

NATIONAL FIRST AID VOLUNTARY CAMPAIGN

Saving Lives Together 2017-2020

A summary of the first three years of the voluntary campaign år



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Saving Lives Together • 2017 - 2020

Digital version: www.sammenredderviliv.no
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Foreword

Emergency medical preparedness in Norway is world class. 24/7 all year round, operators of the emergency number 113 and emergency medical centres, emergency doctors, ambulance personnel and doctors in cars, boats and the air ambulance service are on standby – ready to deal with severe illness or injuries. Similarly, specialists are always on standby in hospitals to diagnose and initiate advanced life-saving treatment.

Despite this, a significant number of people die every year in Norway due to acute and severe illness and injuries. Moreover, many of those who survive suffer permanent and severe disabilities. More lives could be saved if the health services were notified earlier and if simple but often life-saving first aid is performed.

Having recognised this fact, Norwegian Minister of Health Bent Høie and myself invited representatives from centres of expertise relating to emergency medicine, NGOs and non-profit organisations, businesses and public authorities to a meeting at Utstein monastery outside Stavanger in 2017. During the meeting, we laid down the outlines of what has now developed into the national first aid voluntary campaign, named *Saving Lives Together*.

The main objective with the campaign is to enable persons who just happen to be close by when another person suddenly falls ill or is injured to provide life-saving first aid, and to know when to call the emergency number, 113. We aim to achieve this objective by providing life-long first aid training, starting in kindergartens, continuing at school, in sports, working life and, last but not least, once you have retired. At the same time, we have taken action to improve how emergency calls to 113 are received and processed and to establish systems comprising emergency helpers who can provide assistance until the ambulance arrives. The Saving Lives Together campaign is now three years old, and we have to a great extent succeeded in achieving

our ambitious objectives. We have developed high quality, knowledge-based training programmes for children in kindergarten, at school, adolescents and the elderly. We have mobilised various resources and have established a unique collaboration between NGOs and non-profit organisations and the authorities. We can take pride in what we have achieved.

At the same time, we know that we still have some way to go. We aim to introduce even more projects, we have to make sure that our programmes have a lasting impact by incorporating them into existing and new structures and, last but not least, we have a commitment to share the experiences we have gained with others so that we can all learn from each other.

My sincere thanks to all of you who have invested innumerable working hours and voluntary efforts to help us get this far. A special thank you is due to the Gjensidige Foundation. Without their fantastic commitment, it would not have been possible to finance the numerous projects that are part of the campaign.

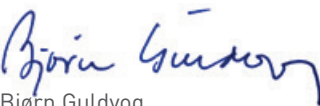
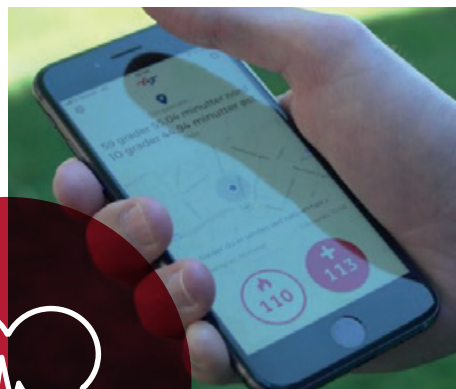

Bjørn Guldvog
Director General of Health



Photo: Ole Martin Wold



Sammen redder vi liv  113



Together we will save even more lives

The aim to ensure a more competent and well-prepared general public who can help save lives while waiting for healthcare personnel to arrive has played a crucial role in the Gjensidige Foundation's decision, to date, to far allocate close to NOK 81 million to the Saving Lives Together campaign.

Our vision is "good lives in a safe society." *Saving Lives Together* has therefore been a natural and important initiative for us over the past three years. It takes time to build new structures that work, and wide-ranging, positive cooperation is key if we are to achieve results. Our primary contribution has been to support 16 projects, cooperating in most of these with public bodies and NGOs. One common feature of all these projects is the aim to train the general public in recognising severe illness and critical injuries, knowing how to call for help and how to administer life-saving first aid. Individually, the different measures reach out to vastly different target groups in the population. Together, they enable millions of Norwegians to save lives.

There are already numerous and positive indications that there is a good level of skill among the general public and that they take the correct action. According to the Norwegian Cardiac Arrest Registry, in 82% of cases of cardiac arrest for persons not in hospitals in 2018, a member of the general public had started CPR before the ambulance arrived. This is a higher percentage than in any other cardiac arrest registry in the world. At the same time, a survey conducted by NorStat for the Gjensidige Foundation in October 2019 shows that one in three persons would fail to follow the main rule that could save lives, and that is to call 113 as

the very first thing you do if you come across a person who is non-responsive.

Although significant funds have already been invested in improving first aid skills among the general public, we are aware that we still have a lot of work to do before a sufficient number are able safely and positively to take action and make the difference between life and death.

This brochure provides a presentation of the projects that have been carried out and are still under way. We at the Gjensidige Foundation are impressed both by the fantastic efforts and wide support for the voluntary campaign among volunteers in Norway and the health authorities. Over three years of hard work, we have together laid the groundwork for saving even more lives. It has never been a question of *the willingness* to help. We are therefore grateful for all your wonderful contributions in improving *life-saving skills among the general public*.


Unn Dehlen
CEO
The Gjensidige Foundation



Henry – first aid for kindergarten children

The vision behind the Norwegian Red Cross' first aid strategy is that "everyone in Norway shall have the opportunity to learn life-saving first aid and shall be willing to help in situations that require first aid". One measure introduced to this end is providing first aid training for children in kindergarten, with the Henry first aid programme for kindergarten children.

Project goals

Offer Henry first aid to kindergarten children in all kindergartens in Norway.

Henry – first aid for kindergarten children is a training programme in first aid for children aged three to six that can be used in kindergartens. The training programme has been developed by Rogaland RØ and Laerdal Medical AS to increase first aid awareness, knowledge and interest among children. The programme also aims to develop the capacity to care for others, a sense of responsibility and willingness to help among children, and to spread knowledge of the Red Cross' core values, such as humanity and neutrality. One important element in the Henry programme is to acknowledge that even young children can take responsibility, show that they care and get help when necessary.

Aids

The Henry training programme comprises a doll named Henry, along with a small first aid bag, an educational folder, a memory stick with music (also available on Spotify etc.) and a flip chart with illustrations of 10 different accidents the Henry doll has suffered. The Henry doll has been designed to make it easier for staff in the kindergartens to talk with the children about first aid in a way that is best suited to the staff and the children. The contents of the training programme can be made easily recognisable and relevant for the children by providing associations with their own environment and experiences.

Feedback from kindergarten staff about Henry:
"Very happy with the Henry first aid package – it is easy to use, and the children think it is fun and exciting."

"A wonderful programme that captures the children's attention and helps us adults teach them. It is a great training exercise for the children in showing empathy."

Duration and funding

The project started in 2005, based on requests from kindergarten personnel in the region of Rogaland, who wanted material to provide first aid training for children. The training programme was developed in collaboration with

the kindergartens, and the content relating to first aid has been approved by the Norwegian First Aid Council (Norsk Førstehjelpsrad). The project has also been incorporated into the Red Cross' First Aid Strategy 2017-2020. Distribution of the Henry package, produced with financial support from the Gjensidige Foundation by 1 December 2020.

The project is funded by the Gjensidige Foundation and the Norwegian Red Cross.

Results

Number of kindergartens with Henry packages: 3,886 (the number of distributed packages is higher).

<https://www.rodekors.no/henry>

Project Manager

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National first aid courses for children in primary and lower secondary school

One of the most important target groups for the national first aid voluntary campaign, Saving Lives Together, is children in primary and lower secondary school, as all children and adolescents who grow up in Norway have to complete 10 years of compulsory schooling.

Life-saving first aid has been defined as a specific competence aim in the revised curricula for primary and lower secondary schools (2019).

Project goals

Develop a digital, knowledge-based teaching aid for life-saving first aid specifically for grades 1 to 10 in Norwegian primary and lower secondary schools. This project is unique in that training in a number of time-critical conditions and injuries is provided by teachers and not healthcare personnel. The teaching aid shall be customised and available via a digital platform, with links to the Norwegian Directorate for Education and Training's curriculum and competence aims.

Aids

A digital curriculum, guidelines for teachers and related teaching resources have been developed for the competence aims for Saving Lives Together, via the following:

- Differentiated curriculum, learning outcomes and teaching resources for first to fourth grades and for fifth to tenth grades.
- Illustrations, illustrated stories (recognise, assess risk, own safety, notify, first aid actions)
- Videos based on realistic cases (learning outcomes)
- Illustrated stories
- Instructive films (the Norwegian acronym BLÅ – for consciousness, airway, breathing – the recovery position, CPR, stopping severe bleeds)
- E-books
- Kahoot
- VR – app gaming technology (collaboration with NKT-Traume). First person to arrive at the scene of an accident. In the game, the player arrives at the scene of an accident and has to make choices involving his or her own safety, how to secure the scene, how to report the accident and provide life-saving first aid. The game can be played on all mobile devices and on large screens.
- VR headset technology (collaboration with NKT-Traume) relating to violence and threats. The system can also be used on an interactive large screen.
- Use of VR technology: An interactive VR film has

been created that relates to violence and threats, and is viewed wearing a VR headset. While playing the game, the player can affect the course of events and the outcome of the story. The player is confronted with different dilemmas to solve by choosing what action to take. The player receives feedback depending on the choices he or she makes. If the player makes the right choice, the story will continue. If the player makes the wrong choice, however, they will be told what they did wrong and have the opportunity to try again. The VR film lasts for around 10 minutes, depending on the choices made by the player.

- The digital teaching aid has been translated into six languages (Nynorsk, English, Somali, Tigrinya, Arabic and Sami).

