

Cardiac Emergency Response Plan

ALLEN ELEMENTARY SCHOOL

This Cardiac Emergency Response Plan is adopted by **Allen Elementary School** effective **2/10/2020**. This plan was reviewed and approved by medical and legal counsel for **Allen Elementary School**.

A cardiac emergency requires immediate action. Cardiac emergencies may arise as a result of a Sudden Cardiac Arrest (SCA) or a heart attack, but can have other causes. SCA occurs when the electrical impulses of the heart malfunction resulting in sudden death.

Signs of Sudden Cardiac Arrest can include one or more of the following:

- Not moving, unresponsive or unconscious, *or*
- Not breathing normally (i.e., may have irregular breathing, gasping or gurgling or may not be breathing at all), *or*
- Seizure or convulsion-like activity.

Note: Those who collapse shortly after being struck in the chest by a firm projectile/direct hit may have SCA from commotio cordis.

The Cardiac Emergency Response Plan of **Allen Elementary School** shall be as follows:

1. **Developing a Cardiac Emergency Response Team**
 - (a) The Cardiac Emergency Response Team shall be comprised of those individuals who have current CPR/AED certification. It will include school staff members in the building on a daily basis. It should also include an administrator and office staff who can call 9-1-1 and direct EMS to the location of the SCA.
 - (b) Members of the Cardiac Emergency Response Team are identified in the “Cardiac Emergency Response Team” attachment, to be updated yearly and as needed to remain current. One of the members shall be designated as the Cardiac Emergency Response Team Coordinator.
 - (c) All members of the Cardiac Emergency Response Team shall receive and maintain nationally recognized training, which includes a certification card with an expiration date of not more than 2 years.
 - (d) As many other staff members as reasonably practicable shall receive training.
2. **Activation of Cardiac Emergency Response Team during an identified cardiac emergency**
 - (a) The members of the Cardiac Emergency Response Team shall be notified immediately when a cardiac emergency is suspected.
 - (b) The Protocol for responding to a cardiac emergency is described in Section 8 (below) and in the “Protocol for Posting” attachment.

3. **Automated external defibrillators (AEDs) – placement and maintenance**

(a) Minimum recommended number of AEDs for **Allen Elementary School**:

- (1) *Inside school building* – The number of AEDs shall be sufficient to enable the school staff or another person to retrieve an AED and deliver it to any location within the school building, ideally within 2 minutes of being notified of a possible cardiac emergency.
- (2) *Outside the school building on school grounds / 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 school (on school grounds) including any athletic field, ideally within 2 minutes of being notified of a possible cardiac emergency.
- (3) *Back-up AEDs* – One or more AEDs shall be held in reserve for use as a replacement for any AED which may be out-of-service for maintenance or other issues. The back-up AED(s) should also be available for use by the school’s athletic teams or other groups traveling to off-site locations.

(b) **Allen Elementary School**: will regularly check and maintain each school-owned AED in accordance with the AED’s operating manual and maintain a log of the maintenance activity. The school shall designate a person who will be responsible for verifying equipment readiness and for maintaining maintenance activity.

(c) **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 and a CPR barrier mask.

(d) AEDs shall not be locked in an office or stored in a location that is not easily and quickly accessible at all times.

(e) AEDs shall be readily accessible for use in responding to a cardiac emergency, during both school-day activities and after-school activities, in accordance with this Plan. Each AED shall have one set of defibrillator electrodes connected to the device and one spare set. All AEDs should have clear AED signage so as to be easily identified. Locations of the AEDs are to be listed in the “Cardiac Emergency Response Team” attachment and in the “Protocol for Posting” attachment.

4. **Communication of this Plan throughout the school campus**

(a) The Cardiac Emergency Response Protocol shall be *posted* as follows:

- (1) In each classroom, cafeteria, restroom, health room, faculty break room and in all school offices.
- (2) Adjacent to each AED.
- (3) Adjacent to each school telephone.
- (4) In the gym and in all other indoor locations where athletic activities take place.
- (5) At other strategic school campus locations, including outdoor physical education and athletic areas.
- (6) Attached to all portable AEDs.

