**Heart Safe Business Accreditation Toolkit**

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**A project of the Fairfield Medical Center Community Heart Watch**

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**Heart Safe Business Accreditation**

**COMMUNITY HEART WATCH**

There are over 1,000 sudden cardiac arrests that occur outside of a hospital per day in the United States. Sadly, the survival rate is less than 10% because victims do not receive care quickly enough. However, survival rates increase to 45% when bystander CPR is started quickly and increase to nearly 90% if victims are defibrillated within three minutes of collapsing.Community Heart Watch was formed in 2012 with the goal of increasing survival rates for sudden cardiac arrest (SCA) in Fairfield, Hocking and Perry Counties. Members include area EMS/Fire first responders, physicians, nurses, hospital administrators, schools and businesses. Community Heart Watch efforts focus on:

* Increasing awareness of sudden cardiac arrest and the importance of bystander intervention
* Equipping bystanders to respond by providing CPR and AED training
* Increasing access to AEDs in the community

**IMPORTANCE OF ACCREDITATION**

About 20% of sudden cardiac arrests occur in a public setting, with over 10,000 per year occurring in the workplace. The Heart Safe Business Accreditation was created by Community Heart Watch to prepare area businesses to provide lifesaving care to cardiac arrest victims until emergency medical personnel arrive. Not only can this preparation save lives in your workplace, but staff trained in this program are also equipped to respond to an SCA that occurs in their homes, at an athletic event or in another public setting.

**ACCREDITATION CRITERIA**

There are 6 requirements to become accredited as a Heart Safe Business:

1. Annual Sudden Cardiac Arrest (SCA) Risk Assessment for staff
2. CPR and AED training for staff (CPR can be traditional or hands-only)
3. Automatic External Defibrillator (AED) accessible on site
4. Cardiac Medical Emergency Response Plan
5. Cardiac Medical Emergency Response Drills
6. Annual SCA awareness activity

**COST**

There is no cost for accreditation, but there may be additional expenses for CPR training and the purchase of AEDs and supplies.

**TERM**

Accreditation is for a three-year term.

**TOOLKIT**

This toolkit provides you with information, forms and other resources to become accredited as a Heart Safe Business. If you have any questions, please reach out to the Community Outreach Coordinator at Fairfield Medical Center (Teri Watson | [teri.watson@fmchealth.org](mailto:teri.watson@fmchealth.org) | 740-687-6929).

Accreditation Criteria Details

Many people are not aware of the risk factors for SCA, which include both personal factors and family history factors. Conducting an annual SCA risk assessment helps to increase awareness of SCA:

1. Annual SCA Risk Assessment for Staff

* The intent of this assessment is to increase your employees’ knowledge of risk factors and encourage them to see a physician if they are at risk
* Assessments are for each employee’s personal use and do not need to be reviewed by the business
* How and when the assessment is administered is at the discretion of the business
* A sample SCA risk assessment is included in Appendix 1

1. CPR/AED Training for Staff

When an SCA occurs, the victim’s chance of survival decreases 10% for every minute care is delayed. That’s why it is critical for your staff to be trained in CPR and the use of an AED in order to provide care while waiting for emergency medical personnel to arrive.

* CPR training can be either full CPR certification or hands-only CPR – approved providers include: American Safety and Health Institute, American Heart Association, American Red Cross, Fairfield Medical Center
* CPR training should include the use of AEDs
* CPR training should include pediatrics if your business services a younger population
* 50-75% of your staff should be trained
* Participants should be encouraged to download the PulsePoint AED app during training
* A sample CPR/AED Training Roster is in Appendix 2

1. AED Access and Maintenance

AEDs are a critical element of a Heart Safe Business because the only effective treatment for SCA is an electrical shock to restart the heart. AEDs must be easily accessible in order to administer a shock within 3 minutes:

* + Details about AED placement and maintenance should be documented in a Cardiac Medical Emergency Response Plan (see next section) and should include:
    - Placing AEDs in accessible, unlocked areas within 90 seconds from any location in your business
    - Entering AED locations into the PulsePoint AED inventory (free from the App Store)
    - Monitoring of AED batteries, pads and other supplies on a regular basis (monthly is recommended)
    - An example of a Monthly AED Maintenance Log is in Appendix 3
* If you need to purchase an AED:
  + A new AED is $1,000 - $2,000 (depending on the features) and comes with a 5–8-year warranty. A more affordable option ($600 - $1,000) is a refurbished AED, which usually has a 3-year warranty
  + New and refurbished AEDs, accessories and training resources can be found at: AED.com, American Heart Association, AED Superstore

