

Program Subject: CPR/AED Training Program

1. Policy Statement

The University of Wisconsin – Eau Claire is enhancing the safety of faculty, students, staff, and employees by providing (AEDs) in multiple locations throughout the campus as a means of delivering potentially lifesaving defibrillation to victims of Sudden Cardiac Arrest (SCA).

- 1.1 To assist in the process for acquiring, placing, using, and testing of AEDs and for training personnel.
- 1.2 To have faculty, staff, and employees qualified in cardiopulmonary resuscitation (CPR), automated external defibrillator (AED), and/or first responder First Aid.
- 1.3 All AED's on campus are to be used only by authorized users that receive basic CPR and AED training based upon curriculum provided by the American Red Cross or the American Heart Association and provided by a certified instructor.
- 1.4 To ensure the availability, maintenance, and proper use of the Automated External Defibrillators (AEDs) which are located throughout the campus.

2. Application

The University recommends all University Police personnel, Student Health Services physicians and nurses, and lifeguards to be certified in CPR/AED for the Professional Rescuer level. In addition, this program applies to individuals trained on the proper use of AEDs, departments with AED units currently in place, and departments that are considering the purchase of additional units.

- 1.1 AED Departmental Coordinators are expected to become certified as a lay responder by taking First Aid/CPR/AED for the workplace and administrative building.
- 1.2 Department of Risk Management & Safety and all other employees are also encouraged to participate in this program.

3. Responsibilities

3.1 Risk Management & Safety (RMS)

- 3.1.1 Be responsible for ensuring the development and implementation of this policy
- 3.1.2 Provide necessary resources as available to carry out the program
- 3.1.3 Oversee the defibrillation program for the campus/facility
- 3.1.4 Serve as the **University AED Coordinator** and shall be responsible for all the following tasks:
 - 3.1.4.1 Provide guidance, monitoring, and periodic re-evaluation for this program
 - 3.1.4.2 Assist AED Department Coordinator with program management and provide oversight for the Campus facility possessing AED(S)
 - 3.1.4.3 Maintain an adequate inventory of University-owned AEDs and locations, AED batteries, pads, and supplies to support the AED Program

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- 3.1.4.4 Coordinate AED equipment locations to promote easy access by responders
- 3.1.4.5 Conduct and document annual inspections to verify that AED Department Coordinators are following the AED program
- 3.1.5 Act as a liaison between AED Departmental Coordinators, manufacturers, and health agencies to assist with AED maintenance and compliance issues
- 3.1.6 Require at least two (2) to four (4) staff members from each campus facility as designated users to be properly trained in CPR/AED certification
- 3.1.7 Notify AED Department Coordinators of any programmatic and legal changes related to AEDs
- 3.1.8 Encourage all appropriate responders to undergo initial and refresher training on CPR/AED.

3.2 AED Department Coordinator

In departments where an AED is located, the department will identify an AED Department Coordinator, who is responsible for implementing the AED program within their department or unit and who serves as the primary contact for the AED(s) in their work area. The AED Department Coordinator is responsible for performing the following duties:

- 3.2.1 Ensuring departmental adherence to the University AED Program
 - 3.2.1.1 Conduct, document and maintain the required monthly inspections in accordance with the manufacturer's recommendations and requirements.
 - 3.2.1.2 AED responders will receive annual training and recertification in adult CPR/AEDs from a qualified instructor.
 - 3.2.1.3 As necessary, refresher training in the use of the AED will be offered to UW-Eau Claire AED responders
 - 3.2.1.4 The course will be provided at no cost to the individual through the Department of Risk Management & Safety
- 3.2.2 Notify the University AED Coordinator if he/she leaves the University or is no longer able to fulfill the duties of AED Department Coordinator.
- 3.2.3 Notification of department staff of the AED locations in their department buildings.
- 3.2.4 Notification of department staff when any department AED unit is removed from service, and where the next closest unit is in that instance; also, notification of department staff when a replacement unit has been installed in the original location.
- 3.2.5 Immediately report any protocol or equipment irregularities to Risk Management & Safety for appropriate action, which includes the following items:
 - 3.2.5.1 The expiration date of battery and AED pad for the AED Unit
 - 3.2.5.2 The missing items such as the response kit supplies, child key, etc.
 - 3.2.5.3 After AED pads are used, request pad replacement

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3.2.6 If an AED has a dead battery or other impairment and is not completely functional, report it immediately to RMS. The AED should be removed and taken out of service until it can be fully operational or replaced.