(b) The Cardiac Emergency Response Protocol shall be *distributed* to:

- (1) All staff and administrators at the start of each school year, with updates distributed as made.
 - (2) All Health Services staff including the school nurse, health room assistants and self-care assistants.
 - (3) All coaches and applicable advisors at the start of each school year and as applicable at the start of the season for each activity, with updates distributed as made.
- (c) Results and recommendations from Cardiac Emergency Response Drills performed during the school year shall be communicated to all staff and administrative personnel. See paragraph 5(b) below.
- (d) A copy of this Cardiac Emergency Response Plan shall be provided to any organization using the school. A signed acknowledgment of the receipt of this Response Plan and the Protocol by any outside organization using the school shall be kept in the school office. School administration and any outside organization using the school shall agree upon a modified Cardiac Emergency Response Plan. The modified Response Plan shall take into consideration the nature and extent of the use and shall meet the spirit and intent of this Response Plan which is to ensure that preparations are made to enable a quick and effective response to a cardiac emergency on school property.

5. Training in Cardiopulmonary Resuscitation (CPR) and AED Use

(a) Staff Training:

- (1) In addition to the school nurse, a sufficient number of staff shall be trained in cardiopulmonary resuscitation (CPR) and in the use of an AED to enable **Allen Elementary School** to carry out this Plan. (It is recommended that at a minimum, at least 10% of staff should have current CPR/AED certification.) Training shall be renewed at least every two years. The school shall designate the person responsible for coordinating staff training as well as the medical contact for school based AEDs, if available.
- (2) Training shall be provided by an instructor, who may be a school staff member, currently certified by a nationally-recognized organization to conform to current American Heart Association guidelines for teaching CPR and/or Emergency Cardiac Care (ECC).
- (3) Training may be traditional classroom, on-line or blended instruction but should include cognitive learning, hands-on practice and testing.

(b) Cardiac Emergency Response Drills:

Cardiac Emergency Response Drills are an essential component of this Response Plan. **Allen Elementary School** shall perform a successful annual Cardiac Emergency Response Drill each school year with the participation of staff, administration, school nurse, and other targeted responders. A successful Cardiac Emergency Response Drill is defined as full and successful completion of the Drill in 5 minutes or less. **Allen Elementary School** shall prepare and maintain a Cardiac Emergency Response Drill Report for each Drill. (See

“Conducting Drills” attachment.) These reports shall be maintained for a minimum of 5 years with other safety documents. The reports shall include an evaluation of the Drill and shall include recommendations for the modification of the CERP if needed. (It is suggested that the school / school district consider incorporating the use of students in the Drills.)

6. **Local Emergency Medical Services (EMS) integration with the school/school district’s plan**

- (a) **Allen Elementary School** shall provide a copy of this 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 Emergency Medical Services (EMS).
- (b) The development and implementation of the Cardiac Emergency Response Plan shall be coordinated with the local EMS Agency, administrators, school nurses, and other members of the school and/or community medical team.
- (c) **Allen Elementary School** shall work with local emergency response agencies to 1) coordinate this Plan with the local emergency response system and 2) to inform local emergency response system of the number and location of on-site AEDs.

7. **Annual review and evaluation of the Plan**

Allen Elementary School shall conduct an annual internal review of the school’s Response Plan. The annual review should focus on ways to improve the school’s response process, to include:

- (a) A *post-event review* following an event. This includes review of existing school-based documentation for any identified cardiac emergency that occurred on the school campus or at any off-campus school-sanctioned function. The school shall designate the person who will be responsible for establishing the documentation process.

Post-event documentation and action shall include the following:

- (1) A contact list of individuals to be notified in case of a cardiac emergency.
- (2) Determine the procedures for the release of information regarding the cardiac emergency.
- (3) Date, time and location of the cardiac emergency and the steps taken to respond to the cardiac emergency.
- (4) The identification of the person(s) who responded to the emergency.
- (5) The outcome of the cardiac emergency. This shall include but not be limited to a summary of the presumed medical condition of the person who experienced the cardiac emergency to the extent that the information is publicly available. Personal identifiers should not be collected unless the information is publicly available.
- (6) An evaluation of whether the Response Plan was sufficient to enable an appropriate response to the specific cardiac emergency. The review shall include recommendations for improvements in the Plan and in its implementation if the Response Plan was not optimally suited for the specific incident. The post-event review may include discussions

with medical personnel (ideally through the school's medical counsel) to help in the debriefing process and to address any concerns regarding on-site medical management and coordination.

- (7) An evaluation of the debriefing process for responders and post-event support. This shall include the identification of aftercare services including aftercare services and crisis counselors.
- (b) A review of the documentation for all Cardiac Emergency Response Drills performed during the school year. Consider pre-established Drill report forms to be completed by all responders.
- (c) A determination, at least annually, as to whether or not additions, changes or modifications to the Plan are needed. Reasons for a change in the Response Plan may result from a change in established guidelines, an internal review following an actual cardiac emergency, or from changes in school facilities, equipment, processes, technology, administration, or personnel.