



## What can First Voice do for you?

### What are the odds that...

Your first aid or responder kits contain proper instructions for all potential first aid emergencies in your workplace?

Your local 9-1-1 dispatch has most recent guidelines and proper coaching tools?

Your first aid and responder teams will retain all the skills from training that they need for the incident?

Your responders will not have to rummage around for proper supplies in their kits or have to take additional trips to/from the first aid closet?

Proper PPE and trauma supplies are in the first aid closet or kit and are grabbed on the initial run?

Your AED on the premises has been checked for proper performance lately?

All the proper restocking of PPE and medical supplies is done within the next 24 hours after an emergency?

Good notes were taken and assessment forms were available and completed (to share with EMS and Safety Personnel)?

Your trainer will get a refresher training course prepared and scheduled within 48 hours of the event?

Your most experienced responders are all gone to a meeting, out sick, or on vacation?

*You CAN eliminate these risks*



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Emergency Instruction Device (AVU5001)

### Be 100% certain that...

Responders have proper instructions for all medical emergencies and injuries at your facility.

First aiders and responders will retain skills and have confidence that they need for any incident.

The responders will not have to rummage around for proper PPE and medical supplies in their kits.

Proper PPE and trauma supplies are available immediately to those first on the scene.

Location specific notification is in place for emergency situations with the help of an alarmed cabinet.

All the proper restocking of PPE and medical supplies is done quickly and effectively.

Good notes were taken and assessment forms were available and completed (for EMS handoff and Safety Personnel).

The training resource at your organization will have immediate access to refresher training and be able to quickly pull together a skills recap for any "lessons learned".

Even the most inexperienced responder in your volunteer responder group can respond with confidence and accuracy.

You have created more than 30% efficiency in your responder program.

*Contact your distributor to find out more!*



## Is your Emergency Responder Program Efficient?

### How it is now...

- 1) Major accident occurs
- 2) Victim is found unconscious and bleeding heavily
- 3) 9-1-1 plan is put in place and someone calls 9-1-1
- 4) Radio page goes out to all first aid responders
- 5) Nurse is notified, if any on site
- 6) First aiders respond to call and go to victim
- 7) Someone runs to grab supplies from closet (or kit) including PPE and basic medical supplies
- 8) First aiders and others assess scene and victim
- 9) First aiders put on gloves and PPE, if available
- 10) Someone grabs AED and fast response kit
- 11) Person who grabs AED radios that it is on the way
- 12) Person with AED runs to scene
- 13) Someone remains on phone with 9-1-1
- 14) AED arrives on scene
- 15) CPR is initiated
- 16) AED is turned on and applied to victim, if necessary
- 17) Confident first aiders (if any) give orders and continue to provide aid, based on 9-1-1 dispatch guidance
- 18) 9-1-1 arrives on scene and takes over
- 19) 9-1-1 does reassessment of victim
- 20) 9-1-1 interviews victim (if conscious) and others
- 21) Victim taken to hospital via ambulance
- 22) BBP cleanup supplies are obtained
- 23) Personnel go back to clean up the scene and record events
- 24) First aid supplies are restocked and inventoried or service called
- 25) AED Fast Response kit is inventoried and reordered
- 26) AED Fast Response kit is restocked by service or personnel
- 27) AED accessories are reordered and restocked
- 28) AED post event review is performed
- 29) AED and Fast Response bag put back in cabinet
- 30) BBP cleanup supplies are put away
- 31) Safety Personnel or nurse interviews all involved
- 32) Interviewer compiles notes into report
- 33) Report is shared with OSHA, Medical Director, etc.
- 34) Report is shared with Trainer or Safety Director
- 35) Trainer or Safety Director determines if refresher training is needed, if there are "lessons learned"
- 36) Medical Director reviews response plan and medical supplies if major trauma occurred
- 37) Medical Director advises on better trauma supplies to purchase
- 38) Purchasing procures updated trauma supplies
- 39) Trauma supplies are put in place by safety lead
- 40) First aiders need to be trained on new supplies
- 41) Trainer prepares plan for "lessons learned" and new supplies
- 42) Trainer schedules training session
- 43) Trainer trains responders / first aiders
- 44) Trainer trains any who missed meeting at later dates or sends out email lesson to try to track

44 steps from start to finish...

**First Voice decreases it to 33 steps!**

**By eliminating 11 time-consuming steps a 25% efficiency is created that helps save lives and cuts disability costs!**

### How it *should* be...

- 1) Major accident occurs
- 2) Victim is found unconscious and bleeding heavily
- 3) 9-1-1 plan is put in place and someone calls 9-1-1
- 4) Radio page goes out to all first aid responders
- 5) Nurse is notified, if any on site
- 6) Closest responder or first aid assistant goes to the alarmed cabinet and grabs First Voice/AED and all others respond to scene and victim
- 7) Cabinet alarm is activated when responder grabs First Voice system (and AED, if available); notifying employees in the area of emergency in process
- 8) Responder with bag runs to scene to treat victim
- 9) Those administering aid open First Voice system, pull color-coded prepackaged trauma pack with ALL appropriate PPE and supplies for event
- 10) First Voice Responder Handbook is opened and First Voice EID is turned on, if available, as a real-time skills reminder and confidence builder
- 11) All responders put on gloves and PPE from pack
- 12) CPR is initiated with CPR barrier from pack
- 13) AED is turned on and pads applied to victim
- 14) Nurse or responders give orders and perform assessment, while engaging 9-1-1 dispatch
- 15) Nurse and responders grab individual items from extra pockets of First Voice system as needed
- 16) Responder uses Emergency Intake form from First Voice system to take notes of event/interview
- 17) 9-1-1 arrives on scene and takes over
- 18) Responder shares notes of event and incident with EMS to allow for quick transition
- 19) Victim taken to hospital via ambulance
- 20) BBP cleanup supplies are grabbed from First Voice
- 21) Personnel clean up the accident scene and record events
- 22) AED and First Voice system inventory inspection is completed, supplies are reordered
- 23) First Voice supply packs are replenished as needed
- 24) BBP cleanup supplies are restocked
- 25) AED accessories are restocked
- 26) AED post event review is performed
- 27) Safety Director or nurse interviews all involved
- 28) Interviewer compiles notes and uses notes from event recorded by responder – increasing accuracy
- 29) Report is shared with OSHA, Medical Director, etc.
- 30) Report is shared with Trainer or Safety Director
- 31) Trainer or Safety Director determines if refresher training is needed, if there are "lessons learned"
- 32) Trainer schedules 15 minute training session and can use First Voice EID and training packet for lesson plan
- 33) Trainer sends out an email to those absent; using EID and scenarios, they can get update done during a 15 minute break. Short quiz handed in to prove refresher completion.

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