Duration and funding

September 2019 – December 2020.
100% funded by the Gjensidige Foundation

Results

- The project has been implemented in 14 of 18 counties (before the nationwide county merger)
- Introductory training (three hours) in the use of the training programme held in 50 municipalities
- Numerous schools and municipalities have introduced the teaching programme without further training (tracked via the website).
- Introductory training provided to 2,500 teachers. These have gone on to provide training to other teachers at their own schools. An estimated 32,023 school pupils who have received training.
- As of 1 February 2020: 6,678 regular users of the website, first aid in primary and lower secondary school

National first aid training in primary and lower secondary schools is available on the following open digital platform: <https://www.elevkanalen.no/open/Fag/1702>

Project Manager

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Basic Traffic Course First Aid

The Regulations require all persons to complete the Basic Traffic Course before taking driving lessons. The aim of the course is e.g. to provide the students with basic skills in the event of a traffic accident. These include e.g. reporting an accident, securing the scene and providing life-saving first aid.

An assessment of the current training course demonstrated that the driving school students and instructors are not satisfied with the course as it is. Former driving school students stated that they did not feel they were sufficiently prepared to carry out first aid in an accident. Driving school instructors, on their part, do not feel that they are up-to-date with their first aid knowledge, and about what to teach during the courses. Both parties want improved access to easily available and up-to-date knowledge.

The national centre of expertise for traumatology (NKT-Traume) has therefore recommended the compilation of a digital learning aid as an app that can be opened on a PC, smartphone or tablet. This is a new aid and has not previously been part of the course. The teaching aid to be developed will be based on modules and will combine a digital learning section, a test and practical training in groups.

Project goals

The project aims to mobilise both students and driving school instructors as important resources for emergency first aid, who can provide assistance while waiting for the health services to arrive at the scene of a serious traffic accident.

Aids

The project aims to develop:

- A revised teaching programme for the Basic Traffic Course.
- A digital learning tool for students and course instructors for the Basic Traffic Course.

The teaching programme consists of three modules:

MODULE 1: THEORETICAL SECTION

The academic content is presented to the students and the driving school instructors using modern and interesting educational technology. The technology used is advanced but accessible. The course can be held using a web browser on a PC, tablet or smartphone.

MODULE 2: COURSE TEST

After completion of the theoretical section of the course,

the students shall take a test to identify whether they have retained the knowledge provided. The students will be able to take the test several times if they fail. The student is responsible for presenting documentation that they have passed the test so that they can take part in the practical part of the course.

MODULE 3: REVERSED LEARNING

Before the practical exercises take place, the students will have the opportunity to reflect on the competence aims from module 1 together with a group of other students and with the instructor present. The instructor repeats and encourages the students to ask questions, then practical first aid exercises are held (securing the scene of the accident, calling for help, making sure the airways are free, removing helmets, positioning, stopping traumatic bleeds, preventing hypothermia). The final part of the course is a simulated traffic accident, where the students have to perform in practice what they have learned.

Guidelines for driving school instructors are also developed in the form of a course for the instructors.

Duration and funding

Project start-up was in 2018 and, according to schedule, the project shall be ready for nationwide rollout in September 2020

- The project is funded by grants from the Norwegian Directorate of Health
- Under the project, a charting process has been performed and a report submitted to the Directorate of Health in April 2018
- The project is now focusing on product development for digital learning aids and updating the academic content
- A pilot shall be completed and ready for trial in June 2020

Project Managers

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Traffic-related injuries

The World Health Organization (WHO) has stated that approximately 1.3 billion people worldwide die every year and 20-50 million people are injured in traffic accidents. Injuries resulting from traffic accidents represent the highest cause of death for people aged 15 to 29. Figures in Norway are similar to the above worldwide statistics, where traffic accidents are the most common cause of death among persons aged 15 to 24. Pedestrians, cyclists and motorcyclists represent almost 50% of persons killed on the roads worldwide.

Norway can report a gradual decline in the number of traffic-related injuries. In 2018, a total of 108 persons died on Norwegian roads. That same year, the number of severe injuries from road traffic accidents was 602. This is the lowest figure reported since the war. For pedestrians and cyclists, however, the figures are on the increase. The number of deaths and severe injuries is on the rise. This highlights the need for a focus also on pedestrians and cyclists. Without a focus on traffic safety and a reduction in deaths and complications caused by traffic accidents, the WHO forecasts that traffic accidents will become the seventh highest cause of death worldwide by 2030.

Data shared by Oslo University Hospital's trauma registry shows that the number of injuries from car accidents has not increased since 2001, while cycling accidents have seen a relatively high increase.

In Norway, first aid training has been a compulsory part of the Basic Traffic Course (obligatory course before you start to take driving lessons) since 2003. The current first aid course takes a total of four hours. It involves obligations in the event of a traffic accident and first aid, ref. section 8-1, fourth paragraph of the Regulations relating to traffic-related training. The final hour of the course is dedicated to practical training with a simulated accident.





Sub-project 113

One of the most important messages to get across during first aid training for persons of all ages in the general public is the importance of calling 113 at an early stage.

One of the three main target areas for the national first aid voluntary campaign, Saving Lives Together, is to increase the competencies of the operators manning the emergency phone number 113 in identifying time-critical emergency medical situations and in providing effective guidance to the general public.

Practice makes perfect, also in terms of first aid and dealing with time-critical illnesses and injuries. The

geographical areas covered by Norway’s emergency telephone centres (113) vary greatly, also representing a large difference in the number of inhabitants and the number of incidents involving time-critical illnesses and injuries.

Project goals

The 113 sub-project aims to improve competencies of the 113 operators in early identification of time-critical emergency medical situations, sounding the alarm for necessary

resources and providing guidance to the person who called 113 in life-saving first aid until the first medical personnel arrive at the scene. This shall comprise:

- Identifying measures for rapid identification of time-critical emergency medical conditions
- Identifying measures for effective guidance and help to the general public
- Suggesting improved work processes for the 113 centres.
- Analysing the effects of new and changed work processes.
- Assessing the effects of technological aids.
- Testing training and refresher training methods, including simulation training

Aids

PART 1:
Five meetings were held from May 2017 to January 2018 for representatives of all the 113 centres in Norway. Systematic review and evaluation of phone call recordings from incidents involving cardiac arrest and the time measured from recognition of a cardiac arrest until CPR was initiated. Facilitator courses for simulation training of 113 operators were held at SAFER in Stavanger. Simulation training is considered an important aid when compensating for the variations in the occurrence of time-critical incidents.

Duration

PART 1: From June 2017 to January 2018.
PART 2: The project period currently has a time limit corresponding to the duration of the national first aid voluntary campaign, i.e. until the end of 2022. The research project involving management of strokes will continue past 2022.

Funding

PART 1: The Directorate of Health funded the meetings, while travel costs were covered by the individual 113 centres. The facilitator courses were funded by the Directorate of Health in June 2018, and partly funded by the Directorate of Health and SAFER in June 2019.

PART 2: KoKom’s participation is based on self-financing.

Results

PART 1:
The review of phone call recordings involving patients with cardiac arrest uncovered a significant variation between the different 113 centres. The amount of time it took for a person calling 113 to start CRP was reduced from two minutes and 45 seconds at the start of the project to two minutes and 10 seconds at the end of the project. Theoretically, this corresponds to an increase in the number persons who survive a cardiac arrest every year of 20 persons. Provided that improved systems are established for positioning persons calling 113, it is probable that the

time it takes to start CRP can be reduced to less than two minutes.

The project also prepared recommendations for how the 113 centres should organise their work to optimise their own efforts in the event of time-critical illnesses or injuries. These recommendations have now been published on the Directorate of Health’s website (in both Norwegian and English).

PART 2:

To date, the project has developed:

- Model for evaluation of 113 calls with related guidelines and form
- Model for quality registry for review of 113 phone calls in the 113 centres, with templates for necessary applications to the privacy officer.
- The emergency centre call log – an eReg-based local quality registry for storing data from evaluation of 113 calls with search function, research-friendly registry, standardised nationwide.
- Information packages about the four conditions in the voluntary campaign, with relevant tips and advice for continued work in the individual centre / for the individual operator.
- Information package for managers regarding relevant legislation and regulations, and other useful information for managers/professional developers
- Information package on communication in 113 calls
- The “Ladder model” – a model for structuring and gaining an overview of how far the individual 113 centre has progressed in its local work on sub-project 113.

A research project involving how the emergency medical communication centres (AMK) deal with strokes has been established in cooperation with e.g. the University of Bergen.

Collaboration has also been set up with the medical emergency service in Copenhagen regarding a joint application for research funding from the EU and Horizon2020.

PART 1: The recommendations are published at www.helsedirektoratet.no/rapporter/sammen-redder-vi-liv-strategidokument

PART 2: All forms, templates, information, former documents and users’ guides for eReg are published at www.kokom.no. Any input and comments regarding the work on sub-project 113 can be sent by email to: post@kokom.no

Project Managers

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Help 113 app

From reviewing call recording logs in the 113 centres, we know that vital time is lost in finding out where the patient is located. This applies both in cities and densely populated areas, but more importantly when the patient is off the beaten track.

One main message in the national first aid voluntary campaign, Saving Lives Together, is to encourage the general public to immediately call 113 if they suspect a severe illness or injury.

Starting CPR early on and use of a defibrillator is decisive in saving more lives when a person suffers a cardiac arrest when not in hospital. The chance of survival may be increased by 50% if a defibrillator is used before the ambulance arrives. Early use of a defibrillator requires that the person providing first aid knows the location of the closest defibrillator.

The 113 centres sometimes struggle to understand the need for help as they can only communicate with the person who called them by phone. It is also difficult to assess whether the person who called them is following the first aid advice they provide over the phone. It is difficult, for example, to assess whether the person calling is providing appropriate CPR to a person suffering a cardiac arrest.

Project goals

The Help 113 app automatically sends your GPS location to the emergency centre, irrespective of whether you dial 110, 112, or 113 from the app. This prevents vital time from being lost in establishing the location of the patient.

The public defibrillator registry is also integrated into the Help 113 app, showing where the nearest defibrillator is located.

Aids

The Norwegian Air Ambulance Foundation has carried out systematic work since start-up to promote the Help 113 app via several channels, such as TV, newspapers and the Internet.

We have carried out a wide-ranging campaign on social media, with advertisement films and spreading knowledge about the importance of such an app. We have recruited public health workers to help us illustrate the importance of the app.

Duration and funding
2021

The project is funded by the Gjensidige Foundation and collected funds from the Norwegian Air Ambulance Foundation.

Results

More than 1.5 million people downloaded the Help 113 app, but the Norwegian Air Ambulance Foundation's target is for the app to be installed on every smartphone.