3.2.6.1 Departments which have AEDs installed in affiliated buildings, outside locations, mobile vehicles, etc. shall identify and establish a Site/Area Coordinator who will fulfill the requirements of the AED program.

3.3 UNIVERSITY POLICE

University Police Officers are the primary CPR/AED responders at facilities patrolled by Police Services. Police Services is also responsible for:

- 3.3.1 Receiving emergency calls from internal locations and external calls from EMS
- 3.3.2 Contacting the local EMS
- 3.3.3 Dispatching AED Responder(s) to an emergency location
- 3.3.4 Maintaining the AEDs in their possession and notify Risk Management and Safety when replacements are required
- 3.3.5 Ensuring the AEDs are functional when necessary (i.e. During weather extremes, hot and cold, keep the AED in an area that will ensure proper function of the unit.)

3.4 DEFINITIONS

Automated External Defibrillator (AED) is a device used to treat victims who experience sudden cardiac arrest.

University AED Coordinator is the Department of Risk Management and Safety shall serve as the University AED Program Coordinator.

AED Responder is an employee who is appropriately trained and certified to operate an AED Unit during his/her time at work.

AED Department Coordinator is a staff and/or faculty who is responsible for assisting RMS with the AED program and implementing the AED within their department or unit and who serves as the primary contact for the AED(s) in their work area.

Cardiopulmonary Resuscitation (CPR) is an emergency medical procedure for a victim in cardiac or respiratory arrest. CPR involves physical interventions to create artificial circulation through rhythmic pressing on the patient's chest to manually pump blood through the heart, called chest compressions.

Sudden Cardiac Arrest (SCA) is the abrupt cessation of normal circulation of the blood due to failure of the heart to contract effectively during systole.

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4. Program Components

4.1 AED LOCATION GUIDELINES

The following summary provides a guideline for AED installations. RMS will review and approve actual installation locations on a case by case basis, to ensure compliance with applicable laws and regulations.

4.1.1 Placement of unit for optimal response time should be 3 minutes or less.

4.1.2 Location should be visible and easily accessible to the public, with consideration for the potential for tampering and theft.

4.1.3 Units should be located near large gathering areas (i.e. conference rooms, lobby areas, etc.).

4.1.4 AED units in buildings should be identified with signage. The signs should be placed above the units in a visible location.

4.2 AUTHORIZED AED USERS

4.2.1 Employees including administrators, nurses, athletic/activities director, athletic trainers, and office staff.

4.2.2 Additional staff as identified by administration. Examples: teachers, coaches, field/game managers and security staff.

4.2.3 Any trained volunteer responder who has successfully completed an approved CPR/AED training and has a current successful course completion card.

4.2.4 Activating internal emergency response system and providing prompt basic life support including CPR/AED per training and experience.

4.2.5 Understanding and complying with requirements of this policy.

4.3 RETURNING AED TO SERVICES AFTER USE

After a sudden cardiac arrest occurs, it is critical to get the AED back into service as soon as possible. The AED Department Coordinator should immediately complete the AED Post-Incident Report Form (**Appendix B. AED Post-Incident Report**) and forward a copy of the form to the Department of RMS. The following activities must be reviewed:

4.3.1 Check and replenish supplies as appropriate

4.3.1.1 One set of spare pads are required in case they are needed quickly

4.3.2 Clean and disinfect the device

4.3.3 Check the battery and replace if needed

4.3.4 Check the device and housing for cracks or other damage

4.3.5 Return the AED to its designated location with appropriate supplies ready for the next use

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4.4 PROCEDURES FOR PURCHASING EQUIPMENT

4.4.1 Notify Risk Management and Safety of purchase

4.4.1.1 They will evaluate the request from an individual Department/Owner

4.4.2 AED(s) that are 8 or more years old should be replaced. This is to keep up with advancements in AED technology and to help ensure that replacement parts remain available.

