

LUCTON SCHOOL



AUTOMATED EXTERNAL DIFIBRILLATOR POLICY & PROCEDURE

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AMENDMENTS & REVIEW DATES

Ser	Amendment / Review	Date	Remarks / Details
(a)	(b)	(c)	(d)
1	Authored	24 Jul 17	Operations Manager – R J Brown
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INTRODUCTION

Aims

01001. The aim of this policy is to set out clear direction for all personnel at Lucton School with regards to the use and access to the Automated External Defibrillator (AED). The aim of having an AED at Lucton School is to save lives by being able to combat the symptoms of Sudden Cardiac Arrest (SCA). Lucton School is committed to providing a safe environment for all pupils, visitors and staff. We will achieve this by:

- a. Administering appropriate first aid treatment as required
- b. Providing a fully qualified School Nurse / First Aider on each site
- c. Providing sufficient numbers of suitably qualified paediatric first aid staff to be deployed on site at our EYFS setting at all times when children of EYFS are in session, during School holidays, and to accompany all trips and outings where EYFS children are involved.
- d. Arranging mandatory training and bi-annual updates for first aiders, including those trained in paediatric first aid (those who work with under 8s)
- e. Keeping copies of all first aid certificates
- f. Providing facilities for the provision of first aid at an appropriate location
- g. Maintaining a list of information about pupils with medical conditions for staff
- h. Keeping parents and any other significant person informed as necessary
- i. Ensuring confidential recording of action taken
- j. Following the correct procedures for the reporting of accidents to RIDDOR
- k. Providing the Health and Safety Committee with a list of accidents each term
- l. Reviewing the AED policy annually.

Scope

01002. The scope of this document will cover AED use for all school property including:

- a. Main School
- b. Prep School & Nursery
- c. Summer School & Extra Curricular

Personnel included in this are:

- a. Students / Nursery attendees
- b. Adult staff – teaching, administration and maintenance

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- c. Visitors – parents, siblings, contractors

Purpose

01003. This policy will provide guidance in the management and administration of a school-based AED program. It will be for the treatment of victims of eight years of age and older and in extremis the treatment of children under eight years old or under 25kg (55 lbs). This is due to the size and nature of the AED pads.

01004. Sudden Cardiac Arrest (SCA) is a condition that occurs when the electrical impulses of the human heart malfunction causing a disturbance in the heart's electrical rhythm called ventricular fibrillation (VF). This erratic and ineffective electrical heart rhythm causes complete cessation of the heart's normal function of pumping blood resulting in sudden death. The most effective treatment for this condition is the administration of an electrical current to the heart by a defibrillator, delivered within a short time of the onset of VF.

01005. An AED is used to treat victims who experience SCA. It is only to be applied to victims, who are unconscious, without pulse, signs of circulation and normal breathing. The AED will analyse the heart rhythm and advise the operator if a shockable rhythm is detected. If a shockable rhythm is detected, the AED will charge to the appropriate energy level and advise the operator to deliver a shock.

System Owner

01006. Ultimate responsibility / ownership will lay with the Bursar, with the Program Coordinator for the operation, maintenance and checking of the equipment with the Operations Manager, in conjunction with the School Nurse.

Authorised Personnel

01007. The following staff are trained and authorised to use the AED:

Lulu Parker	Graham Cowley	Graham Muckalt	James Wall	Mark Warren
Craig Derrigan	Rich Brown	Frankie Jefferies	Emma Coates	Emma Dytor

01008. This will be reviewed at 6 monthly intervals. If any of the authorised personnel require additional training they are to request a session of revision training through the Operations Manager or the Combined Cadet Force (CCF).

01009. The responsibility for general upkeep and ordering of new pads will lay with the Operations Manager. They will also maintain on file the specifications / technical information booklet for the AED and keep a record of monthly inspections / checks.