Today, the app is used on average 200 times a day, and we want it to be used by anyone who needs help, or ends up in a situation where someone else needs help but the person does not know where they are.

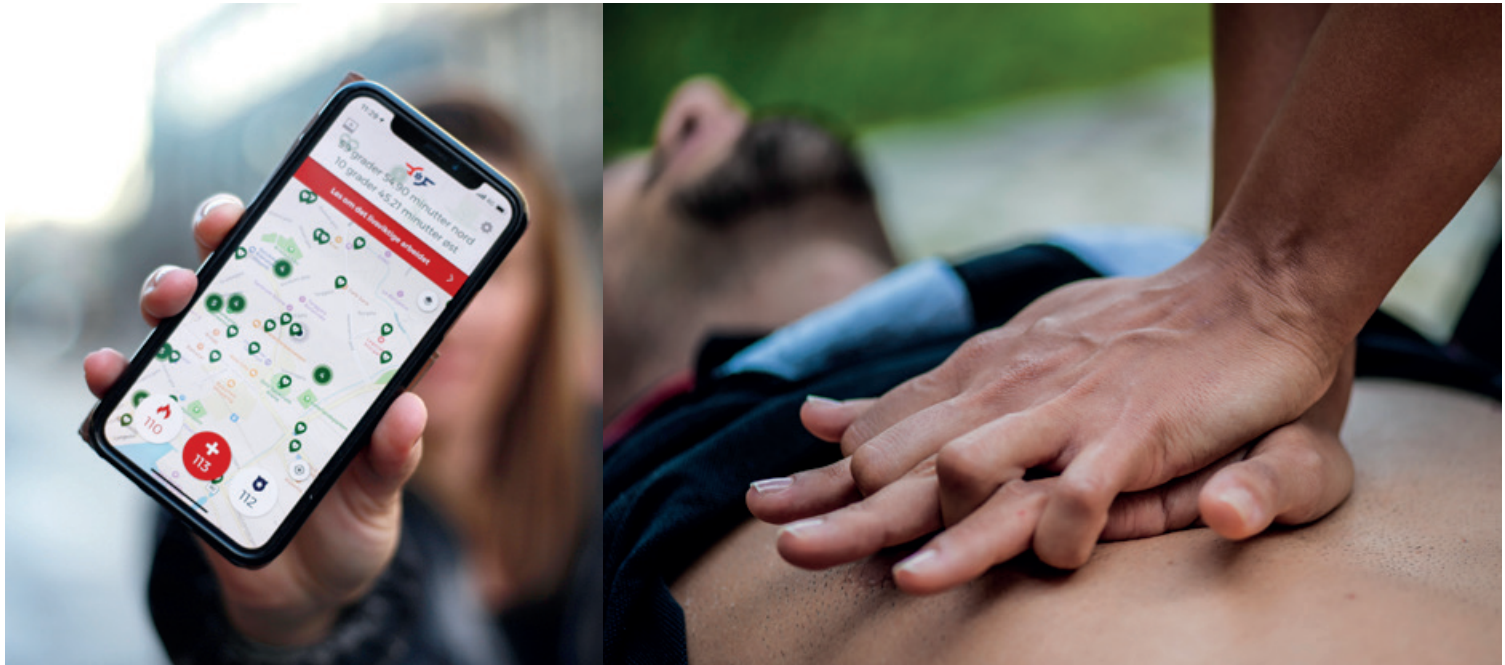
The Norwegian Air Ambulance Foundation is continuously working on further development of the app. Previously, we launched the option of calling the fire service and police, as well as the medical emergency number 113, and the defibrillator registry was recently integrated so that the app now shows the nearest defibrillator on the map.

Two new functions are planned for launch in 2020. One is a chat function for the deaf and hearing-impaired, and a video function so the operator in the emergency centre can see the person calling, the patient or scene of the accident, and will therefore be more able to assess the need for medical assistance, the need to notify other emergency services such as the fire service and police, and to assess whether the person calling is following the instructions for administering life-saving first aid.

About the Help 113 app: <https://norskluftambulanse.no/hjelp113/>

How the app works: <https://norskluftambulanse.no/hjelp-113-gps-ofte-stilte-sporsmal/>
Air ambulance pilot Geir Arne Mathisen explains why the Help 113 app is so important: <https://www.youtube.com/watch?v=YwZ8poTun-w>
Caught in a forest fire – was rescued by the Help 113 app: <https://norskluftambulanse.no/appen-ga-oss-livet/>
Saved by the app: <https://norskluftambulanse.no/for-meg-var-hjelp-113-appen-livreddende/>

Project Manager Kjell Otto Fremstad kjell.otto.fremstad@norskluftambulanse.no



Public emergency helpers

The emergency helper programme shall help save lives and limit permanent severe health issues via rapid response for time-critical illness or injury when the person is not in a hospital.

Norway's municipal fire and rescue service is the most decentralised emergency service with more than 600 (615) fire stations across practically all Norwegian municipalities.

By providing life-saving first aid training to emergency response personnel from the fire and rescue service and equipping them with simple medical treatment equipment, it will be possible to save more lives in time-critical emergency medical conditions such as unconsciousness, cardiac arrest and severe injuries.

Project goals

Provide life-saving first aid training to emergency response personnel in the municipal fire service and equip them with simple medical treatment equipment, including defibrillators.

Aids

The training comprises a comprehensive eLearning course, developed by the Norwegian Air Ambulance Foundation. All persons must complete this before moving on to the day of practical exercises, with simulated training together with an instructor. The practical exercises comprise meeting unconscious patients, cardiac arrest, chest pains, strokes and serious accidents.

First aid expertise requires constant refreshment. As a result, and simultaneous with training of new emergency helpers nationwide, we also provide regular refresher training courses for those who are already emergency helpers. Moreover, the fire stations receive an emergency bag containing a defibrillator and other first aid equipment.

We have received confirmation from ambulance personnel and doctors that we have saved lives. In situations where we arrive at the scene before the ambulance, we can immediately start CPR and use a defibrillator. These are time-critical situations, so the fact that we can get to the patient as quickly as possible is absolutely essential.

Jon Sindre Kragset, brannmann

Duration and funding

Until 2022.

The courses for emergency helpers among the emergency response personnel in the fire and rescue service would not have been possible without funds collected from the Norwegian Air Ambulance Foundation and financial support from the Gjensidige Foundation and the Norwegian Union of Municipal and General Employees.

Results

Feedback from emergency helpers saying that the course has saved lives, such as fireman Jon Sindre Kragset: "We have received confirmation from ambulance personnel and doctors that we have saved lives. In situations where we arrive at the scene before the ambulance, we can immediately start CPR and use a defibrillator. These are time-critical situations, so the fact that we can get to the patient as quickly as possible is absolutely essential," he explains.

Throughout the project, we have held courses for more than 4,300 emergency helpers located at 270 fire stations in 180 municipalities.

The online theory section has been made available to Norwegian People's Aid, who are responsible for the sub-project for voluntary emergency helpers.

Regional contact persons have been established with an overview of the emergency preparedness municipalities in their region with a separate network of local instructors who can help provide training and refresher training of fire safety personnel.

Map with an overview of locations with emergency helpers: <https://norskluftambulanse.no/sjekk-om-din-kommune-har-akutthjelpere/>

More information on the project: <https://norskluftambulanse.no/vart-arbeid/kurs/mens-du-venter-pa-ambulansen/>

Good example of how well the emergency medical chain can work: <https://norskluftambulanse.no/dag-gen-dag-richard-dode/>

Project Manager

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NGOs as emergency helpers

The emergency helper programme shall help save lives and limit permanent severe health issues via rapid response for time-critical illness or injury when the person is not in a hospital.

Emergency helpers are personnel who:

- Have a defined minimum expertise in life-saving first aid
- Are equipped with simple and standardised medical treatment equipment
- Are a visible resource for the emergency centres and who, without unnecessary time lost, can respond to provide life-saving first aid until the first emergency medical resources (ambulance, doctor) reach the patient

Norwegian People's Aid, the Red Cross and the Norwegian Rescue Society currently have representatives in the community with volunteers who have completed firstaid training, have equipment and are ready to help. One of the main challenges with these volunteers is that they are not visible to the emergency centre, and that routines for notification and response are not standardised. One definitive criterion for success is therefore to develop an app that ensures these emergency helpers are visible to the emergency centres.

Project goals

The aim is to develop solutions for use, notification, communication and training of persons from Norwegian People's Aid, Red Cross and the Norwegian Rescue Society so that they can act as emergency helpers.

Aids

- Development of the app that ensures emergency helpers are visible to the emergency centres and that allows communication of information about an assignment (location, incident etc.)
- Preparation of curriculum with objectives, courses and course schedules for emergency helpers
- Standardised emergency helper bag with medical equipment (defibrillator, equipment to prevent hypothermia and stop bleeds)
- Procedures and agreement with local health trusts

The project is scheduled to end in mid-2021

Funding

The project is funded by the Gjensidige Foundation and Norwegian People's Aid. In addition, members and

employees from Norwegian People's Aid, the Red Cross and the Norwegian Rescue Society have contributed considerable resources.

Results

By the end of 2019, 35 instructors/course supervisors had completed training nationwide in Norway, and more than 200 emergency helpers had been trained. Moreover, comprehensive training is planned in the organisations in order to boost expertise for as many persons as possible so that they become emergency helpers.

Since January 2019, Norwegian People's Aid in Tromsø in cooperation with the University Hospital of North Norway and Norwegian People's Aid in Strand and Forsand, Sandnes and Jæren in cooperation with Stavanger University Hospital have conducted a pilot in which existing technology has been adopted to promote visibility, and standardised training has been tested and completed. In June 2019, 65 emergency helpers from the Norwegian Rescue Society, Red Cross and Norwegian People's Aid in Vestfold received training, in collaboration with Vestfold hospital.

The experience gained from the pilots to date shows that the NGOs achieve better collaboration with local health trusts, with the emergency centres and ambulance service. Emergency helpers who have responded to an assignment say those who have completed the training felt prepared, and that it is absolutely necessary.