4.5 MONTHLY MAINTENANCE CHECKS

Each department in possession of an AED shall appoint an individual to serve as the departmental AED coordinator if not assigned from the Department of RMS. The duties of the AED departmental coordinator are as follows:

4.5.1 Perform and document monthly safety inspections on AEDs within the department. **See Appendix A. AED Monthly Checklist**

4.5.2 A “chirping beep” will sound if system detects failure of operating structure (self-diagnosis)

4.5.2.1 When unit indicates (chirping sound) that AED is not working properly, the AED Department Coordinator or the designated person will remove the unit from the cabinet and conduct system check by depressing the “I” button for information.

4.5.2.2 The AED Department Coordinator will be notified of the RMS and will take corrective action to return unit to service as soon as possible.

4.5.2.3 The individual responsible for the AED unit will document any service provided, as equipment repaired or exchanged.

4.5.3 Contact RMS if an AED has been used and an after-action review is necessary

4.5.3.1 Notify RMS immediately if an AED is missing, damaged, or does not appear ready for use.

4.5.4 AED battery life (in accordance with owner’s manual)

4.5.4.1 Battery status indicator is “**GREEN**” in color for readiness

4.5.4.2 Batteries that need to be replaced should be done ASAP

4.5.4.3 Contact EHS Manager for proper disposal of AED batteries

4.5.5 AED supplies intact

4.5.5.1 1 pair of adult pads (attached or not, depending on model)

4.5.5.2 1 spare set of adult pads, 1 pair of pediatric pads (optional)

4.5.5.3 Check expiration dates on electrode pads, installed and spare

4.5.6 Emergency ready kit supplies intact

4.5.6.1 2 pairs of gloves (large, nitrile), 2 gauze pads, 2 antiseptic wipes

4.5.6.2 1 razor, 1 pocket mask CPR barrier device

4.5.7 If any of the above items do not pass inspection or are missing, contact RMS immediately for repairs and replacement parts

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4.6 ANNUAL REVIEW AND INSPECTION

Department of RMS will conduct an annual inspection of AEDs to ensure that the condition and contents of the AED meet the requirements of this program. All inspections examine the following records on site. (See **Appendix C. Annual AED Inspection Form**)

4.6.1 Guidelines for use

4.6.2 Manufacturer's operating instructions

4.6.3 Written self-inspection records

4.6.4 Identity of the department's responsible person

4.6.5 Storage case intact

4.6.5.1 Check to see if the storage case (either soft flexible or wall mounted) is present, serviceable, and undamaged

4.6.6 Battery charged

4.6.6.1 Check to see if the status indicator, above the green power button, is "green". If the indicator is "red", the unit is NOT ready for a rescue and must be immediately pulled from service and the batteries replaced

4.6.7 Pads Unexpired:

4.6.7.1 Check to see if the expiration date of the pads (electrodes) has been exceeded. Pads are to be replaced within 30 days of expiration.

4.7 CPR/AED TRAINING

Risk Management and Safety is responsible to provide and arrange for training and refresher training in CPR/AED use for designated employees. Records of the employee training will be maintained by the RMS and recorded in the employee's official personnel file.

4.7.1 All CPR/AED-trained employees at UW-Eau Claire are volunteers except for University Police Officers, Student Health Services personnel, and/or it is part of a written job description

4.7.2 Risk Management and Safety recommends that all employees identified for AED training successfully complete an American Heart Association or American Red Cross CPR/AED course or a national acceptable equivalent certification which is valid for two (2) years.

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APPENDIX A. Monthly AED System Checklist

Department Name: _____ Location: _____ Year: _____

AED Departmental Coordinator: _____ Model: _____ SN. Number: _____

Name of the AED Responders: _____

✓ Date and initial each month an inspection is completed. Look for the following issues as stated below.

