THE LIFEGUARD

CANDIDATE MANUAL







1.4 TYPES OF CASUALTY

Casualties can be split into two groups.

- Responsive
- Unresponsive

Responsive - may be able to help themselves.

In the early stages of drowning a casualty may be able to help themselves, however the ability of the casualty to be able to help themselves will deteriorate rapidly and immediate lifeguard intervention is required.

Responsive casualties may be able to shout for help, follow lifeguard instruction and help themselves.

Examples of a responsive swimmer:

- Weak and/or tired swimmer
- Swimmer with a minor injury or medical emergency (e.g. nose bleed)

Unresponsive – unable to help themselves.

Unresponsive casualties will not be able to respond to lifeguard instructions, help themselves or aid in their own rescue. It is essential that the lifeguard can act immediately, put the casualty first and affect a rescue without hesitation or delay to increase the chances of survival.

Examples of unresponsive swimmer(s):

- Panicking casualty
- Non swimmer
- Injured swimmer
- Serious medical emergency
- Panicking locked swimmers
- Unconscious casualty

1.4.1 Responsive Casualties

Weak and/or tired swimmer

The casualty, either through fatigue or poor swimming ability, cannot reach a point of support easily.

They may be able to:

- Wave or call
- Respond to instruction
- Cooperate when support is offered
- Be able to rescue themselves

They are likely to:

- Be at an angle in the water
- Have limited forward motion







In the early stages they are a **responsive** casualty, but may deteriorate rapidly and become **unresponsive**.

Swimmers who need buoyancy aids may get into difficulty extremely quickly if their buoyancy aids fail or an arm band slips off. This is why swimmers even with buoyancy aids still require close supervision by a parent or guardian in the water.



Swimmer with a minor injury or medical emergency

The type of injury and a casualty's swimming ability will determine how the casualty behaves and indicate if they are **responsive** or **unresponsive**.

An example of injuries may include:

- Cramp
- Bumps and bruises
- Bleeds, including nose bleeds
- Strained muscle
- Head Injury
- Dislocation

A swimmer with an injury may (depending on severity of injury and swimming ability):

- Have an expression of pain on their face
- Be static in the water but able to attract attention
- Hold the part of their body affected or their injured limb





Your priority is to rescue the casualty; however you may be able to adapt the rescue to prevent further injury or pain to the casualty. Rescue techniques are covered later in this section.

1.4.2 Unresponsive Casualties

Non-swimmer

A non-swimmer is someone that cannot swim, if in water out of their depth they cannot maintain their position with their head above the water to breathe.

The length of time that a casualty is able to struggle varies. Factors such as health, fitness, type of injury and swimming ability all impact on how long a casualty is able to stay above water.

A non-swimmer would be unresponsive and unable to help themselves.







ELEMENT 1 - INTERVENTION AND RESCUE

A drowning non-swimmer's priority is to breathe. Through various videos captured over the past few years, RLSS UK have gained information about how non-swimmers behave. There are lots of variations to their behaviour, here are some examples:

- · Vertical in the water
- Not shouting or calling for help
- Have their head out of the water in the very early stages
- Bob up and down, take a gulp of air then sink below the surface
- Push down with their arms, re-surface and gasp for air with their head tilted back
- Sink again as their arms extend over their head
- Fighting to get to the surface
- Submerged under water and not returning to surface

Please remember if a swimmer is not acting normally or you are in any doubt as to their actions, you must act immediately to investigate

Swimmer with a medical emergency

The characteristics of each swimmer will vary depending on the nature, type and severity of the medical emergency. If the medical emergency is minor the casualty may be **responsive** and able to help themselves, however a serious medical emergency could render the swimmer **unresponsive**.

It is important to act quickly, any swimmer with a medical emergency can quickly turn into a non-swimmer.

Examples of medical emergencies that may impact on a swimmer's ability and where they would require lifeguard intervention would be:

- Asthma attack
- Angina attack
- Diabetic emergency
- Heart attack
- Stroke
- Seizure

Some medical emergencies can turn a strong swimmer into a non-swimmer immediately, in some cases the casualty will try and continue to swim or may display abnormal actions.

Remember - if a swimmer is not acting normally or you are in any doubt as to their actions, you must act immediately to investigate

Unconscious casualty

Unconsciousness may be the result of drowning, injury, collision with another swimmer or part of the pool, or as a result of a developing medical emergency. An unconscious casualty would definitely be unresponsive and unable to help themselves.

It is difficult to detail how an unconscious casualty will appear, studies of past incidents have shown that there are many ways an unconscious casualty could look. The list below are examples, but lifeguards should be aware that any behaviour or position of a casualty that is not normal must be investigated immediately:

- Face down with arms and legs hanging limply
- Be totally limp in the water
- At any point from the surface of the pool and the bottom
- Some casualties may appear to make slight movements, for example seizure type actions
- In some cases, a swimmer may remain in the same body position as before they became unconscious, such as a swimming position or resting at the pool edge/lane rope









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