Information about the project can be found at www.folkehjelp.no/akutthjelper

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First aid for the elderly



The elderly represent a major group of the population (more than 900,000) and at the same time represent a high-risk group for heart attacks, strokes and cardiac arrest. It is therefore extra important that the elderly learn to recognise the symptoms that require emergency help for such time-critical emergency medical conditions, have a low threshold for calling 113 and have the expertise to implement simple life-saving first aid measures until the first health personnel arrive.

Project goals

- 1. To help more elderly people identify the symptoms of strokes, heart attacks and cardiac arrest.
- 2. To provide more elderly people with knowledge of the importance of rapid contact with the emergency services by calling 113 in the event of an acute illness or injury
- 3. To provide training and knowledge for more elderly people in life-saving first aid measures, in order to lower the threshold for contributing

Aids

- A training programme has been developed for the elderly lasting about one hour and with an emphasis on symptom recognition, notification and simple, practical first aid
- Simple training material has been developed, including films, flyers and first aid hearts
- Volunteers from the Norwegian Women's Public Health Association are provided with courses in the training programme, enabling them to provide training to the elderly in their local area (these persons are known as first aid resources).
- Local associations can also organise outdoor stunts, open meetings etc. to spread information

Duration and funding

1 April 2018 – 31 March 2020 A pilot project and pilot phase, during which the training programme is initially tested internally by the Norwegian Women's Public Health Association.

Applications have been submitted for funding for a nationwide rollout by the end of 2022. The original goals remain, but the training and information shall be distributed to as many elderly people as possible. Measures to achieve this will include cooperation with organisations, associations and municipalities that organise activities for the elderly, and with other organisations that have joined the national voluntary campaign.

The project is funded by the Gjensidige Foundation.

Results

- 75 first aid resources have received training

- All 630 local branches of the Norwegian Women's Public Health Association have received information about the project.
- Around 200-250 local branches have received a visit. Visits have also been paid to a number of old people's homes, pensioner associations and other organisations with elderly members.
- We estimate that with outdoor stunts, reports in the media, TV features and posts on social media, we have reached at least 277,000 elderly people.
- The project has organised a number of major outdoor stunts / visibility events, including the Arendalsuka festival in 2019, and the Norwegian Women's Public Health Association's regional gatherings in the autumn of 2018 (Drammen, Bergen, Trondheim) and the autumn of 2019 (Steinkjer, Alta, Fredrikstad, Arendal, Bergen)
- The project signed a collaboration agreement with the Red Cross regarding basic training in first aid for volunteers
- Plans have also been prepared under the project for collaboration with other organisations for the voluntary campaign, and with organisations, associations and municipalities that have activities for the target group – the elderly – and collaboration with the Pensioners' Association.

Project Manager

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CPR in upper secondary schools

Pupils in upper secondary school are at an age that is appropriate for learning and training in both basic CPR and practical use of defibrillators. Students in this age group can also be used as instructors to teach other students CPR.

By providing targeted training in practical skills, the persons trained will be able to maintain a minimum level of skills for many years, both privately and in working life. Being able to try the role of CPR instructor for other pupils will boost personal development for the young instructors and boost interest in both first aid and teaching.

Project goals

The project aims to train approximately 130 pupils as instructors at Bryne, Sandnes, St. Svithun, Sola and Godalen upper secondary schools. These will in turn provide training for around 3,500 pupils by the Easter of 2020. At the same time, a research project will be conducted to assess whether the skills taught are sufficient.

Aids

The Norwegian Resuscitation Council (NRR) has developed the concept for the course in basic CPR, lasting 90 minutes, which the young instructors teach during a double physical education class. The course is accompanied by an e-learning section and an instructor manual.

Duration and funding

15 August 2018 – 15 April 2020.

The Gjensidige Foundation – NOK 300,000 awarded.
Norwegian Resuscitation Council – NOK 100,000 self-financing.

Laerdal Medical AS – NOK 70,000 for the research project.

Results

As of 24 January 2020, 125 pupils have become instructors and nine teachers have received training under the project. As of 1 January 2020, 2,400 pupils have received training from instructors who are students, and the remaining approx. 1,100 pupils will receive training in February/March 2020.

Research data shows that the young instructors are able to achieve the same level as the principal instructors in terms of quality of CPR performance in a four-minute test, and that more than 75% of the pupils who receive training from the young instructors are able to comply with the prevailing guidelines when it comes to the quality of CPR in this test.

<https://www.113.no/aktuelt/kan-ungdom-vaere-instruktoerer-for-hverandre-i-hjerte-og-lungeredning-go-hlr-rogaland/>

www.nrr.org

<https://www.facebook.com/realNRR/>

Project Manager

Trond Nordseth – trond.nordseth@ntnu.no



Saving Lives Together in sports

The Norwegian Olympic and Paralympic Committee and Confederation of Sports (NIF) have just under 2.1 million members across 11,000 sports clubs, and represent the largest arena for voluntary work in Norway. Sports therefore represent a huge potential for contributions to the voluntary campaign, Saving Lives Together, in Norway.

The survival rate for cardiac arrest in Norway is approx. 14%, irrespective of cause and circumstances. The survival rate for cardiac arrest related to sports and physical activity should be higher. Patients involved in sports will be younger and healthier than average, but it is also the case in sports that persons should receive early CPR and have access to defibrillators.

A provisional analysis of figures from 2015 up to and including 2017 showed that for cardiac arrests occurring at sporting or recreational arenas and/or in connection with exercise (a total of 71 (with 19, 25 and 27 per year respectively)), a defibrillator was used in approx. 20% of the cases. Close to 50% of the persons who received CPR from the persons present survived for minimum 30 days (unpublished data).

Project goals

Child, adolescent, and adult athletes, parents/guardians and other resource persons associated with Norwegian sports associations shall receive training in recognising acute, life-threatening injuries and illnesses, ensure early notification to the 113 centres and, together with the 113 operator, perform vital, life-saving treatment until the first health personnel (ambulance, doctor) reaches the patient.

A pilot project has been planned and divided into two sub-projects:

- 1. Volunteer-based training in CPR and use of defibrillators in the Norwegian Football Association's quality clubs
- 2. Defibrillators available at football stadiums

The Norwegian Football Association (NFF) has approximately 450,000 members and represents the largest specialised association in the NIF. The NFF's quality clubs have been selected for participation in the pilot project as these are the best organised clubs in the Association. In addition to the active members, coaches, parents/guardians, managers and support personnel will be involved. If the pilot project is successful and funding secured, we are planning a main project during which we aim to provide the same opportunities to the rest of the NIF's organisation.

Aids

The project will purchase equipment to allow the football

clubs to provide training in CPR and use of a defibrillator. On payment of NOK 5,000, the clubs receive the following equipment:

- 1 defibrillator
- 1 outdoor heated cabinet so that the defibrillator is unlocked and available to everyone 24/7.
- 2 defibrillators for training purposes
- 2 Little Anne QCPR training dolls

The clubs are also offered the following learning resources:

- 3. E-learning: Norwegian Resuscitation Council's Basic CPR e-learning (www.nrr.org/no/)
- 4. Self-developed instructional videos, with associated written instructions and illustrations in a PDF file, which we publish on the NFF's portal – www.Treningsøkta.no.
- 5. Download and use of Laerdal's QCPR learner app for immediate quantitative feedback on performance of CPR during CPR training with dolls.

If we decide to go ahead with the main project, we aim to collaborate with Laerdal Medical on the development of an app containing the following functions:

- 6. E-learning and instructional videos.
- 7. Training session in CPR with Little Anne QCPR doll and quantitative feedback
- 8. Test session. Five-minute test session in CPR where the athlete must score e.g. 98% on the quality of chest compressions and rescue breaths to pass the test
- 9. The data is archived anonymously in a cloud-based system and can be used to compare results.

Duration and funding

The pilot project has a duration of two years (August 2019 to August 2021). If adopted, the main project will start in the autumn of 2021.

- We have received NOK 7 million from the Gjensidige Foundation.
- Voluntary efforts and self-financing.

In addition to significant voluntary efforts, the NFF and the project group will provide funding of approximately NOK 500,000 per year for the development of the teaching programme.



Results

The pilot project is in the planning phase and the project is scheduled for start-up in the clubs in January/February 2020. We have established the following evaluation points for evaluation of the pilot project:

- 1. **Registration of defibrillators available at football stadiums**
Based on data from the public defibrillator registry at www.113.no, a zero-point measurement of available defibrillators at football stadiums was conducted in the autumn of 2019.
- 2. **A new process to chart defibrillators** at the NFF's facilities will be carried out in March 2020 and at the end of the pilot project (spring/summer 2021).
- 3. **Training in CPR and use of defibrillator**
Registration of number of:

- a) CPR training sessions completed in the clubs
- b) eLearning completed
- c) Number of page views and downloads on
- d) Number of quality clubs

4. Evaluation of cardiac arrest during physical activity and sports

At the Oslo Sports Trauma Research Centre (OSTRC), the Norwegian School of Sport Sciences (NIH) and the Norwegian Cardiac Arrest Registry (NorHSR), a doctoral research fellow is making good progress on the project entitled "Cardiac arrest during sports and physical activity in Norway". All patients aged between 12 and 50 who have suffered a cardiac arrest with assumed cardiac cause in 2015-2017 are included in the project.

Project Manager

Hilde Moseby Berge
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Competent and safe minority women – an important resource for first aid preparedness

For many years, the MiRA centre has observed how minority women, particularly those who are unemployed, are a vulnerable group in terms of access to basic swimming training and first aid training. At the same time, the minority population is over-represented in figures relating to drowning accidents and fires

MiRA, together with minority women and with the support of the Gjensidige Foundation, has decided to invest in strengthening expertise by providing e.g. first aid courses, lectures and workshops both locally and nationwide.

Project goals

- Develop competent and safe minority women as a resource for first aid preparedness
- Reinforce basic swimming and safety expertise in and nearby water. Provide knowledge about first aid and life-saving to minority women.
- Strengthen the focus on minority women as an emergency medical resource in the local communities.

Aids

During the first year of the project (2019), we developed the information leaflet “Do you want to save lives?” in Norwegian, English and Arabic. This can be ordered via our website and is distributed via our resource group comprising minority women and our national network.

Duration and funding

2019 – 2021

The project is funded by the Gjensidige Foundation.