Applicable Documents

01010. Other documents that will be made readily available will include:

- a. A Guide to Automated External Defibrillators – Resuscitation Council UK
- b. The use of Automated External Defibrillators – Resuscitation Council UK
- c. Philips HeartStart Defibrillator Owner's Manual M5066A, Edition 13
- d. Lucton School First Aid Policy
- e. AED Procedure – Annex A to this document

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USERS & RESPONSIBILITIES

Authorized AED Users & Responsibilities

02001. The AED may be used by:

- a. Employees including: administrators, nurses, athletic / activities director, athletic trainers and office staff
- b. Additional staff as identified by administration. Examples: teachers, coaches
- c. Any trained volunteer responder who has successfully completed an approved CPR/AED training program and has a current successful course completion certificate

02002. Their responsibilities include:

- a. Activating internal emergency response system and providing prompt basic life support including AED and first aid according to training and experience
- b. Understanding and complying with requirements of this policy
- c. Following the more detailed procedures and guidelines for the AED program

Volunteer Responder Responsibilities

02003. Anyone can, at their discretion, provide voluntary assistance to victims of medical emergencies. The extent to which these individuals respond shall be appropriate to their training and experience. These responders are encouraged to contribute to emergency response only to the extent they are comfortable. The emergency medical response of these individuals may include CPR, AED or medical first aid.

School Office Responsibilities

02004. The school office staff are responsible for:

- a. Receiving emergency medical calls from internal locations
- b. Using an established 9-9-9 checklist to assess the emergency and determine appropriate level of response
- c. Contacting the ambulance / paramedic team via 9-9-9. If the AED is used this will be a requirement
- d. Deploying AED-trained employees to emergency location
- e. Assigning someone to meet responding ambulance and direct EMS personnel to site of medical emergency

Emergency Equipment

02005. The approved equipment at Lucton School is a Philips HeartStart® AED. The AED conforms to the Resuscitation Council of UK standards:

- a. The AED and first-aid emergency care kit will be brought to all medical emergencies

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- b. The AED should be used on any person who is at least 8 years of age. The AED will be placed only after the following symptoms are confirmed:
 - (1) Victim is unresponsive
 - (2) Victim is not breathing normally

NOTE: If AED program includes the treatment of children under eight years old or less than 25kg (55 lbs), replace adult AED pads with Infant / Child pads - includes one pair of electrodes, storage pouch and appropriate safety instructions and labels.

Location of AEDs

02006. During school hours and out of hours, the AED will be at a designated location. This location should allow staff members to retrieve the device outside of normal school hours.

On the wall next to the main entrance to Croft House

It should remain in this location until required.

Additional Resuscitation Equipment

02007. The AED will have one set of defibrillation electrodes connected to the device and one pair of Infant / Child pads. One resuscitation kit will be in the AED cabinet – St Johns First Aid Pack. This kit contains two pair latex-free gloves, one razor, one set of trauma shears, and one facemask barrier device.

Equipment Maintenance

02008. All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness. Specific maintenance requirements include:

- a. The main school office and School Nurse shall be informed of changes in availability of emergency medical response equipment. If equipment is withdrawn from service, the main school office shall be informed and then notified when equipment is returned to service.
- b. The main school office shall be responsible for informing response teams of changes to availability of emergency medical equipment.
- c. The AED Program Coordinator or designee shall be responsible for having regular equipment maintenance performed. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the manufactures owner's manual.
- d. Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. If contamination includes body fluids, the equipment shall be disinfected according to procedure. New pads will also be ordered.

Routine Maintenance

02009. The programme of routine maintenance will include:

- a. The AED will perform a self-diagnostic test every 24 hours that includes a check of battery strength and an evaluation of the internal components.

