

# Cardiac Emergency Response Plan (CERP)

Name of School:

School Address:

School Phone Number:

School Project ADAM Coordinator:

## General Principles of this Cardiac Emergency Response Plan

### PURPOSE

This document supports the creation of a school/district policy and procedure for preparing and responding to cardiac emergencies. This document should be adapted to fit the needs of your building and provides detailed guidance for responding to a sudden cardiac arrest (SCA) through a Cardiac Emergency Response Plan (CERP). This plan outlines Cardiac Emergency Response Teams (CERTs), AED maintenance and locations, CERP protocol (your onsite emergency action plan) and related staff training. A copy of your CERP protocol will be included in this document.

### DEVELOPING A CARDIAC EMERGENCY RESPONSE TEAM (CERT)

- › Designate one person as the Cardiac Emergency Response Team Coordinator who oversees CPR-AED program activities, training, education, and evaluation.
- › Your Cardiac Emergency Response Team should be comprised of at least 5 people or 10% of staff who are able to step away from their tasks to assist when your CERP is activated.
- › All team members on the CERT should have current CPR/AED training in accordance with standards set by the American Heart Association, the American Red Cross, or another nationally recognized certifying organization.
- › Designate individuals to promptly call 9-1-1 and direct EMS to the location of the sudden cardiac arrest (SCA).

# AUTOMATED EXTERNAL DEFIBRILLATORS (AEDS) – PLACEMENT, INSTALLATION AND MAINTENANCE

- › Minimum recommended number of AEDs for schools include inside the building and outside the building:
  - **Inside the building** – The number of AEDs shall be sufficient to enable a person to retrieve an AED and deliver it to any location within the building, ideally within 3 minutes of being notified of a possible cardiac emergency. AED should be clearly marked and accessible.
  - **Outside the building** (e.g., on school grounds, venues, or athletic fields) – The number of AEDs, either stationary or in the possession of an on-site athletic trainer, coach, or other qualified person, shall be sufficient to enable the delivery of an AED to any location outside of the building including any venue, athletic field, or school grounds, ideally within 3 minutes of being notified of a possible cardiac emergency. AED should be clearly marked and accessible.
- › Regularly check and maintain each AED in accordance with the AED's operating manual and maintain a log of the maintenance activity including periods of time where the building or location will not be used for long periods of time, such as summer months when school is not in session.
- › CERT coordinator should set up a process for verifying and tracking equipment readiness and maintenance.
- › Additional Resuscitation Equipment: A resuscitation kit shall be connected to the AED carry case. The kit shall contain latex-free gloves, razor, scissors, towel, antiseptic wipes, a CPR barrier mask, and consider an extra set of AED pads. Consider storing other medical equipment with the AED or kit such as Naloxone and Epinephrine autoinjector.
- › AEDs should not be locked in an office. It should be stored in a location that is always easily and quickly accessible.
- › AEDs shall be accessible for responding to a cardiac emergency during day and night activities (e.g., sports activities) and after-hours activities (e.g., after-school activities) in accordance with this CERP.
- › Each AED should have one set of AED pads with the device.
- › Signage: All AEDs should have clear AED signage to be easily identified. These should be visible from the normal path of travel.
- › Recommend removing warning "for professional use only" on AED cabinets as AEDs provide instructions for use.
- › Locations of the AEDs on campus are to be listed in the CERP Protocol including a campus map marked with AED locations.

## COMMUNICATION OF CERP PROTOCOL

- › The CERP protocol should be distributed to:
  - All staff and administrators at the start of each year (or school year), with updates distributed as made.
  - All staff should be educated on the CERP protocol in their school yearly.

- All staff should be educated on recognizing the signs of a cardiac emergency that is or may become a SCA, how to activate a response, location of AEDs, and ideally have an introduction to at least hands-only CPR and AED use.
- New staff members should receive the CERP protocol in their orientation materials.

## TRAINING IN CARDIOPULMONARY RESUSCITATION (CPR) AND AED USE

- › Staff training
  - The CERT team and a sufficient number of staff should be trained in cardiopulmonary resuscitation (CPR) and in the use of an AED. Training shall be renewed at least every two years.
  - The school or organization should designate the person responsible for coordinating staff training and the medical contact for AEDs, if available.
  - Training may be traditional classroom, on-line, or blended instruction but should include cognitive learning, hands-on practice, and testing.
  - All staff and faculty, regardless of if they are a CERT member, should receive annual training on SCA and understand how to recognize a cardiac arrest, how to initiate the response team, where the AEDs in the building are located and how to perform hands-only CPR.
  - Include as many other people as possible (staff, faculty, coaches, volunteers, students, parents, etc.) who can receive additional CPR/AED education and awareness of the plan.

## LOCAL EMERGENCY MEDICAL SERVICES (EMS) INTEGRATION WITH THE SCHOOL PLAN

- › Provide a copy of this Cardiac Emergency Response Plan to local emergency response and dispatch agencies (e.g., the 9-1-1 response system), which may include local police and fire departments and local EMS.
- › The development and implementation of the CERP should be coordinated with the local EMS Agency, organization safety officials, on-site first responders, administrators, organizational leadership, athletic trainers, school nurses, and other members of the school or community medical team.
- › Work with local emergency response agencies to 1) coordinate your CERP with the local emergency response system and 2) to inform local emergency response system of the number and location of on-site AEDs.