Results

The project has three sub-goals and we have achieved the following within the sub-goals in 2019:

Sub-goal 1: Improved swimming and life-saving skills

- In total, 322 women have improved their swimming skills and 31 women have learned to swim.
- Two life-saving courses have been completed and the MiRA centre now has eight lifesavers in addition to our project coordinator.

Sub-goal 2: Increased available first aid and life-saving knowledge

- Via our work on first aid, we have reached out to more than 350 women and young girls. We have also

gained contact with several hundred via different stands, participation at festivals, lectures and information meetings at the MiRA Centre. Relevant activities have been:

- Two first aid courses held in 2019. 55 women completed the course.
- In addition, refresher courses have been arranged for a total of 41 women who took the first aid course with us in previous years.
- Once a month, the MiRA Centre has arranged workshops with refresher and guidance exercises. Three of these workshops have been major workshops with 30-40 participants, at which the National Association for Heart and Lung Disease (LHL) and the Norwegian Air Ambulance Foundation have contributed to the academic content about strokes and the “Help 113” app.
- On 31 May – 2 June, we also arranged a trip to a cabin, including a meeting for the participants from the first aid courses. 20 women and three children took part in the trip.

Fire safety: The MiRA Centre and Oslo Fire and Rescue Agency

- In cooperation with Oslo Fire and Rescue Agency, we completed two courses on fire safety and prevention in 2019.
- We have also organised a practical firefighting course, where more than 45 women and young girls were allowed to practice firefighting.

Information brochure and information distribution

An information brochure has been completed on first aid, printed in Norwegian, English and Arabic. The brochure has so far been distributed to more than 2,000 women and young girls via our well-established supervisors who are in contact with minority women locally in Oslo’s neighbourhoods.

In addition, we have sent out over 800 brochures by mail to adult education centres and our network partners in several parts of Norway.

Many of the women in the resource group have made good progress on communicating and sharing their knowledge in their local environments, for example at the library, school and other meeting places close to the neighbourhood where women and young girls with minority backgrounds meet. We have also participated at several festivals, including the Vær-Stolt (Be Proud) festival at Holmlia, the Mela festival in Oslo, the Globus cultural festival in Drammen and Ringerike festival in Hønefoss along with several other stands and information meetings.

Sub-goal 3: Minority women as an emergency medical resource

RESOURCE GROUP Early in the year, we established a resource group consisting of women and young girls. The participants have played an important role as resource persons, both for swimming and first aid. Together with other women at the MiRA Centre, they have also communicated knowledge and information about first aid and its importance in their neighbourhood, and about prevention work by providing information and motivating more people to take part in first aid courses and workshops at the MiRA Centre. The resource groups’ knowledge of their own neighbourhoods has played a decisive role in the involvement and recruitment of women and young girls in this process.

MAKING THE PROJECT AND THE VOLUNTARY WORK VISIBLE

We are constantly working to highlight what is happening in the project on both Facebook, Twitter and Instagram to our more than 3,000 followers throughout Norway. Articles have also been written in our monthly newsletter and professional material that is distributed to more than 1,000 people each time.

COOPERATION

- **At a local level** we have signed a cooperation with Holtet upper secondary school (paramedic training, first aid and highlighting paramedic training among young girls with minority backgrounds).
- **At a national level**, we have also started distributing information and by doing so have already visited the Refugee centre in Stavanger, where we gave a five-hour lecture on first aid (both theory and practice) for participants on the introductory programme. In addition, we have visited Fredrikstad adult education centre and held lectures about Empowerment, first aid and how women of a minority background can get involved in this work in their local environment.

At the end of 2019, we held an evaluation meeting with content relating to the subject of first aid and Empowerment, at which 72 women and young girls who had taken part in the swimming and first aid activities evaluated the project and how it had contributed to their personal lives and, not least, their neighbourhoods.

MiRA Centre website www.mirasenteret.no

Project Manager

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Street football teams save lives

The Football Foundation has organised street football teams in 22 of Norway’s football clubs playing in the Norwegian “Elite” league and OBOS league. These football teams are a low threshold activity for people struggling with drug addictions, and the aim is to provide a better life and reduce drug use among the players.

With the “Street football teams saving lives” initiative, we aim to provide life-saving expertise to players and the support organisation for the teams, organised by the Football Foundation. Our players, who are resource persons of all ages and have former or present addictions, will gain expertise in how to administer life-saving first aid and who to call in an emergency. Our players are active at sporting arenas by being a part of a street football team and a club, and several are working or at school. Many also have access to arenas that are less accessible to others and spend time with people in a particularly vulnerable situation. It is our belief that our street football team players represent a special and important target group in relation to the voluntary work to reinforce total emergency preparedness in Norway and to save more lives.

Under the project, we have invested in training both players and coaches in the street football teams, who can also represent resources not only for the street football teams but for the clubs. By assigning social tasks to our players, such as providing life-saving first aid, the initiative will also promote a feeling of achievement and generate involvement. This may represent an important contribution to the work required to help those who want to become sober/clean and gain a job or education. As such, the initiative can help save lives in several ways.

Project goals

With the “Street football teams saving lives” initiative, we aim to provide life-saving first aid expertise to players and the support organisation for the teams, organised by the Football Foundation.

Aids

Training the street football team players and coaches to become instructors in life-saving first aid has opened the door to development of expertise. These instructors will in turn provide training for their own teams.

The training has been provided by qualified instructors from Norwegian Red Cross. We have used learning and information material and equipment already developed from local Red Cross associations.

Duration and funding

2019 – 2020

The project has received NOK 700,000 from the Gjensidige Foundation to implement the initiative in our 22 street football teams.

Results

In the autumn of 2019, we trained 27 persons (players and coaches) as life-saving first aid instructors. We have involved 14 clubs in the training, who have received more than two days with a focus on practical training. These have in turn provided training to their own players.

Fotballstiftelsen.no and the Football Foundation on Facebook.

Project Manager

Hedda Bie – post@fotballstiftelsen.no



First aid expertise at all national biathlon venues in Norway

Biathlon venues bring together a high number of athletes and spectators. Based on events in recent years when top athletes have suffered a cardiac arrest during a competition and training, we aim to strengthen emergency preparedness so we can deal with this type of incident. The same applies to the spectators.

Project goals

All volunteers taking part in national biathlon events in Norway shall have first aid expertise and the equipment needed to administer first aid.

Aids

50 defibrillators have been distributed with accompanying stretchers, first aid boxes and wool blankets. In addition, elected representatives of the respective clubs have completed first aid courses. As a result, both equipment and expertise are up-to-date for competitions and training sessions at our largest biathlon venues.

Duration and funding

1 May 2018 – 31 December 2019
The project is funded by the Gjensidige Foundation.

Results

The 50 largest biathlon venues in the country have been involved in the project. The clubs/venues have received an equipment package consisting of defibrillators, cabinets for storing defibrillators outdoors, first aid boxes, stretchers with belt and wool blankets. This has a significant value, and the clubs are delighted to have received both the expertise and equipment.

First aid courses have been organised for the entire administration in the biathlon foundation, all the athletes at elite, recruit and junior level and the entire support organisation.

In total, approx. 2,500 persons have completed first aid training.

The first aid courses have been held by the Red Cross.

The Norwegian Biathlon Federation is very pleased with the project.

Project Managers Marian Lyngsaunet (resigned) and Stig Flatebø – stig.flatebo@skiskyting.no





Saving Lives Together – Always prepared!

The Norwegian Guide and Scout Association aims for all its members to be safe during scouting activities and confident in providing first aid.

Project goals

Guides, scouts and leaders shall feel confident when providing first aid in society at large and during guide/scout activities. The guides/scouts and their leaders have been offered updated training in first aid.

Aids

The guide/scout programme is to be reviewed, updated and supplemented so that it is relevant for first aid training for all age groups.

National events are organised so that they can be used as arenas for first aid training. The different guide/scout districts will be offered equipment packages to be used for drills in CPR and use of a defibrillator.

The different districts will also be offered the option of adopting a defibrillator and keeping it in a place that is available to all, by placing it in a guide/scout cabin/building where there is little or no defibrillators at present.

Duration and funding

1 January 2018 – 31 December 2019

The Gjensidige Foundation – 100%

Results

The guide/scout programme has been updated and its content relating to first aid is in line with the recommendations and has been customised to the progress of the school project (LHL).

First aid sessions have been held at three national guide/scout events (involving approx. 100 participants) in addition to posts at Barnas Camp Villmark (wilderness trade show in Lillestrøm) where we estimate that at least 500 persons tried CPR and where we gained a strong profile for the Saving Lives Together voluntary campaign.

16 equipment packages, dolls and defibrillators for training purposes have been distributed to guide/scout districts nationwide, and 18 defibrillators have been installed in guide/scout buildings and cabins.

The project report has not yet been submitted to the Gjensidige Foundation, so these figures are provisional estimates. We hope the numbers will be higher when we gain knowledge of use and how many people have taken part in training and drills in the districts that have received the equipment.

Project Manager

Erling Husby – erling.husby@speiding.no

Safety on trips

A generally high level of activity on trips teamed with a clear goal to ensure good and safe management in the event of undesired incidents prompted a request for increased first aid expertise among guide and scout leaders, children and adolescents.

Project goals

Ensuring our members are able to prevent and handle situations they may encounter and distribute knowledge about first aid and safety to other children and adolescents in their local environment.

Aids

A concept named “First aid 1-2-3” has been developed and distributed to all guide and scout leaders, together with first aid equipment that can be used for drills. The resource package makes it easier to learn first aid in local groups. The resources from the package that were distributed to all guide and scout groups is published in the “Activity bank” on our website.

In addition to the resource package, we have organised an outdoor festival named “Peftival 113” focusing on first aid and safety. More than 180 persons from all over Norway took part, along with a young staff of 50 persons.

Defibrillators have been purchased for training purposes, and six new first aid instructors received training and certification to hold the Norwegian basic first aid courses and courses in semi-automatic defibrillators, so that we have more people in our own organisation who can provide training for volunteers. These instructors provide training for the guide and scout groups and associations throughout Norway, and will be a major resource for the dissemination of knowledge about first aid and safety in the future.

Duration and funding

5 May 2019 – 31 January 2020

The project is funded by the Gjensidige Foundation.