Month	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Date	1/15											
Initial												

<i>Sample - date and initial as indicated</i>	CL											
AED is in secured location												
AED access is not obstructed												
Battery status indicator is "GREEN"												
All manufacturer's requirements are met												
Installed battery & pad within expiration date												
Spare battery & pad within expiration date												
Response Kit Supplies intact*												
Child's Key												

Comments / Action Required / Other AED stations requiring attention:

Note*1: Response Kit Supplies: 2 pairs of nitrile gloves, 2 gauze pads, 2 antiseptic wipes, 1 razor, 1 pocket mask CPR, 1 Scissors. Post this checklist next to each AED station and keep as a record for one year.
Note2: Keep this inspection record in the department where the AED is located. Only send a copy to Risk Management and Safety if replacement items are requested.

AED Departmental Coordinator reviewed: _____ Date: _____

If there is a deficiency such as expired AED pads or battery, please send a copy of this completed form to the Risk Management & Safety and/or contact the office at 36-2457.

Office of Risk Management and Safety use only

Corrective Action Required:

RMS reviewed by: _____ Completion Date: _____

Appendix B. AED Post-Incident Report

Responder's Name: _____ AED Location: _____ AED Model#: _____

AED Department Coordinator: _____ Date of Use: _____ Time of Use: _____

How were you notified of the emergency? _____ Time notified: _____ AM PM

Describe the incident:

Patient Condition Upon Your Arrival

- | | |
|------------------------------------|--|
| <input type="checkbox"/> BREATHING | <input type="checkbox"/> NOT BREATHING |
| <input type="checkbox"/> CONSCIOUS | <input type="checkbox"/> UNCONSCIOUS |
| <input type="checkbox"/> PULSE | <input type="checkbox"/> NO PULSE |

AED Responder Action(s) Taken

- CPR ATTACHED AED

Patient Condition Upon EMS Arrival

- | | |
|------------------------------------|--|
| <input type="checkbox"/> BREATHING | <input type="checkbox"/> NOT BREATHING |
| <input type="checkbox"/> CONSCIOUS | <input type="checkbox"/> UNCONSCIOUS |
| <input type="checkbox"/> PULSE | <input type="checkbox"/> NO PULSE |

Patient Outcome

- SURVIVAL
 UNKNOWN
 DEATH

AED Responder(s) exposed to blood or other infectious materials? Mark all that apply.

NO MYSELF OTHERS – If others, provide names of all exposed: _____

If AED Responders were exposed to blood or other infectious materials, immediately seek medical attention, then notify the Department of Risk Management & Safety.

AED Departmental Coordinator: Submit one copy of this report to the Department of RMS and keep one copy for your records.

Following the post-incident review, all written documentation concerning the incident will be sent to the Department of Risk Management and Safety record keeping.

AED Departmental Coordinator Reviewed: _____ Date: _____

Risk Management & Safety Reviewed: _____ Date: _____

Appendix C. Annual AED Inspection Form

Department Name: _____ Location: _____ Year: _____

AED Departmental Coordinator: _____ Email Address: _____ Phone #: _____

AED Responder Names: _____

AED Model: _____ AED SN.: _____ Inst. Battery Exp. Date: _____

Spare Battery Exp. Date: _____ Inst. Pad Exp. Date: _____ Spare Pad Exp. Date: _____

✓ Physically inspect AED as required below on an annual basis.

Automated External Defibrillator (AED)	
Check	Comments
<i>Sample - date and initial as indicated</i>	<input checked="" type="checkbox"/> YES / <input type="checkbox"/> NO <i>This AED is ready to use any time</i>
AED is in secured location	<input type="checkbox"/> YES / <input type="checkbox"/> NO
AED access is not obstructed	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Battery status indicator is "GREEN"	<input type="checkbox"/> YES / <input type="checkbox"/> NO
All manufacturer's requirements are met	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Installed battery & pad within expiration date	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Spare battery & pad within expiration date	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Response Kit Supplies intact*	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Child's Key	<input type="checkbox"/> YES / <input type="checkbox"/> NO

Action Required / Other AED stations needing attention:

Note*: Response Kit Supplies: 2 pairs of nitrile gloves, 2 gauze pads, 2 antiseptic wipes, 1 razor, 1 pocket mask CPR, 1 Scissors.

Inspected By: _____ Date of Inspection: _____