



Risk Management Guidelines

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Subject: AUTOMATIC EXTERNAL DEFIBRILATORS (AED)

BACKGROUND

Senate Bill 658 has modified the responsibilities of K-12 public schools with regards to implementation of AEDs. The former statute which required school administrators to provide a brochure describing proper use of an AED has been replaced with a requirement that principals provide staff with information regarding where the AED is located. The new law repeals the prior requirement that AED trained personnel be present at the initiation of AED procedures. Also, employee AED training requirements have been eliminated; no longer are AED trained employees required be on site during regular operating hours. Additionally, the former requirement that a doctor or medical director be involved in AED placement has been eliminated. Finally, the prior 30-day inspection cycle has been pushed to 90 day documented inspections.

SENATE BILL 658

S.B. 658 provides that a person or entity that acquires an AED for emergency purposes is not liable for any civil damages resulting from use of an AED to provide emergency care if that person or entity does all of the following:

- Comply with all regulations governing placement of an AED.
- Notify the local emergency medical service agency of the existence, location and type of AED.
- Maintain and test the AED according to the manufacturer’s guidelines.
- Test the AED at least twice a year (biannually) and after each use.
- Inspect all AEDs on the premises at least every 90 days.
- Maintain records of the maintenance and testing of the AED as required by the statute.

S.B. 658 also refines the requirements that building owners must follow to obtain immunity. The new statute requires a building owner, when an AED is placed in a building, to do **all** of the following:

- Annually notify building tenants of the location of the AED unit(s) and provide information to tenants about how to voluntarily take CPR and AED training.
- Annually offer a demonstration to at least one person associated with the building on how to properly use an AED in an emergency.
- Post instructions on how to use the AED next to the AED in at 14-point font.

The new bill eliminates many of the more burdensome provisions of existing law. Those changes include:

- Eliminates employee CPR training and employee use of AEDs training.
- Eliminates trained employee to respond to emergencies during normal business hours.

- Eliminates the requirement that there be a written plan that describes the procedures to be followed in the event of an emergency.
- Eliminates the inspection requirements that the AEDs be checked for readiness after each use and at least every 30 days if the AED has not been used in the preceding 30 days.
- Eliminates the requirement that any person who renders emergency care or treatment on a person in cardiac arrest using the AED activate the emergency medical services system as soon as possible and reports any use of the AED to a licensed physician and to the local EMS agency.
- Eliminates the requirement that building owners where an AED is placed ensure that tenants receive a brochure, approved by the American Heart Association or American Red Cross, which describes the proper use of an AED.
- Revises the requirement that an agent of the local EMS agency be notified of the existence, location and type of AED acquired by requiring this notification to be done by the person or entity who acquired the AED, rather than the existing law requirement that this notification be done by the person or entity that supplied the AED.
- Eliminates the requirement that the AED's maintenance and testing comply with guidelines set forth by the American Heart Association, The American Red Cross, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration (FDA) and any other applicable state and federal authority.

BEST PRACTICE GUIDELINES

These guidelines are for Districts dedicated to establishing, maintaining, and overseeing a successful Automated External Defibrillation (AED) Program. The purpose is to provide guidance on program requirements, placement, care and use, training, and other components that may be required by districts to ensure that an effective AED program is in place for those sites who choose to have AED's.

Early defibrillation will succeed only when implemented as part of the chain of survival. The links of the chain of survival include early recognition of cardiopulmonary arrest and activation of 911 by trained responders, early CPR, and early defibrillation when indicated, and early advanced life support. Establishment of early defibrillation within a strong chain of survival will ensure the highest possible survival rate. Effective programs deliver a shock to a victim within 3 to 5 minutes of collapse.

When an AED is located at public or private K-12 school, each year the principal shall ensure that the site staff receive information regarding the location of the AED's. Additionally, principal shall offer a demonstration to site health professionals regarding proper use of AED. The principal shall also ensure that instructions on how to use AED are posted next to every AED (Appendix II). Principal shall designate person to check AED device every 90 days and document inspection (Appendix I). Principal shall retain records for 5 years.

School site obligations, budgetary constraints, and/or turnover of employees responsible for these statutory requirements can result in a failure to meet all these obligations on a regular basis. If the District's statutory immunity is lost due to noncompliance with these obligations (even if the involved employee(s) is immune because he/she acted reasonably under the circumstances), the District may face liability.

Appendix II

Automatic External Defibrillator Instructions

These are generic instructions on AED use that have been copied from the website of the National Institute of Health, a part of the U.S. Department of Health and Human Services.

1. Before using an automated external defibrillator (AED) on someone who you think is having sudden cardiac arrest (SCA), briefly evaluate him or her. If you see a person collapse and pass out, or if you find a person already unconscious, confirm that the person can't respond.
2. If unresponsive, call 9–1–1 or have someone else call 9–1–1. If two rescuers are present, one can provide aide to person while the other calls 9–1–1 and gets the AED.
3. Check the person's breathing and pulse. If not breathing and no pulse, prepare to use the AED as soon as possible. If no one knows how long the person has been unconscious, or if an AED isn't readily available, do 2 minutes of CPR. Then use the AED to check the person.
4. After you use the AED, or if you don't have an AED, give CPR until emergency medical help arrives or until the person begins to move. Try to limit pauses in CPR.
5. After 2 minutes of CPR, you can use the AED again to check the person's heart rhythm and give another shock, if needed. If a shock isn't needed, continue CPR.

Using an Automated External Defibrillator

1. AEDs are user-friendly devices that untrained bystanders can use to save the life of someone having Sudden Cardiac Arrest. Before using an AED, check for puddles or water near the person who is unconscious. Move him or her to a dry area and stay away from wetness when delivering shocks (water conducts electricity).
2. Turn on the AED's power. The device will give you step-by-step instructions. You'll hear voice prompts and see prompts on a screen.
3. Expose the person's chest. If the person's chest is wet, dry it. AEDs have sticky pads with sensors called electrodes. Apply the pads to the person's chest as pictured on the AED's instructions. Place one pad on the right center of the person's chest above the nipple. Place the other pad slightly below the other nipple and to the left of the ribcage.

The AED has step-by-step instructions and voice prompts that enable an untrained bystander to correctly use the machine.

4. Make sure the sticky pads have good connection with the skin. If the connection isn't good, the machine may repeat the phrase "check electrodes." If the person has a lot of chest hair, you may have to trim it. (AEDs usually come with a kit that includes scissors and/or a razor.) If the person is wearing a medication patch that's in the way, remove it and clean the medicine from the skin before applying the sticky pads.

Remove metal necklaces and underwire bras. The metal may conduct electricity and cause burns. You can cut the center of the bra and pull it away from the skin.

5. Check the person for implanted medical devices, such as a pacemaker or implantable cardioverter defibrillator. (The outline of these devices is visible under the skin on the chest or abdomen, and the person may be wearing a medical alert bracelet.) Also check for body piercings. Move the defibrillator pads at least 1 inch away from implanted devices or piercings so the electric current can flow freely between the pads.
6. Check that the wires from the electrodes are connected to the AED. Make sure no one is touching the person, and then press the AED's "analyze" button. Stay clear while the machine checks the person's heart rhythm.
7. If a shock is needed, the AED will let you know when to deliver it. Stand clear of the person and make sure others are clear before you push the AED's "shock" button.
8. Start or resume CPR until emergency medical help arrives or until the person begins to move. Stay with the person until medical help arrives, and report all of the information you know about what has happened.