## CONDUCT PRACTICE DRILLS

- › Cardiac Emergency Response Drills are an essential component of your CERP. The site should perform at least one successful drill each year (two or more are recommended). In addition to the CERT team, drills can involve your local EMS Agency and organization safety officials. A successful Cardiac Emergency Response Drill is defined as full and successful completion of the Drill in 5 minutes or less.

# Cardiac Emergency Response Team Members

CARDIAC EMERGENCY RESPONSE TEAM MEMBERS			
NAME	TITLE	TRAINING EXPIRATION DATE	TYPE(S) OF TRAINING

## Location of AEDs

LOCATION OF AED'S	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

# Cardiac Emergency Response Plan Protocol

This is your onsite emergency action plan (EAP) specified for your facility to detail what happens immediately upon a sudden collapse. Project ADAM recommends using this as a quick reference document to instruct your response team on your building's specific plan and their role.

## **FOLLOW THESE STEPS IN RESPONDING TO A SUSPECTED CARDIAC EMERGENCY (integrating cardiac emergency response team roles described below):**

1. Recognize the following signs of sudden cardiac arrest and take action in the event of one or more of the following:
  - The person is not moving, or is unresponsive, or appears to be unconscious.
  - The person is not breathing normally (has irregular breaths, gasping or gurgling, or is not breathing at all).
  - The person appears to be having a seizure or is experiencing convulsion-like activity. (Cardiac arrest victims commonly appear to be having convulsions).
  - The person's eyes may be open or rolled back.
  - Note: If the person received a blunt blow to the chest, this could cause cardiac arrest, a condition called commotio cordis. The person may have the signs of cardiac arrest described above and is treated the same.

## **THE FIRST PEOPLE AT THE SCENE MUST:**

1. Start notification of unresponsive victim: As soon as a person is found to be unresponsive, the person closest to the victim alerts the front office of a "communication code" in room \_\_\_\_\_ (choose how your school will communicate: utilizing cell phone, room phone, hand radio or overhead announcement).
  - This step must include a call to 9-1-1, providing school address and patient condition to initiate EMS response.
2. Person finding the victim begins hands-only CPR with a goal of 100 beats per minute (120 beats per minute for children 8 years and younger).
3. Begin recording timing of events and response actions.
4. Front office announces alert: "\_\_\_\_\_ in (specific location). Cardiac emergency response team to report to location immediately. All students and staff should remain in place until further notice."
  - a. (If 9-1-1 has not already been called) \_\_\_\_\_ will call 9-1-1, providing school address and patient condition.
  - b. \_\_\_\_\_ will facilitate access to victim for arriving EMS personnel.
  - c. \_\_\_\_\_ will obtain a copy of the individual's emergency contact information to be sent with EMS.

5. Health clinic and classroom backup staff will immediately report to their backup locations.

6.

## CARDIAC EMERGENCY RESPONSE TEAM DUTIES:

1. All CERT members will report immediately to victim. The team member closest to an AED should retrieve the AED on route to the scene, leaving the AED cabinet door open so that the alarm will signal to other team members that the AED has been retrieved. More than one AED (if available) can be brought to the scene.
2. CERT Leader - designate roles for the team (i.e. compressors, AED operator, recorder, crowd control). Ensure the victim is in a safe location and the victim's clothing is removed and the bare chest is exposed (remove bra if applicable).
3. Compressors - continue hands-only CPR by pushing hard and fast in the center of the chest with a goal of 100 beats per minute (120 beats per minute for children under 8 years old). Switch with alternate compressor every minute (sooner or later if fatigue sets in). Continue CPR until the patient is responsive or EMS arrives at victim's side.
4. AED operator - when AED arrives to victim's location:
  - a. press the power button ON or open the lid to turn on the AED,
  - b. attach the pads to the bare chest as shown by the AED,
  - c. follow the AED visual and audible prompts,
  - d. if shock is advised, ensure nobody is touching the victim and choose one of the following options based on your device:
    - e. the AED will analyze rhythm every 2 minutes,
    - f. continue to follow the AED's prompts until EMS arrives on scene.
5. Recorder - document the time as events occur:
  - a. start of CPR,
  - b. arrival of AED,
  - c. if AED delivers a shock,
  - d. consciousness regained,
  - e. arrival of EMS,
  - f. departure of EMS.
6. Crowd control - ensure students and nonessential staff and faculty clear the area.
7. Upon transport of victim by EMS, announce "all clear (add specific communication) .  
Staff and students may resume normal schedules."
- 8.

## POST RESPONSE DUTIES:

1. Administrators:
  - a. Contact parent/guardian.
  - b. If victim is a student, accompany student to hospital with EMS.
  - c. Notify school district level administration and county Risk Management
2. Site Coordinator:
  - a. Contact Student Health Services for AED maintenance and pad replacement.
  - b. Complete the Project ADAM AED Report form and contact your nearest Project ADAM affiliate if available for additional support resources.
  - c. Plan an event debrief meeting with involved staff. Give staff a moment before returning to normal workday.
3. Front Office Staff
  - a. Upon transport of victim by EMS, announce "Code AED all clear. Staff and students may resume normal schedules."
- 4.