Medical emergencies can happen unexpectedly – having an emergency response plan in place is important so that your staff know what to do when an emergency occurs. An emergency response plan should include:

1. Cardiac Emergency Response Plan

* Standards for AED placement and maintenance
* Practices around CPR/AED training
* Procedures for when an unresponsive individual is found
* A sample Cardiac Medical Emergency Response Plan is in Appendix 4

In addition to an emergency response plan, it is also important to conduct regular emergency drills so that your staff become comfortable with the process and can identify and resolve any issues prior to the occurrence o an actual cardiac emergency:

1. Cardiac Emergency Response Drills

* A successful drill will demonstrate:
  + Immediate activation of EMS via 911 call
  + Method of alerting others in the area that assistance is needed
  + Chest compressions are started quickly
  + An AED arrives on the scene and defibrillation pads are placed within 3 minutes
  + Foot traffic around the scene is controlled
  + Staff are waiting at the entrance to escort EMS to the scene
  + Participants conduct a debriefing to assess what went well and what could be improved
  + A Cardiac Medical Emergency Drill form is completed (see example in Appendix 5)
* Resources and supplies needed for a drill:
  + 8-10 participants
  + A Cardiac Medical Emergency Drill form to record activities and times
  + An AED with pads
  + A training manikin or visual profile of a human body
  + A timing device such as stopwatch or cell phone
  + A video recording device

1. Cardiac Awareness Activity

Each business must provide at least one activity per year for the community and/or staff to increase awareness of cardiac risk factors, sudden cardiac arrest or importance of bystander intervention:

* Suggestions for activities are:
  + Wear Red Campaign in February for National Heart Month
  + “Heart Healthy” lunch and learn with an outside speaker (EMS, physician, etc.)
  + Articles in a company newsletter or poster campaign in break rooms

Heart Safe Business Accreditation Application Form

**To be completed once all 6 requirements are met**

**BUSINESS INFORMATION**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **ANNUAL SCA RISK ASSESSMENT** 
   * Date cardiac risk assessment was provided to employees: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_
   * Format of risk assessment (email, paper, etc): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Attach copy of risk assessment form
2. **CPR/AED TRAINING** 
   * 50-75% of staff trained, with representation from all shifts (attach CPR/AED training roster)
   * Participants encouraged to download PulsePoint AED app
3. **AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PLACEMENT** 
   * Number of AEDs in the business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * AEDs are in an unlocked area and available within 90 seconds from any location
   * Each AED device is entered into the PulsePoint AED app
4. **EMERGENCY RESPONSE POLICY** 
   * A Cardiac Medical Emergency Plan is in place (attach copy)
   * Emergency response drills are held once a quarter (attach forms)
   * Video of one drill per year is sent to FMC for review
5. **CARDIAC EMERGENCY DRILLS** 
   * Emergency response drills are held once a quarter (attach emergency drill forms)
   * One video of a drill is sent to FMC for review
6. **SCA AWARENESS EVENT** 
   * Date of annual awareness activity: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_\_
   * Name and brief description of activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix 1**

**Sudden Cardiac Arrest (SCA)**

**Risk Assessment**

Knowing your risk for sudden cardiac arrest is an important step in protecting your heart health.   
Please check either yes, no, or unsure to each of the questions below:

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL HISTORY** | | | |
| 1. Have you ever fainted or passed out DURING exercise, emotion or when startled? |  |  |  |
| 1. Have you ever fainted or passed out AFTER exercise? |  |  |  |
| 1. Have you had extreme fatigue associated with exercise (different from other people)? |  |  |  |
| 1. Have you ever had unusual or extreme shortness of breath during exercise? |  |  |  |
| 1. Have you ever had discomfort, pain or pressure in the chest during exercise? |  |  |  |
| 1. Has a doctor ever ordered a test for your heart? |  |  |  |
| 1. Have you ever been diagnosed with an unexplained seizure disorder? |  |  |  |
| 1. Have you ever been diagnosed with any form of heart disease? |  |  |  |
| **FAMILY HISTORY (parents, siblings, grandparents, aunts/uncles, cousins)** | | | |
| 1. Do you have any family members who had a sudden, unexplained death before age 50? (includes SIDS, car accident, drowning, passing away in sleep) |  |  |  |
| 1. Do you have any family members who died suddenly of “heart problems” before age 50? |  |  |  |
| 1. Do you have any family members who have had unexplained fainting or seizures? |  |  |  |
| 1. Do you have any family members with a pacemaker or implanted cardiac defibrillator? |  |  |  |

Yes No Unsure Yes No Unsure

**If you answered “Yes” or “Unsure” to any of the above questions, please notify your health care provider immediately**

**Appendix 2**

**Sample CPR/AED Training Roster Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Participant Name | Date | Adult | Peds |
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**Appendix 3**

**Sample Monthly AED Maintenance Log**

Please initial the table below to indicate the monthly AED check was performed, any expired equipment has been replaced and all necessary supplies are available.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| AED Location | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
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**Appendix 4**

**Sample Cardiac Emergency Response Plan**

**PURPOSE**

Sudden cardiac arrest can happen to any person, of any age, at any time. This plan is in place to assist employees in providing lifesaving assistance in the event of a cardiac medical emergency

**LOCATION OF AED(s)**

The AED(s) are located…

**STORAGE OF AED(s)**

Each AED will be stored in an unlocked location that easily accessible during all hours of operation. If possible, a sign will be placed above each AED to identify its location.

**ASSOCIATED EQUIPMENT**

One set of pads is to be kept in the AED case. One rescue kit will also be stored with each AED and will include latex-free gloves, a razor, trauma shears, a small towel and a facemask or other barrier device.

**MAINTENANCE**

AED(s) will be checked for readiness every 30 days by [insert name or position]. Pads and batteries will be replaced when indicated. All information will be documented on a Monthly AED Maintenance Log.

**AED INVENTORY**

All AEDs will be inventoried into the PulsePoint AED app.

**TRAINING & DRILLS**

CPR/AED training must be provided once every two years by a nationally recognized training institution such as: American Heart Association, American Health & Safety Institute, American Red Cross, National Safety Council or Fairfield Medical Center. Cardiac Medical Emergency drills are to be conducted and documented ever quarter.

**PROCEDURE FOR WHEN AN UNRESPONSIVE INDIVIDUAL IS FOUND**

1. Establish that the victim is unresponsive and not breathing normally
2. Call 911 to active EMS and clearly describe which entrance to use or where EMS should go
3. Alert others that help is needed
4. Send someone to retrieve the closest AED
5. Begin chest compressions
6. Designate someone to wait at the entrance for EMS to arrive and guide them to the scene
7. Assign someone to maintain traffic control and assist any customers away from the scene (if applicable)
8. When the AED arrives at the scene, turn it on and follow the verbal commands
9. Place defibrillation pads exactly as shown on the pads. If the victim has a pacemaker, place the pads several inches from the pacemaker
10. If the AED indicates a shock is needed, call “CLEAR” and ensure no one is touching the patient, then hit the button to deliver the shock
11. Follow the verbal commands of the AED and continue to provide care until EMS arrives
12. Hold a debriefing session to identify issues and opportunities for improvement

**Appendix 5**

**Sample Cardiac Medical Emergency Response Drill Report**

Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Location of victim: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How was drill activated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of participants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Activity: Time

|  |  |
| --- | --- |
| Victim was discovered |  |
| 911 is called |  |
| CRP is started |  |
| Someone sent to get an AED |  |
| Confirm that 911 was called and send someone to meet them |  |
| AED arrives |  |
| AED is turned on |  |
| AED pads are placed on victim while CPR continues |  |
| AED analyzes |  |
| If shock is advised, clear staff of patient and push shock button |  |
| CPR resumed |  |
| Staff performing CPR switch out |  |
| AED analyzes |  |
| If shock is advised, staff get clear of patient and shock button pushed |  |
| CPR resumed |  |
| EMS arrive and take over |  |
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What did you do well? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What could be improved? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_