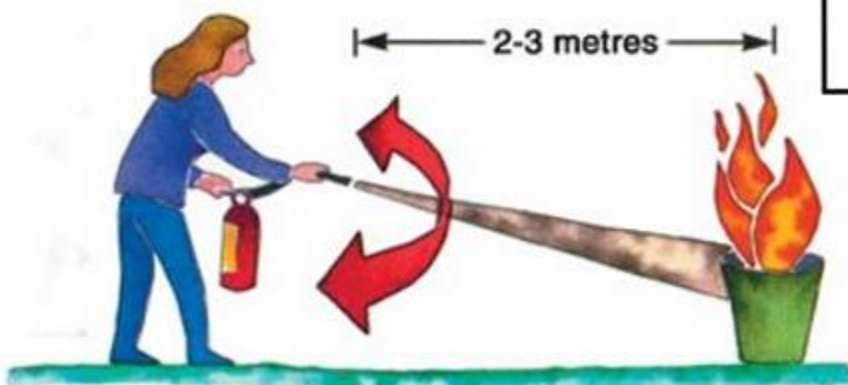
Fires

Fire is always dangerous. Without warning you can find yourself in a life threatening situation. Your clothes can catch fire, a chip pan can flare up, or a candle can fall on a carpet and set your home alight. The golden rule, as in all emergencies is to keep calm, assess the situation quickly and get help. Under no circumstances try to be the hero. In a house fire, raise the alarm, get everyone out and stay out, until the fire brigade arrives. You should make an escape plan for your family home and the Scout Den.

Smoke



Smoke and toxic gases rather than flames are the real killers and they can quickly fill a room or house. If you are caught in such a situation then crawl on the floor to safety. The smoke and gases will rise to the ceiling first, before dropping towards the ground and this can provide a 'safety zone' and lifesaving opportunity for you to get out.



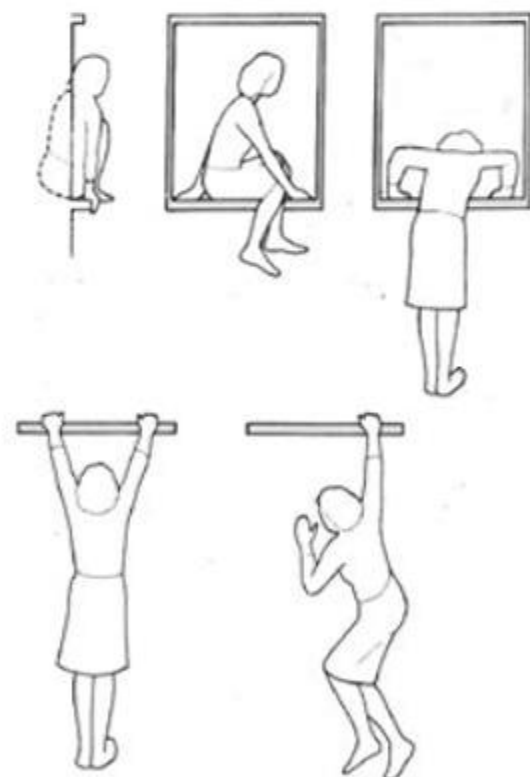
If your clothes catch fire or if a friend's clothes catch fire remember the catch phrase -

Stop, Drop and Roll.

Stop the victim moving as this will fan the flames, Drop to the ground and roll over and over until flames are out - treat burns.



If you have to escape from a building do so only when instructed by the fire brigade or if the situation is life threatening. If possible use blankets, ropes etc, to make a line. If you must drop from a height, do so carefully as shown and push yourself away from the building as you fall. Break your fall by bending your knees and rolling as you reach the ground.



If you have to use a fire extinguisher remember this little catch phrase PASS. Pull the pin. Aim low. Squeeze the handle and Sweep from side to side.

Survival

Despite the most careful planning an emergency can occur on any adventure into wild countryside. You may find it difficult to navigate through driving rain or dense fog, or someone may get injured. Your survival will depend on how well you are prepared, the equipment you have in your pack, and how you approach the problem.

If you get lost

- Stay together as a group
- Sit down and be calm
- Carefully work out your approx. position from the map
- If you are reasonably sure of your position, take a bearing and trust your compass
- If travelling in dense fog or darkness, use the group as markers on the compass bearing to ensure an accurate line of travel

If you are caught in dense fog or darkness, and do not feel you have the confidence to travel to safety, then stay put for the night or until the fog lifts

If the situation is such that you decide to stay put, it is necessary to do a number of things to ensure your survival.