Results

The guide and scout groups have provided feedback stating that the first aid cards and training equipment were very welcome, have helped the groups keep a focus on first aid training and provided valuable content for guide and scout meetings and trips nationwide.

The “Peftival 113” festival was a success with 180 participants and a very clear common theme throughout the

entire event. The training sessions held were fire safety, basic first aid, basic CPR, searching for missing persons, life-saving in water, emergency preparedness on patrols and drills involving different realistic accidents. The festival also comprised concerts, Peftival races with various tasks to be performed in order to qualify for the prize draw, such as placing a friend in the recovery position and securing the scene of an accident before dinner.

In total, 6,000 guides and scouts received first aid training and the new first aid instructors shall hold more first aid courses for guide and scout leaders in 2020.

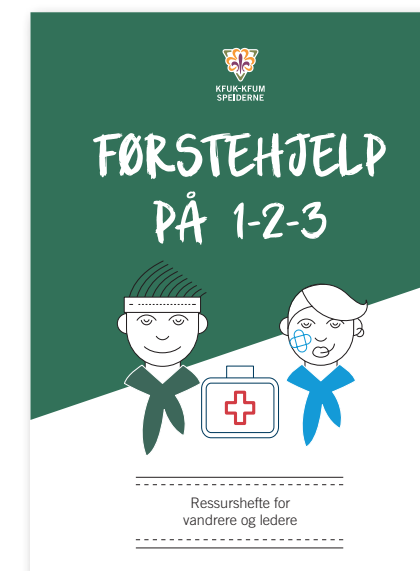
<https://kmspeider.no/>

<https://kmspeider.no/programprosjekter/ressurshefte-forstehjelp-1-2-3-article6453-2912.html>

<https://kmspeider.no/lederprogram/ledelseskurs-arti-cle3237-1029.html>

Project Manager

Elise Irene Kjelling – elise@kmspeider.no



Ida Eides Minnefond

Den ideelle stiftelsen har som formål å redde liv, både i og utenfor idretten ved blant annet å øke kunnskapen om livreddende førstehjelp i norsk topp- og breddeidrett. En kjerneaktivitet er å dele ut hjertestartere med tilhørende hjerte- lungeredningskurs til norske idrettslag.

Project goals

The foundation’s objective is to save lives, both in and outside of sports, by:

- increasing knowledge of life-saving first aid in top-level and recreational sports in Norway;
- contributing towards synergies, knowledge and awareness of first aid and defibrillators, including holding first aid courses, increasing access to more defibrillators etc.;
- influencing decision-makers to increase awareness of cardiac health in sports; and
- contributing towards an increased focus on and research into hidden heart defects.

Our target area is sports, but we also hope to reach as many people as possible.

Aids

Two annual hand-outs of defibrillators with related CPR courses.

Contributing to an increased focus on the importance of defibrillators and CPR by ensuring a high profile on social media, digital surfaces and printed media.

Duration and funding

From 2018
Funded by donations from private individuals and businesses.

Results

Donation of 12 defibrillators during one hand-out on 2 September 2019. Seven of these were installed and five are mobile, in the “Ida rucksack” that we have developed together with our supplier.

Handed out 13 defibrillators in collaboration with Nor-Engros to all the World Championship medal winner clubs from the World Ski Championships in Seefeld.

Signed a cooperation agreement with Gjensidige in Valdres targeting distribution of defibrillators and courses to sports clubs in Valdres. (Gjensidige Valdres fully financed the project with NOK 300,000).

Created website, www.idaeidesminnefond.no, with information film about the use of defibrillators and CPR. The film has also been shared on Facebook, with 78,000 views to date.

New hand-out on 3 April 2020, with application deadline 15 March 2020.
We plan to hand out 10 defibrillators received from the Gjensidige Foundation, in addition to the defibrillators we finance ourselves.

Website: www.idaeidesminnefond.no
Instagram: [@idaaeidesminnefond](https://www.instagram.com/idaaeidesminnefond)
Facebook: <https://www.facebook.com/Ida-Eides-Minnefond-305531863378532/>

Project Manager Nils-Ingar Aadne – nilsi@nilsi.no



Saving 200 lives together. Parents of young children and pregnant women

Accidents represent one of the greatest threats to the lives and health of children. Some accidents and injuries are almost impossible to prevent, but luckily there is a lot we can do to ensure child safety.

Under the project, we have developed a programme for prevention and first aid for children aged 0-5, and for CPR for babies and children and the use of semi-automatic defibrillators. We have also included CPR and use of semi-automatic defibrillators for pregnant women.

Project goals

The target group is pregnant women and parents of young children in Ullensaker municipality, and we have in cooperation with Ullensaker health clinic and kindergartens in the municipality, set up and held courses for the target group. The project’s goal is to reach 500 persons who are parents of young children in the municipality during the project period.

Aids

We have developed a fridge magnet with key words for CPR for babies and children. We have also developed

two folders for first aid and prevention of accidents for children aged 0-2 and 3-5. In addition, we have developed Power Point presentations for the courses. We have also further developed existing material.

Duration and funding

1 January 2019 – 30 June 2020

The Gjensidige Foundation – NOK 720,000 NLS Norway’s life-saving association NOK 25,000, as well as voluntary work.

Results

As of 21 January 2020, we have completed 22 courses for 348 parents of young children in Ullensaker municipality.

Project Manager

Linda Melander – linda.melander@livedredning.no

Doctoral Research Fellow Saving Lives Together

We currently lack knowledge as to whether social projects/campaigns relating to life-saving first aid, such as Saving Lives Together, have an impact on survival rates in the event of acute illness or injury for persons not in a hospital.

Project goals

We shall carry out research to chart the utility value and impact of Saving Lives Together in relation to society at large.

We aim to study which aspects promote and which obstruct implementation of the voluntary campaign. Research shows that it is often difficult to implement major social projects/campaigns, as the gap between theory and practice is often difficult to close in order to create a complete project. Norway has a history of similar campaigns, and these have often had a limited lifetime. Why is this?

Aids

Plans have been developed to establish a database for registration of emergency helper assignments, and to use the data from this for research purposes.

Duration and funding

Six years from and including 1 January 2019. RAKOS is funding the project.

Results

The project is in its start-up phase.

<https://helse-stavanger.no/fag-og-forskning/kompetanse-tjenester/regionalt-akuttmedisinsk-kompetansesenter-i-helse-vest-rakos/rakos-phd-stipendiat-innen-akuttmedisin>

Project Manager

Hege Kristin Kjærvoll – hege.kristin.kjervoll@sus.no



Doctoral Research Fellow
Hege Kristin Kjærvoll



Research council in Saving Lives Together

Simple, reliable, up-to-date and free knowledge about life-saving first aid is not easy to find for the general public, schools, businesses and other relevant users and communicators. The national first aid voluntary campaign aims to set up projects and subject-related messages about life-saving first aid that are knowledge-based and easily available.

Project goals

The research council shall advise the Norwegian Directorate of Health on matters relating to the national first aid voluntary campaign, Saving Lives Together. The research council shall help ensure that projects and information for the public regarding life-saving first aid is, to the greatest extent possible, knowledge-based.

Aids

The research council shall provide professional advice on matters such as:

- how different parts of the public's knowledge and skills related to life-saving first aid can be reinforced
- how the health service can use helpers to help save more lives and reduce permanent disability in the event of time-critical emergency medical conditions
- how the emergency service (emergency medical communications centre (AMK) and emergency medical centres) can contribute to saving more lives and reducing permanent disability in the event of time-critical emergency medical conditions in persons not in a hospital

Duration and funding

The research council members are elected for three years at a time.

The research council chairman receives remuneration from the Directorate of Health. The Directorate of Health performs the secretariat function for the council.

Results

Advice and statements issued:

- Fact and knowledge base for the national first aid voluntary campaign, Saving Lives Together.
- Professional recommendation on whether acetylsalicylic acid (blood-thinning drug that can be used in case of suspected heart attack) shall be included in standard equipment and treatment protocol for emergency helpers
- Professional recommendation on whether oxygen shall be included in standard equipment and treatment protocol for emergency helpers
- Preliminary assessment of whether a programme for voluntary people who can respond rapidly to possible cardiac arrests in their local area (hjerteløper) should be established in Norway.
- Start-up of project to create a definition catalogue for first aid

Other:

- The research council continuously supplies material to the www.113.no website.
- The research council has implemented a process to prepare a research strategy for Saving Lives Together.

A website has been opened for the research council, where agendas and minutes of meetings are published consecutively:

<https://www.helsedirektoratet.no/om-oss/organisasjon/rad-og-utvalg/sammen-redder-vi-liv>

Project Manager

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Follow-up of first aiders

Carrying out life-saving first aid can be stressful. Some persons may find the experience traumatic, while others may suffer from guilt about their own first aid efforts. Some persons worry about the outcome for the patient and others may be anxious about whether they may have caught an infection e.g. when performing mouth-to-mouth resuscitation for a cardiac arrest or when in contact with blood in the event of a severe injury.

At the time of writing, there is no offer of help for first aiders so they can discuss and process difficult experiences in their role as first aider. Nobody records who administered first aid and nobody visits the first aiders after an event. Normally, the health service does not divulge information about the outcome of such events. This is due to their legal duty of confidentiality.

Healthcare personnel often have debriefings after serious incidents, but first aiders are almost never involved in such debriefings, even when their efforts have had a major impact on the outcome. In other words, there is a huge gap between the resources invested prior to an incident (preparation), during an incident (the life-saving chain) and what is offered after an event (processing). By investing some resources in processing after an event, the stress for the first aider may be reduced and the public will feel safer in taking on the role of first aider.

Project goals

The project's goal is to develop a system for follow-up of first aiders that can be implemented by the public health service. By providing a good service for volunteers (laymen) who have helped provide life-saving first aid, it is our hope that even more people will decide to administer first aid in the future.

Aids

The plan is to provide the follow-up as a service for persons who have administered or contributed to first aid, including the following measures:

TECHNICAL REVIEW

A technical review of the actual incident shall allow the first aider to talk about his/her efforts during the incident, but also his/her thoughts, anxieties and feelings. The review will be led by experienced healthcare personnel who have received debriefing training. The purpose is to allow the first aider to review the incident with professionals, making it easier for the first aider to feel a sense of achievement after an incident. Feeling that you

have support after a critical incident may e.g. prevent post-traumatic stress.

