



First Nations Health Authority
Health through wellness

Introduction

The FNHA Here Another Day (HAD) CPR + AED Program aims to enhance emergency response capacity in First Nations communities across BC by providing AED kits and first aid training opportunities.

If you have questions, or need support filling out this application form, you can reach out to AED@fnha.ca.

More information on how the applications will be assessed can be found on the initiative's webpage.

Questions

Basic community information

Community name

Your name (first and last)

Work email address

Work phone number

Does your community have an AED?

1. Yes
 2. No

Community AEDs

How many AEDs does your community have?

Cardiac arrest history

Has your community experienced a cardiac arrest in the past five years?

- 1. Yes
- 2. No
- 3. Unknown

Cardiac arrest history

How many cardiac arrests has your community experienced in the past five years?

Community Responders

Does your community have a first responder program (e.g. EMR, BC Ambulance)?

- 1. Yes
- 2. No

If your community does not have a First Responder Program, are you interested in starting one?

- 1. Yes
- 2. No

Community Responders

Please describe your community's first responder program.

Community distance to services

[BC Ambulance Station Finder](#)

If applicable, what is the approximate driving time (in minutes) to the nearest ambulance station? (If not applicable, please leave blank) 

If applicable, what is the approximate driving time (in minutes) to the nearest hospital? (If not applicable, please leave blank) 

Select all that apply for your community:

Hospital

Nursing Station

Health Centre/
Clinic

AED cabinet request

If successful, would you like the AED to come with a cabinet?

1. Yes
 2. No

AED cabinet continued

Will the AED and cabinet be kept outdoors?

1. Yes
 2. No

Is there a power supply available for the cabinet?

1. Yes
 2. No

Additional community details

Does your community have cellular (phone) service

- 1. Yes
- 2. No

Does your community have Wi-Fi (wireless internet) access

- 1. Yes
- 2. No

Which connection type do you prefer for the AED?

- Cellular
- Wi-Fi

AED placement

Please select where you would like to place the AED:

- 1. Health centre/ nursing station
- 2. EMR Go-Bag
- 3. Gymnasium, exercise facility or other community gathering space
- 4. Other

AED preferred location

Please provide details on where you would like to place the AED.

Additional training and resources

If your community is not selected to receive an AED, would you like to receive information about any of the following training opportunities? Please select all that apply.

- Cardiac Crash CPR training
- First aid and CPR training from St John Ambulance
- I would not like to receive information about training opportunities

Conclusion

Thank you for your submission to the HAD Program. We have received your application.

We will reach out to you shortly with an email confirmation of your application.

If you have any questions, please feel free to contact us at AED@fnha.ca.

All our relations,

FNHA HAD Team