

HOLOS

HEALTHCARE & TRAINING LTD

NEWSLETTER



0800 007 5248

AND THIS STUFF WORKS!!!

I had to send you a rather dramatic "thank you" for the training course I did with you in March in Exeter with the acupuncture group.

The day was very comprehensive and full – at the end you apologised for the intensity, but said you had one more important thing to teach us. Thank God you did!

I volunteered to be your "victim" and you asked me to open my hand, whereupon you placed a fake plastic gash in my palm, with a piece of glass sticking out of it. You proceeded to perform first aid for the situation in detail.

Five days later, I decided I needed a drink and pulled a glass bottle of juice out of the fridge. When the cap wouldn't screw off, I tried harder. Little did I know that the bottle was faulty; the neck sheared off and the force I was applying pushed the glass very deeply into both of my hands- one EXACTLY in the place where you placed the fake gash. I knew right away I was in trouble.

HOLOS HELPS SAVE LIVES

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We recently heard about an incident involving one of Sam's students following a recent 4-day FAW course for Croydon QDI at Leon House. Following a phone discussion with Judi, Louise SHADBOLT forwarded this letter and we have decided to include most of it, since it truly captures the emotions of this situation.

Dear Judi

Firstly let me thank you so very much for taking the time to talk to me. I felt you absolutely understood all the crazy things going on in my head.....you made me feel like you were a friend I'd known for years.

Secondly, I'll just repeat to you my deepest thanks to Sam for her wonderful training which was direct, honest and fun.....

I passed the 4-day FAW course on 30th June 2008 and on 15th July I was watching one of my sons at his Karate Class in South Norwood, when one of the adult students (aged 64) dropped to the floor literally like a felled tree. He fell partly onto a boy but still hit the floor with the most awful sound. As I threw down my keys and ran, I thought of hundreds of things in one second (or so it seemed) from "Thank God for Sam" to "Oh F__k!" and "He's having a fit" (because he was slightly jerking).

He was face down, blue/purple, bleeding from a cut above his eye, slightly jerking followed by no sound at all. My friend was already calling 999 and I can still hear the student's wife screaming his name over and over. I called out to someone to get everyone out of the hall. I turned him on his back and started compressions. He had blood all over his face, I did have a face shield on my keyring.

As the thought went through my mind to shout to someone for my keys, a face shield dropped onto his chest as if it had fallen from the ceiling. It wasn't mine, and I still haven't found out where it came from – how weird! I'm crying as I'm writing this, as I can still see his face- the colour of him, the awful gurgling (almost snoring) noise he made a few times.

My friend came back on the phone to the operator – I heard her saying "Yes, she's done that, please hurry up!". They told her to tell me not to do breaths – just compressions. Another woman appeared on the phone also, and she was shouting different instructions.

I tried to block her out and concentrate in my head (Safety – Response – ABC – 999 – CPR) – had I done everything right.

It seemed an age before the ambulance arrived, but apparently it was about 10 minutes. They asked me to carry on with compressions while they set up their equipment. They defibrillated him 4 times and finally got a pulse.

Silly things went through my head, like when they were cutting up the arms of his Karate suit (he was so proud of that suit) I was thinking "Hey, that's a £20 suit your ruining!"

When they got him to the hospital, he had another massive heart attack and they defibrillated him another 4 times. My friend and I went to see him the next day, he was in HDU, unconscious and hooked up to the National Grid! I felt terrible – "Had I done enough? Had I done it correctly?"

He was unconscious for 2 days, then came round and was confused and talking rubbish for another couple of days (his wife said, that was nothing new!). We went to see him 4 days later – he had a black eye and was very disorientated. However, 8 days after the event, we went back again and it was like he was 20 years younger – doing his dancing and singing around the hospital bed. It was like a miracle

Looking back it was horrific and surreal and I felt the immense pressure of this man's life being my responsibility. It could so easily have had a terrible end. I think it would have been torture for me if it had happened and I hadn't known what to do!

Everyone should do this course and revise it as often as possible. I do hope some of this will be of use to you. Thanks to all at Holos. With Love, Louise.

Well done Louise and Sam

www.holoshealthcare.co.uk

The survival rate for an out-of-hospital cardiac arrest in London in 2001 was between 1 and 2% & yet Seattle had a 25% rate. Would you know what to do this was your colleague / family member / friend /?