INFORMATION ON THE OUTCOME

Many first aiders want to know what happened to the patient, including if the patient died. It is also important to ensure that the first aider is not left with feelings of guilt in the event of a negative outcome (we know, for example, that approx. 86% of all cardiac arrests result in death). For healthcare personnel, legislation allows them to discover the outcome of patients for whom they have provided treatment. It is only reasonable for volunteers (laymen) and emergency helpers who provide life-saving first aid to be offered the same information, but this requires the consent of the patient or the patient's relatives.

FOLLOW-UP REGARDING RISK OF INFECTION

It is very rare for first aiders to be exposed to infection. However, the risk of infection may result in anxiety. Healthcare personnel exposed to infection (needles etc.) at work are supported afterwards with established procedures that ensure tests for any infection and preventive treatment when there are indications of infection, possibly supplemented with charting of infection status from the relevant source. This sub-project will allow for adequate follow-up of first aiders in situations where there is reason to suspect a risk of infection.

FURTHER FOLLOW-UP

Most first aiders do not need further follow-up after the type of review planned under this project. If, however, any first aiders show signs of illness due to an incident (anxiety, depression, suicidal thoughts etc.), they will be referred to the health service for diagnosis and treatment.

Duration and funding

The project is initially funded for one year (2020). The Directorate of Health and RAKOS have provided funding for the first year of operation.



Results

To date, the project plan has been prepared, funding obtained for the first year of operations and a vacancy announced for the position of Project Manager in the winter of 2020.

Ref.: <https://helse-stavanger.no/fag-og-forskning/kompetan-setjenester/regionalt-akuttmedisinsk-kompetansesenter-i-helse-vest-rakos/prosjekter/oppfolging-forstehjelpere>

Project Manager

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Norwegian Cardiac Arrest Registry

In order to improve treatment of patients suffering a cardiac arrest, we need to know current status and compare this with internationally recognised goals.

The purpose of the Norwegian Cardiac Arrest Registry is to improve the quality of health-related assistance for this group of patients by promoting preventive work, quality improvements and research. In addition, the registry can lay the foundations for control and planning of the health services. The registry is part of the Norwegian Cardiovascular Disease Registry and is governed by the Norwegian Personal Health Data Filing System Act and specific regulations.

Surviving a cardiac arrest when not in a hospital has for a long time been seen as an important indicator of the quality of the prehospital systems, where every part of the life-saving chain has to function in order to achieve good results. The Cardiac Arrest Registry is used to measure and improve every part of the life-saving chain, and to work on encouraging people to take responsibility and local improvements. Norway has signed the statement of intent from the Global Resuscitation Alliance, representing a goal to increase survival rate by 50%. Current incidence figures in Norway are approx. 7/100,000 person-years, and the goal is to increase this to 11/100,000 person-years.

Project goals

The Cardiac Arrest Registry shall comprise complete registration of all persons treated for cardiac arrest in Norway. We shall analyse and present data back to those who take part in the treatment, in order to stimulate local improvement projects. In relation to the target areas in the voluntary campaign, this means e.g. feedback to the nationwide 113 centres about how they managed phone calls about a suspected cardiac arrest. We also monitor the volume of patients who receive CPR and treatment with a defibrillator before the ambulance arrives.

A number of projects under Saving Lives Together will result in improvements in the public's efforts when dealing with acute and life-threatening illness and injuries, as the public will be better able to recognise an emergency and call 113, and will be able to provide first aid in collaboration with the healthcare personnel in the 113 centre. As our registry follows the quality objectives originating from the 113 calls regarding cardiac arrest, we also monitor the effect of the improvements whereby the general public are better prepared for such calls. In Norway, we have for many years had a very high share of cardiac arrest patients who have been given CPR before the ambulance

arrives. The registry aims to help sustain this high percentage and discover whether there are any areas in the country or special circumstances where further efforts are required.

Aids

The Cardiac Arrest Registry is working internally on improving the quality of records sent from every part of Norway. We recruit and train the persons who shall record this information, so that they have the same understanding of data collection and definitions and the same working methods.

We also work on providing feedback to the different parts of the health services, based on the results in the registry. During its first six years, the registry has focused on developing good data collection, good data quality and data from all regions.

Now that the registry receives data from all over the country, the focus has shifted to using data to provide feedback on what has been reported.

We will be able to use these data to evaluate the effect of and requirement for more efforts for every part of the voluntary campaign.

We also provide data to several research projects:

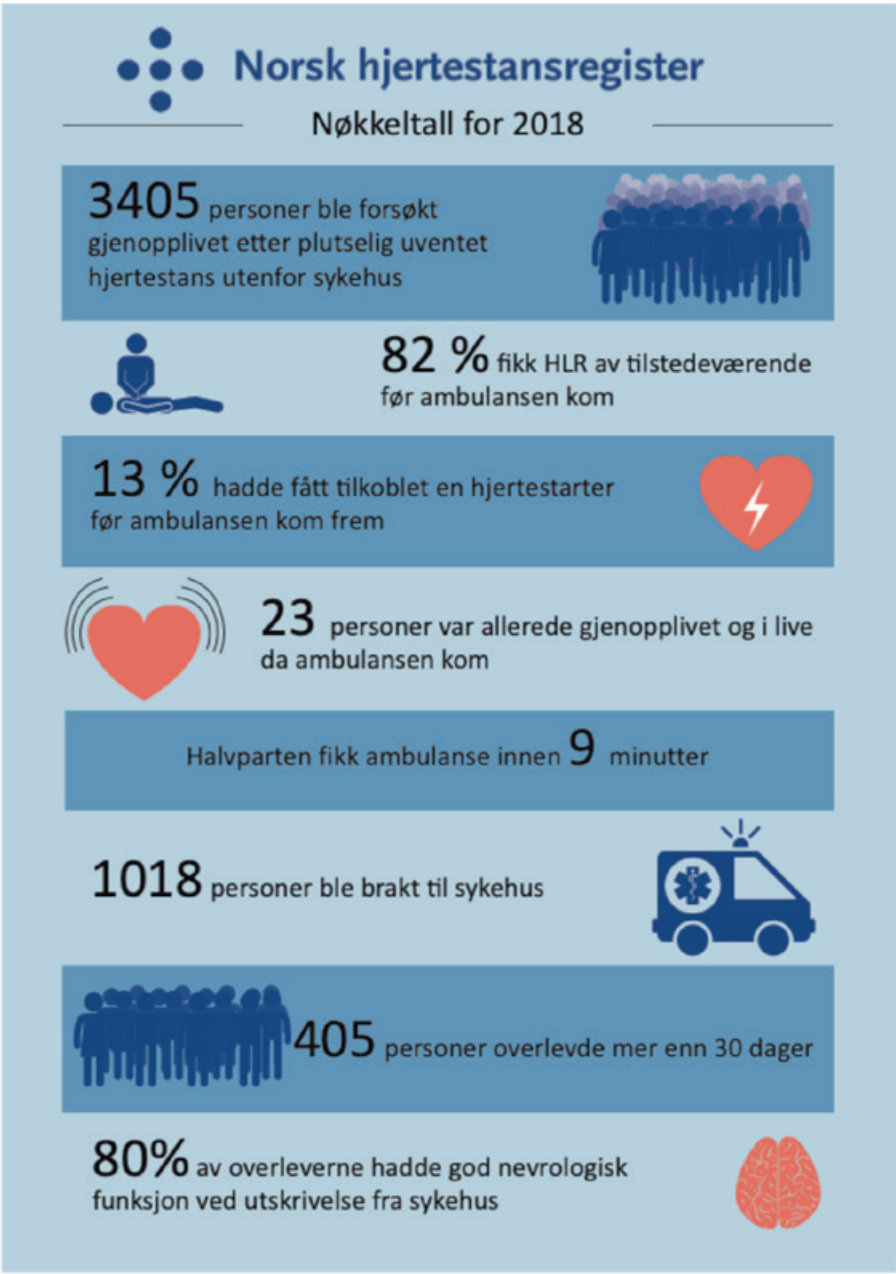
REGSTANS – link between the Cardiac Arrest Registry and other health registries to learn more about patients before and after cardiac arrest: What was their non-fatal health loss before cardiac arrest – are there any groups that are at greater risk? What is the non-fatal health loss for those who survive – is there a need for better follow-up?

SPORTS and CARDIAC ARREST – review of cardiac arrest patients under the age of 50: Is exercise dangerous? What is the status of young cardiac arrest patients who survive?

CARDIAC ARREST IN NORWAY – regional differences and potential for improvements based on targeted feedback to the various players in the life-saving chain. Including evaluation of the public defibrillator registry.

Duration and funding

The Cardiac Arrest Registry is operated as one of 52



national quality registries in the specialist health service, and we will continue as long as there is a need for follow-up of cardiac arrest patients.

The employees of the national registry are permanent employees at NAKOS, Oslo University Hospital HF. The registrars in each health trust are employed locally and spend parts of their working hours on registry work.

Results

The registry publishes two quality indicators three times a year, and publishes a selection of the results, with the option to view different regions on the national quality registry websites. In addition, the results are described

in more detail in annual reports that are available on the same websites.

For description of structure and results: <https://www.kvalitetsregistre.no/registers/norsk-hjertestansregister>. Visit the website to download the annual reports (PDF) or view selected results and quality indicators.

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Defibrillator registry 113.no

Starting CPR early on and use of a defibrillator are decisive in saving more lives when a person suffers a cardiac arrest when not in a hospital.

The chance of survival may be increased by 50% if a defibrillator is used before the ambulance arrives. In 2017, the percentage of patients with cardiac arrest who had been treated with a defibrillator before the ambulance arrived was 13%. Defibrillators are found in numerous businesses and organisations, but these have not been visible as a resource for the public or for the 113 centres. When the owners register their defibrillator in the public defibrillator registry at www.113.no, they become visible to the 113 centre, increasing the chance that they may be used in the event of a cardiac arrest in the local environment. At the same time, this represents an increased responsibility for the owner to pay attention to keeping their defibrillator available and ready for use. As such, the owners contribute to improved emergency preparedness in their local environment, which may in turn result in increased survival.