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- b. A volunteer, assigned by the AED Programme Coordinator or designee, will perform a monthly AED check following the procedure checklist. The procedure checklist will be posted with the AED.
- c. If the OK icon is NOT present on the readiness display, contact the AED Programme Coordinator or designee immediately.
- d. If the battery icon is visible, the battery charging unit needs to be replaced. You may continue to use the AED if needed.
- e. If the wrench icon is visible, the AED needs service. You may attempt to use the AED if needed. If the message CALL SERVICE appears, the AED is not usable. Continue to provide CPR until another AED is brought to the victim or ambulance / paramedic arrives to take over care.
- f. If the expiration date on the electrode is near, notify the AED Programme Coordinator or designee immediately.

TRAINING & DOCUMENTATION

Initial Training

03001. To ensure that personnel are competent with the use of the AED, selected employees:

- a. Must complete training adequate to provide basic first-aid, CPR and the AED that will be provided on site. AED training must be a course approved by the Resuscitation Council of UK. Trained employees will also be trained in universal precautions against blood borne pathogens. The school office shall maintain training records for the trained employees.

NOTE: If AED program includes the treatment of children under eight years old or under 25kg (55 lbs), training should include infant / child CPR since techniques differ from adult CPR.

Volunteer Responders

03002. These responders will possess various amounts of training in emergency medical response and their training may be supplied by sources outside of the school. Volunteer responders can assist in emergencies, but must only participate to the extent allowed by their training and experience. Volunteer responders may have training adequate to administer first aid, CPR and use the AED used at Lucton School. Any volunteer wishing to potentially use the AED deployed on the campus should have successfully completed a state approved AED course including CPR within the last two years. The school will not maintain training records for the volunteer responders.

Refresher Training

03003. Volunteer responders are encouraged to periodically refresh their AED skills. This can be accomplished through the use of the training AED contained within the CCF hut. In addition:

- a. Trained employees will renew first-aid and AED training every two years.
- b. AED-trained employees will refresh AED skills using the training AED. Every six months each will perform a three-scenario test that will be reviewed by the AED Program Coordinator or designee.
- c. Volunteer responders should obtain documented renewal training at least once every two years.

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Medical Response Documentation

03004. Internal Post-Event Documentation: It is important to document each use of the medical emergency response system. The following forms shall be sent to the AED Program Coordinator, Operations Manager or designee within 24 hours of a medical event:

- a. An Accident / Incident Report Form shall be completed by a responding employee for each accident requiring first-aid of any type.
- b. The AED-trained employee or volunteer responder shall complete an Accident / Incident Report Form whenever the AED is used.

External Post-Event Documentation

03005. A copy of AED use information shall be presented within 48 hours of the emergency to the following:

- a. Operations Manager.
- b. The patient's G.P. or surgery for their records.
- c. At a minimum, event information supplied shall include any recorded data, and all electronic files captured by the AED.

Post-Event Review

03006. Following each deployment of the response team member, or if a volunteer responder uses an AED, a review shall be conducted to learn from the experience. The AED Program Coordinator or designee shall conduct and document the post-event review. All key participants in the event shall participate in the review. Included in the review shall be the identification of actions that went well and the collection of opportunities for improvement as well as critical incident stress debriefing. A summary of the post-event review shall be sent to the health and safety committee. The health and safety coordinator according to the record retention policy shall maintain a copy of the post-event review summary.

System Verification and Review

03007. The medical emergency response system is ultimately successful if necessary medical assistance is provided to victims in a timely and safe manner. Since actual use of this system procedure is expected to be very infrequent, other measures of effectiveness are required.