AND THIS STUFF WORKS!!! (Contd.)

I rushed towards the sink, and then suddenly "the training" took over.

I grabbed a tea towel and bound both hands tightly, elbowed my way out of the door, and went down the lane for help. Fortunately a neighbour was out in the garden and dropped everything to rush me to hospital.

The first hospital took one look and said they couldn't deal with it – and put me in two "classic" arm slings. I couldn't move my fingers at this point, and wondered about my acupuncture career!

Anyway, 3 doctors and 5 x-rays later, I had both hands stitched up and all was well. The gashes were extremely deep, and I am thankful to you for your training. If I had passed out, I could have possibly bled to death. How blessed was I to have received your training just days before?!!!

Thanks again for the great work you do, and best wishes to you and yours for 2009.

Amy Louise Ralston.



ICE

Email from Philip Waters: Apparently this is a standard procedure all paramedics follow at the scene of an accident when they come across your cell phone. **ICE - 'In Case of Emergency'**

We all carry our mobile phones with names & numbers stored in its memory but nobody, other than ourselves, knows which of these numbers belong to our closest family or friends. If we were to be involved in an accident or were taken ill, the people attending us would have our mobile phone but wouldn't know whom to call.

The idea was thought up by a paramedic who found that when he went to accidents, there were always mobile phones with patients, but they didn't know which number to call. He therefore thought that it would be a good idea if there were a nationally recognized name for this purpose, hence ICE.

In an emergency situation, Emergency Service personnel would be able to quickly contact the right person by simply dialing the number you have stored as 'ICE.' For more than one contact name simply enter ICE1, ICE2 and ICE3 etc. A great idea that can make a difference!



Holos wins national contract to deliver BLS to acupuncturists

Holos has been awarded the contract to deliver interim Basic Life Support (BLS) refresher courses, together with a "Red Flag Warning Features" module to members of the British Acupuncture Council (BACc).

This is being organised through the Regional Support Groups, with feedback to date being excellent. For further information contact the local regional co-ordinator, or BACc direct.

Training First Aid to disabled Persons

We recently received the Association of First Aiders (AoFA) newsletter, which highlighted this question.

They stress that it is illegal to treat disabled people less favorably than non-disabled, which means that a participant cannot be refused to attend a

course merely because they are physically or mentally disabled. However, they go on to state that the training outcomes of the course should not be degraded or reduced.

Examples cited were of a person suffering from severe arthritis who may not be able to perform CPR from a kneeling position, although they can demonstrate this with a mannikin on the table. Should you fail the trainee – YES, because it is an unrealistic simulation as a person is unlikely to collapse on a table.

Another example was of a person with only one functioning arm; if they demonstrate effective CPR should you fail him / her keeping in mind the first aid manual states two arms, interlocking fingers etc. NO; this is not a fail situation as all you have done is allowed minor changes to the course to accommodate for their disability, and does not degrade the effectiveness of the procedure.

The employer also holds responsibility when selecting a suitable first aider to meet their statutory duty. For example it is unlikely that a wheelchair bound person would be able to respond to an incident on a building site due to the terrain.

Further information contact AoFA at www.aofa.org .

HOLOS HEALTHCARE AND TRAINING LIMITED

**HSE Approved to undertake First Aid at Work courses
INDIVIDUAL PLACES CAN BE BOOKED ON OUR OPEN**

1-DAY APPOINTED PERSON COURSES (AP) - COST £55 + VAT PER PERSON,

OPEN DATES	LONDON 1-DAY AP	BRIGHTON 1-DAY AP	BRISTOL 1-DAY AP	OXFORD 1-DAY AP
MAR 08	18 th	TBA	10 th	TBA
APR 08	15 th	TBA	29 th	TBA
MAY 08	13 th	TBA	27 th	TBA

OTHER COURSE DATES & VENUES AVAILABLE – PLEASE CONTACT.

**ALTERNATIVELY WE COULD HOLD A 1-DAY APPOINTED PERSON COURSE
ON-SITE AT YOUR PREMISES, AT OTHER, MUTUALLY CONVENIENT TIMES. FOR FURTHER DETAILS /
INDIVIDUAL OR GROUP BOOKINGS CONTACT**

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