- Make sure every member of the group is safe
- Render first aid as required
- Find or erect a shelter
- Keep warm



- Alert rescuers
- Send for help

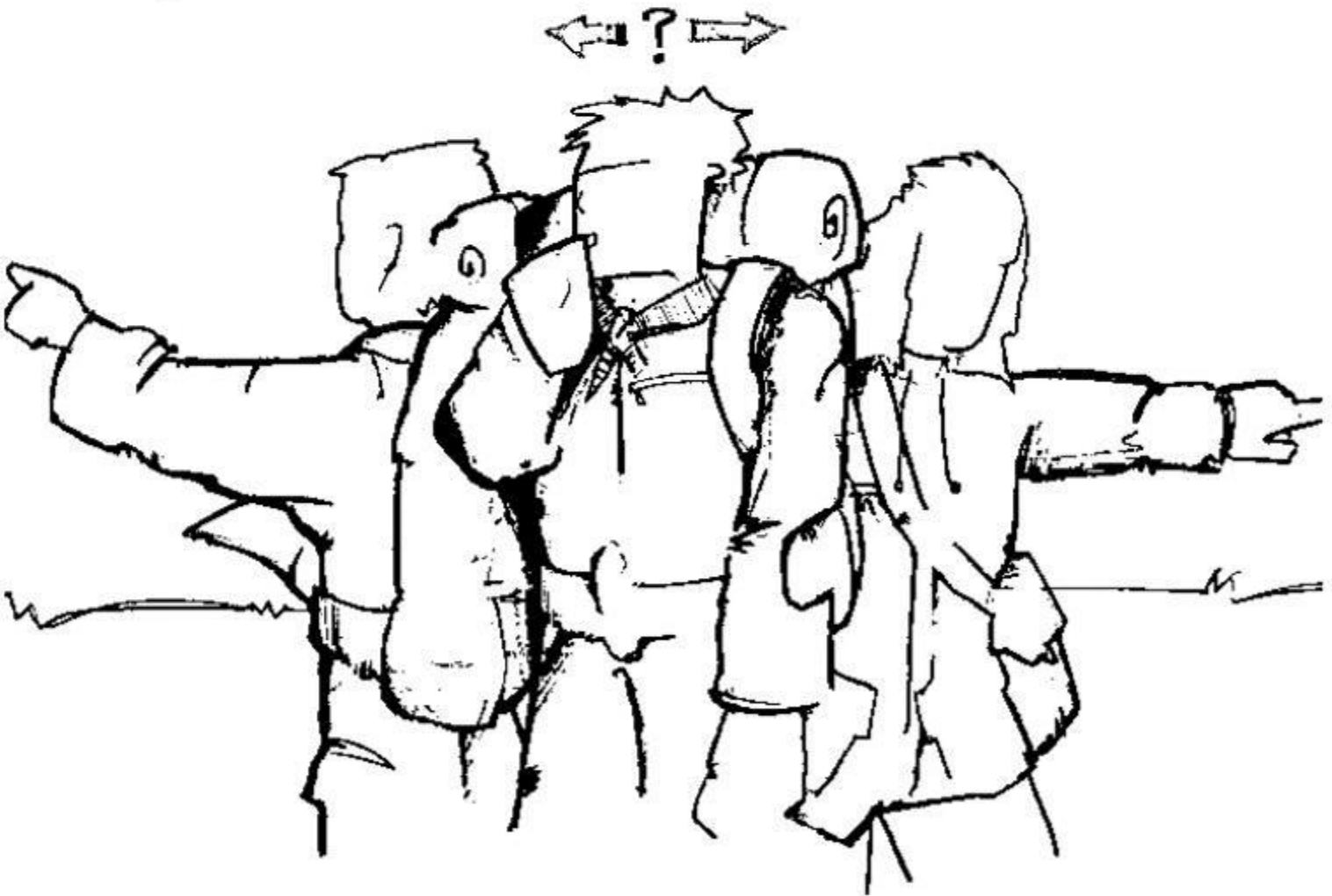
In such situations, the likelihood is that weather conditions will be severe. Every year people die, even with the right equipment, because they fail to realise the potentially lethal mix of COLD, WET and WIND. Shelter, warmth and dry clothing are therefore critical considerations. Hypothermia (exposure) can quickly take hold in wet windy and cold conditions, so beware. The safety of the group is paramount, so decisions will have to be taken as a group, taking into account all those factors that make up your situation. If shelter, such as a rock outcrop, or forest, is nearby, then head for that location. If you have a tent you might consider setting up camp where you stand. However, weather conditions may make it unwise to erect a tent in an exposed position.