Annual System Assessment

03008. Once each calendar year, the AED Program Coordinator or designee shall conduct and document a system readiness review. This review shall include review of the following elements:

- a. Training records
- b. Equipment operation and maintenance records

Annex A to
Lucton School AED Policy v1.1
Dated 24 July 2017

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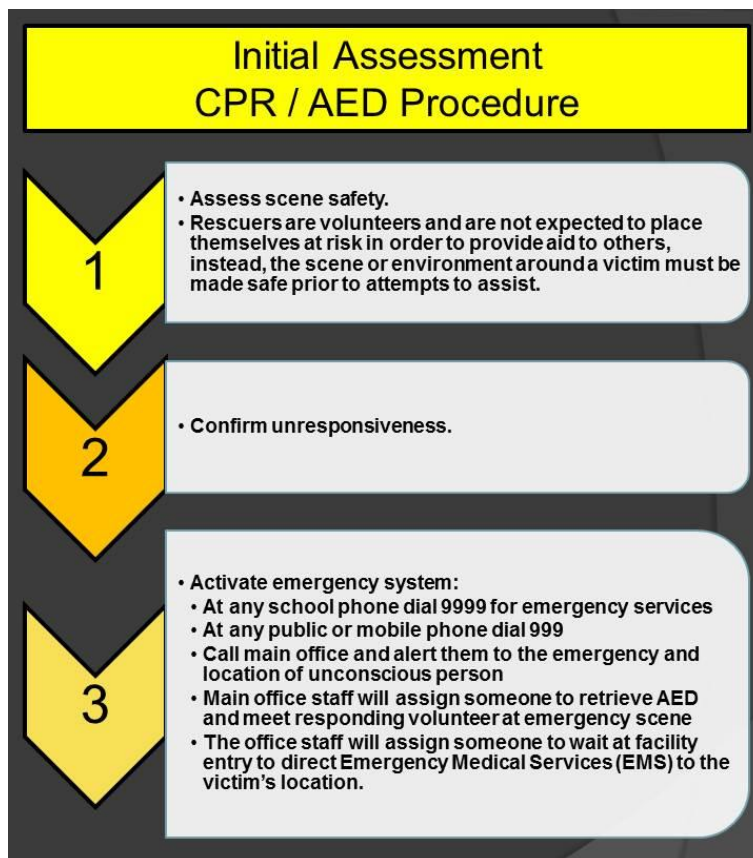
Automated External Defibrillator (AED) Procedure for Lucton School

NOTE: If AED is not immediately available, perform CPR until AED arrives on the scene.