Project goals

Providing information on the location of defibrillators to the public and 113 centres, increasing the share of patients who are treated with a defibrillator while waiting for an ambulance.

Making defibrillator owners aware of the procedures for maintenance and training required to keep defibrillators operational, and making defibrillators as widely available as possible. We encourage all owners to ensure that all defibrillators are available 24/7 and not kept behind locked doors.

Training the general public about defibrillators and providing information that defibrillators are safe to use, so that more people dare to use them.

Aids

A public defibrillator registry has been developed on the www.113.no website, where owners of defibrillators can register and maintain the information about their defibrillator.

A website has been developed where the general public can see the location of defibrillators in their local area and have a personal emergency preparedness plan for where to find a defibrillator if necessary. An API has been developed to display the location of all defibrillators from the registry in every emergency medical communication centre (AMK) in Norway. With this API, it is also possible to show the defibrillators in other map

systems, such as the Help 113 app (Norwegian Air Ambulance), overview maps for municipalities, the Norwegian Mapping Authority (Kartverket) etc.

Automated systems have been developed to remind defibrillator owners by email to carry out inspections, verification and report the need for new electrodes. The registry also functions as maintenance documentation, ref. section 11 of the Regulations relating to medical devices.

The project started in January 2016, was launched in April 2017 and implemented the operational stage at the South-Eastern Norway Regional Health Authority in 2018.

System development was financed by project funds from the Directorate of Health. The South-Eastern Norway Regional Health Authority has now taken over operations.

By the autumn of 2017, the defibrillator registry was visible to all 16 emergency medical communication centres (AMK) in Norway. A total of 15,000 defibrillators have now been registered in the registry, of which 6,750 are visible. For the remaining defibrillators, we lack updated status, complete information and/or the electrodes have passed their expiry.

The registry has received reports about several incidents that indicate that the 113 centres have used the defibrillator registry to direct the person calling 113 to a defibrillator, which has then been used before the ambulance arrived.

The registry and the system for follow-up of defibrillator owners has helped increase awareness of the need for control and inspection of defibrillators.

The defibrillator registry has its own pages on website www.113.no as part of the 113 First Aid project. We are on Facebook page: 113.no and Instagram account: 113_forstehjelp

Courses are available for 113 operators in the NAKOS portal, about how to use the registry as part of the systematic questions asked and advice provided to callers, and more information about the defibrillator registry at www.nakos.no

Project Manager

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113 First aid

Norway’s public website for first aid – 113.no

The National centre of expertise for prehospital emergency medicine (NAKOS) works with teaching, research and procedures within emergency medicine for persons not in a hospital.

The centre of expertise acts as a consultancy service for central health authorities and health trusts and is, for example, responsible for auditing and further development of the 113 centres’ decision-making support tool, Norwegian index for medical emergency assistance, the Norwegian Cardiac Arrest Registry and the public defibrillator registry. Plans have been made to incorporate the secretariat for the Norwegian First Aid Council into NAKOS.

General public surveys have shown that 50% of the general public feel they lack knowledge of first aid. It is therefore important to make sure simple, reliable, up-to-date and cost-free knowledge about first aid is available.

The public defibrillator registry needs a portal for registration of publicly available defibrillators, making sure their position is known.

General public surveys have shown that many people are unsure who to contact for teaching/courses in life-saving first aid.

The Saving Lives Together voluntary campaign needs to communicate information on its projects, strategy and efforts. The 113 First Aid website shall help convey information about the sub-projects in the voluntary campaign and the results of this joint initiative.

Project goals

- The 113 First Aid (www.113.no) website shall be a platform where the public, media, companies that provide first aid courses and other stakeholders can easily find knowledge-based and up-to-date information about:
- life-saving first aid in time-critical emergency medical conditions such as cardiac arrest, stroke, heart attack and serious injuries.
 - Information on who the general public can contact in case of acute illness or injury
 - Information on how a 113 centre works; staffing, resources, how they work with others, what you will be asked when you call 113 etc.
 - Sub-projects and contact information for the project management in the national first aid voluntary campaign, Saving Lives Together

Other objectives:

- The domain name should be easy to remember and associated with the emergency phone number 113, and should be near the top of the Google hit list when using common search words such as; life-saving, first aid, stroke, cardiac arrest, heart attack, serious injury, etc.
- The domain shall act as a portal for registration of publicly available defibrillators in the public defibrillator registry, making sure their position is known.
- The content of the domain should encourage more people to participate in first aid courses.

Aids

The domain is developed in close collaboration with interaction designers to ensure user-friendliness and to create recognition and confidence among users of the site.

Search word analyses have been performed to ensure use of a language that audiences use in searches for first aid knowledge and that is easily understandable and appealing.

First aid messages are quality assured during review by an editorial council and professionals.

Several user surveys have been conducted to get feedback on content and user-friendliness.

The focus has been on having a design tailored to the requirements for universal design in order to provide a good user experience. The website system has a responsive design, customised to PCs, tablets and mobile phones.

The design is linked to and used in a Facebook page and Instagram account to increase reach. Several social media ad campaigns have been run to reach more users.

Duration and funding

Project start-up was May 2018. The development project has been completed. The work to ensure permanent operations and further development of the domain is in the planning stage.



The project has been funded by the Directorate of Health.

Results

The domain was launched on 2 June 2019. Google Analytics for the 113 First Aid (www.113.no) website shows that the domain has 50,500 users after relaunch with the new front page.

Facebook page followers: 2,156 with reach of 3,670 for posts. Followers on Instagram: 1,076

The project has its own website: <https://www.113.no>
Facebook page: 113.no Instagram: 113_forstehjelp

Project Manager

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International Restart a Heart Day

– marked at Stavanger University Hospital

In case of cardiac arrest, it is essential that those present quickly initiate CPR. In many cases, the persons present do not understand that the patient has suffered a cardiac arrest and require instructions from 113 that they have to start CPR. This is partly due to the fact that it is difficult to understand what abnormal breathing is. Therefore, the public should call 113 immediately if someone loses consciousness to help them decide whether to start CPR.

Project goals

The aim of the event is to help the general public recognise the signs of cardiac arrest, immediately notify 113 and then start CPR.

Aids

In 2019, the decision was made under the project to provide information about cardiac arrest in the media. Professionals were helped by the communications department at Stavanger University Hospital and a communications adviser engaged by the Gjensidige Foundation.

Duration and funding

Helse Stavanger has marked 16 October in different ways every year since 2014.

The project was funded by Helse Stavanger, and conducted in cooperation with Team Ingebrigtsen and Laerdal Medical.

Results

A CPR competition was held at Stavanger University Hospital where Team Ingebrigtsen competed against the hospital employees and Laerdal Medical employees. The competition featured in local media and on local television. Interviews were held on local television station NRK Lokalen about cardiac arrest, including an operator from the emergency medical communication centre (AMK).

<https://www.erc.edu/about/restart>
<https://www.113.no/aktuelt/verdens-hjerte-og-lung-eredningsdag-16-oktober/>

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Emergency medical communications operator William Lassesen and senior researcher Conrad Bjørshol provide information about cardiac arrests on local TV station NRK Lokalen on 16 October 2019.



Basic First Aid course for security

Section 9 of the Act relating to security guard services requires all persons performing security guard services to complete approved training for security guards. Security guard training shall be provided according to a curriculum established by the National Police Directorate. This curriculum includes a 12-hour course in first aid.

Project goals

After completing training, all publicly approved security guards shall be able to ensure self-safety and be able to perform life-saving first aid on acutely ill and injured persons while waiting for professional help.

Aids

- The project has prepared:
- Schedule First Aid (12 hours)
 - Power Point relating to the classes
 - Instructor guide
 - Description of requirements for being an instructor
 - Practical test/trial

Duration and funding

The project was completed in 2018 and was funded by the Directorate of Health.

Results

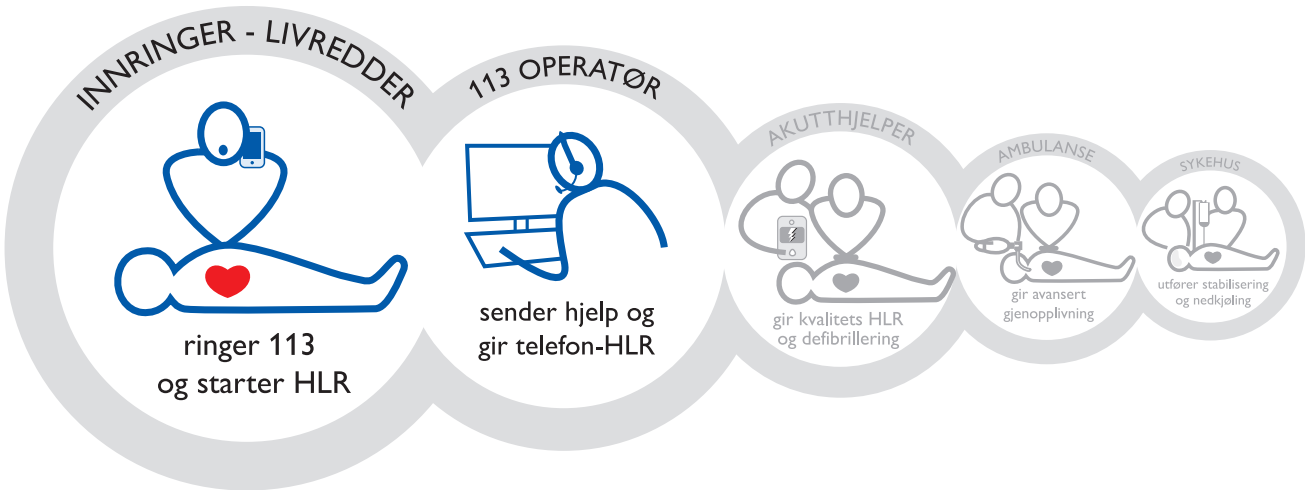
The training programme has been implemented in the mandatory training of security guards in Norway.

Curriculum National basic education for security guards:
<https://docplayer.me/52104983-Laereplan-nasjonal-grunnutdanning-for-vektene.html>

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The chain that saves lives



Sammen redder vi liv 113