Survival bags can be used for quick shelter from the elements, however, for long term shelter the condensation generated within the bag can be worse than the rain falling on the outside. A bivvy type shelter built in a sheltered area such as a forest or rock outcrop is a better long term option. Carry a large sheet of plastic with the group gear. If the situation permits, it is best to seek nearby natural cover to set up base, as camping in exposed locations in severe weather may add to your difficulties. This option should only be considered if it is possible to reach such a location in a short time span and without undue hardship or endangerment for the group- remember the Cold, Wet, Wind combination. If a members of the group are injured, to such an extent that they are immobile it is better to erect a tent where you stand, and stay put until help arrives.

Be prepared

Everybody on the trip should have the correct equipment - raingear, spare clothes, food, first aid kit, etc., - this equipment is carried in our packs for emergencies. Most of the time we will not use this extra gear, however when such a situation occurs, **YOU ARE PREPARED!**

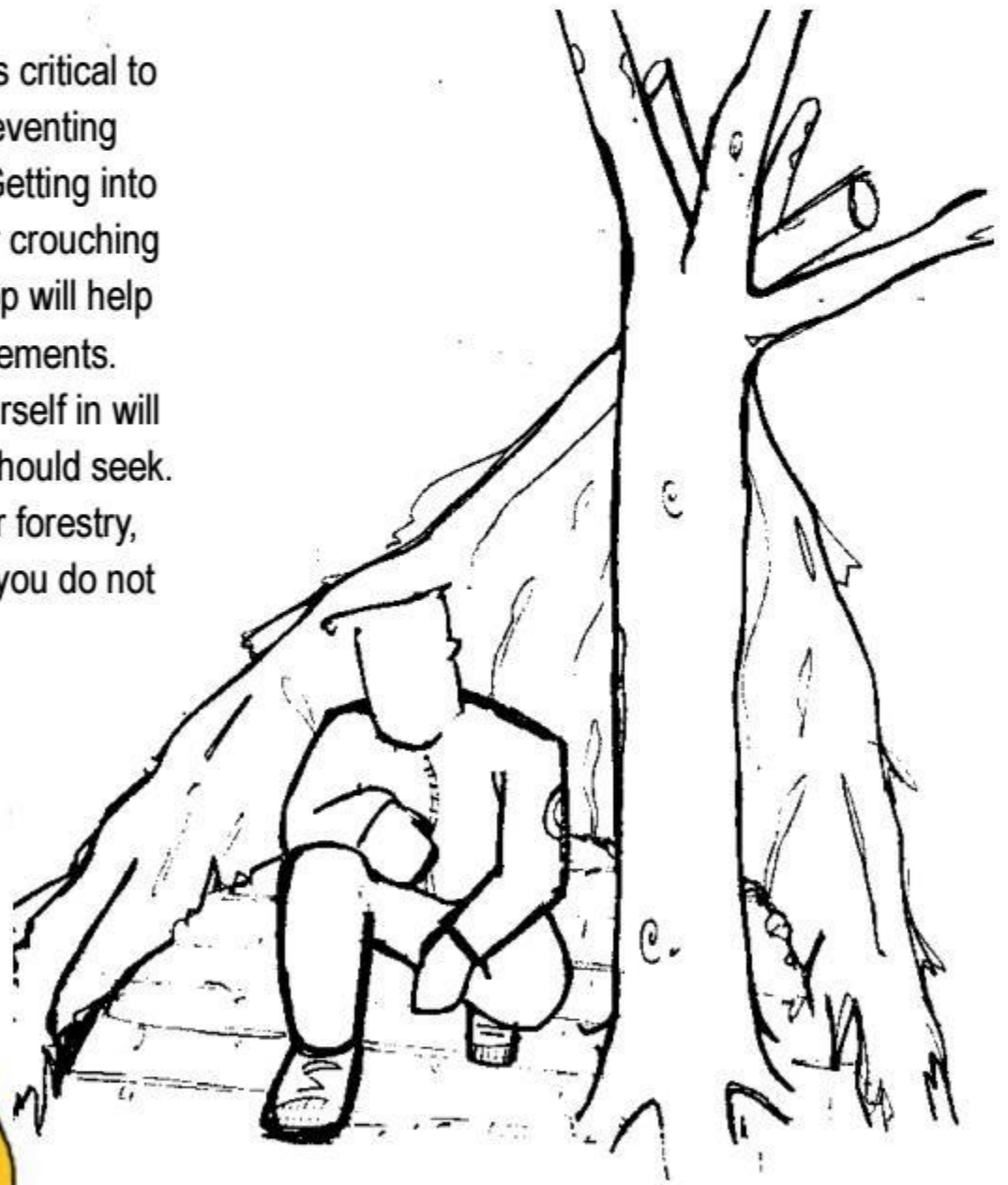
Having respect for the weather and the countryside or mountain range you are crossing will lessen the chance of a survival situation arising. Training for such situations will give you the confidence and knowledge to cope with any situation quickly. Practice, in safe conditions, erecting shelters, carrying and lifting patient, signalling for help etc., so that, if you are caught out in such a situation you will be able to adapt to your circumstances and survive your ordeal.