Purpose

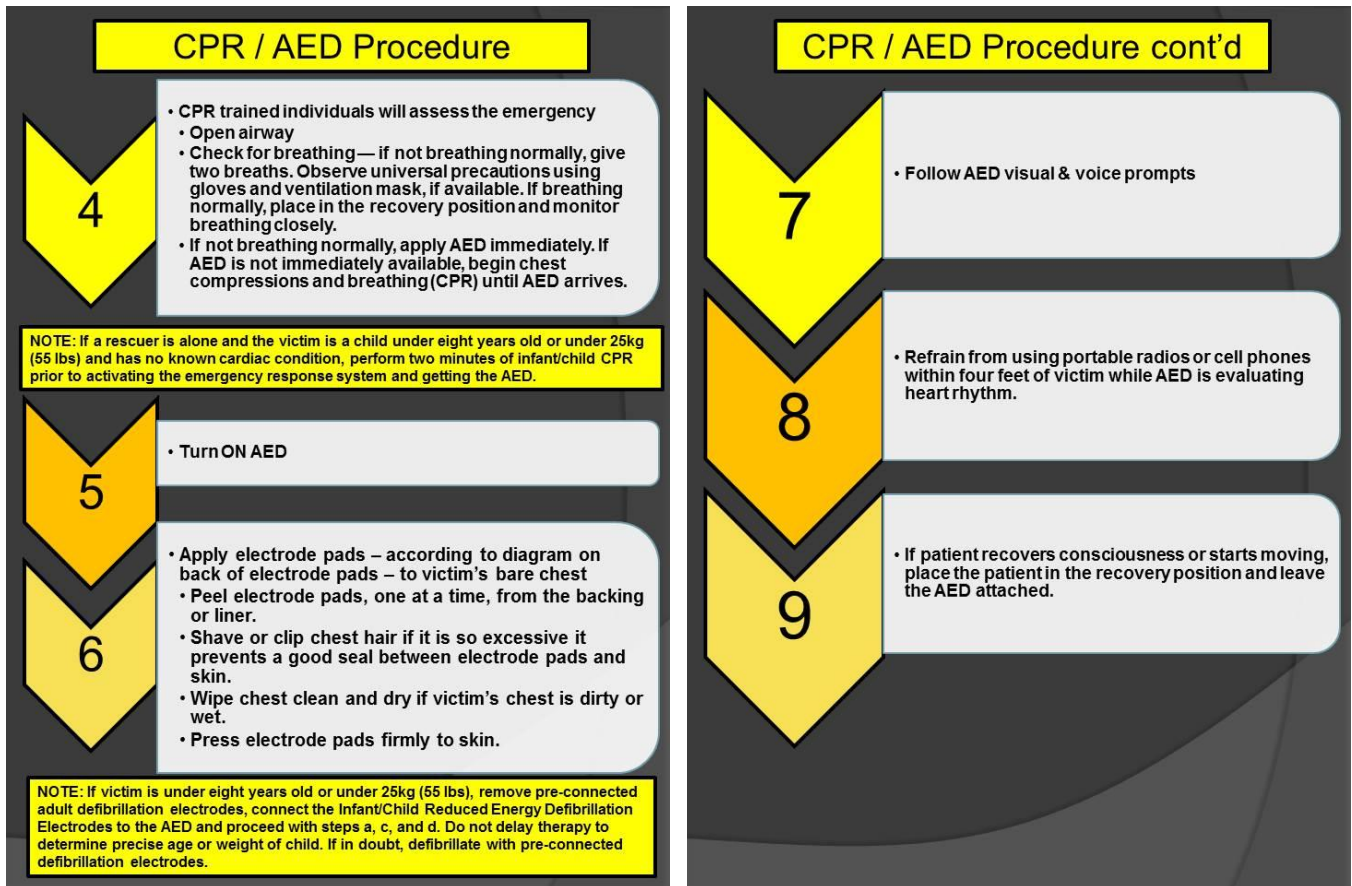
A0001. To provide trained employees of Lucton School with uniform guidelines to follow when responding to Sudden Cardiac Arrest (SAC) incidents and in intervening with an AED. The AED is for use by individuals trained in CPR / AED.

Initial Assessment & Procedure



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CPR/AED Procedure



After Incident Procedure

A0002. The following procedure should be adhered to following an incident:

- a. A copy of AED use information will be sent within 48 hours (weekdays) of the emergency to:
 - (1) Operations Manger
 - (2) School Nurse
 - (3) The patient’s G.P. / Surgery
- b. The responder will document the event using Lucton School Accident / Incident Report Form and will forward a copy of completed form to AED Program Coordinator or designee on the next business day.
- c. The AED will be wiped clean according to policy.
- d. Electrode pads must be replaced with a new unopened pad cartridge and reconnected to device.

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- e. Contents of attached St Johns First Aid Kit must be replaced if used.
- f. Critical Event Stress Debriefing (CESD*) will be conducted by: School Nurse

*CISM is designed to help people deal with their trauma one incident at a time, by allowing them to talk about the incident when it happens without judgment or criticism. The program is peer-driven and the people conducting the interventions may come from all walks of life, but most are first responders (Police, Fire, emergency medical services) or work in the mental health field. All interventions are strictly confidential; the only caveat to this is if the person doing the intervention determines that the person being helped is a danger to themselves or to others. The emphasis is always on keeping people safe and returning them quickly to more normal levels of functioning.

Normal is different for everyone, and it is not easy to quantify. Critical incidents raise stress levels dramatically in a short period of time and after treatment a new normal is established, however, it is always higher than the old level. The purpose of the intervention process is to establish or set the new normal stress levels as low as possible.

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