Shelter

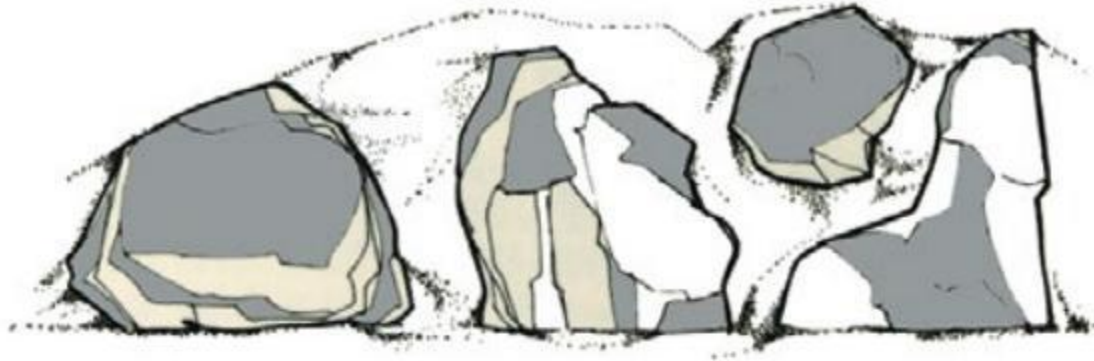


Shelter from the elements is critical to maintaining warmth and preventing the onset of hypothermia. Getting into a survival bag and sitting or crouching behind a rock or bog outcrop will help to lessen the force of the elements. The conditions you find yourself in will determine the shelter you should seek. If possible make for trees or forestry, providing that in doing so, you do not put yourself at further risk.



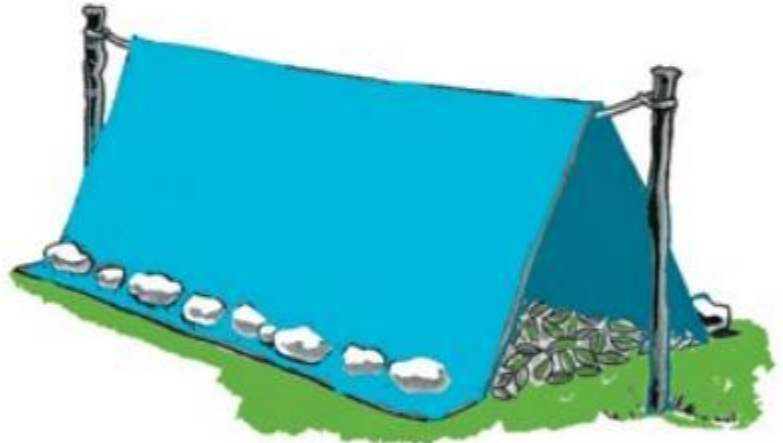
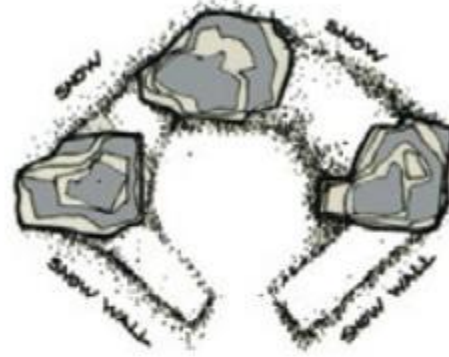
If you are caught in extreme weather conditions in open countryside, without immediate shelter, you could get into your bivvy bag and sit it out. Put on extra clothing to keep warm and leave a wide opening for air to circulate.

Boulder snow shelter



In winter conditions, seek shelter around the spreading boughs of trees or rock outcrops. You can construct a shelter with a bivvy sheet and snow walls or use rocks and boulders as the main protection and build snow walls between them.

Rucksacks, sticks and skis, can be used to support the roof. Insulate yourself, from the ground, by sitting on rucksacks or insulated mats. Your priority is to get under shelter as quickly as possible, rather than construct fancy snowholes. In general, go for the simplest option first. If you are unlikely to be rescued for some time then consider a more permanent structure. Do not fully close up any snow shelter - allow air to get in easily. You may have to keep an eye on the air hole or entrance to prevent snow build up. Place a marker or flag outside your shelter to signal your location to rescuers.

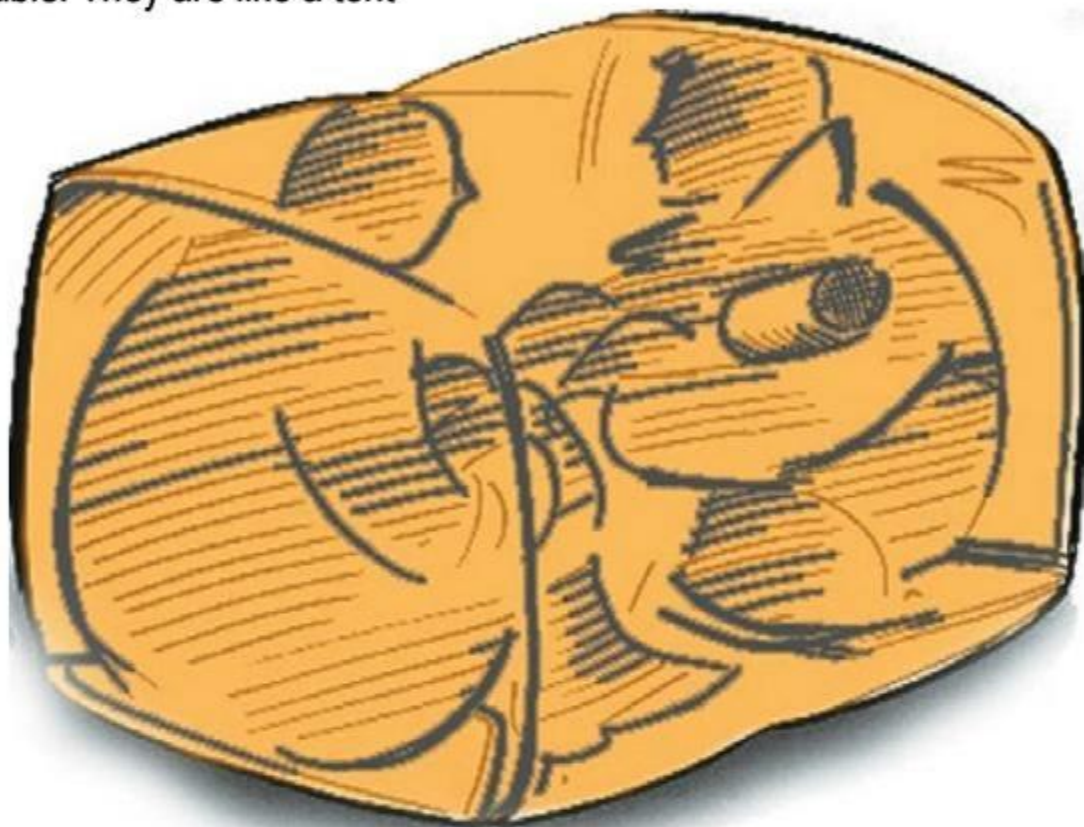


Survival Tents

If you are caught out in bad weather - driving wind, rain or blizzard, or you wish to get under cover for a short period to read your map or have your lunch, special storm/survival shelters are available. They are like a tent

without poles! You climb inside and your body is used to keep the tent shape. They are a useful bit of kit to have. They are very light and can easily be carried by one of the team.

In an emergency situation they are ideal, as the patient can quickly be placed under cover until help arrives.



Rescue Card

An incident has taken place and we need help.

Location (grid reference)

Patient's name

Number in party

Description of location

Injuries

Time of incident

What we intend to do.

We will stay put

We will evacuate to

We can overnight safely

Type of incident