Northern Ireland Education and Library Boards and the Council for Catholic Maintained Schools



# Automated External Defibrillator (AED) GUIDELINES FOR SCHOOLS



September 2014

#### Contents

		Page
		2
Introduction		3
Background		3
The AED		5-6
Should the scho	ol purchase an AED?	
Storage and acc	possibility	6
		0
Correct location	IOTAED	
Management o	f the AED	6
Role of an AED 0	Coordinator	
Recorded week	ly checks	
Six monthly che	cks	
Checks following	g incident and use of AED	
Post incident pr	rocedure and event review	7
Appendices		8-11
Appendix 1 Re	esus Council (UK) AED Resuscitation Algorithm	
Appendix 2 W	eekly and post-use AED check	
Appendix 3 AB	D Operator Training records	
Appendix 4 AB	ED six monthly check	
Acknowledgem	ents	12-13

Automated External Defibrillators (AED's) are portable devices used to induce electrical stimulation to the heart muscle in the event of a cardiac arrest. Early access defibrillation is recognised as a significant factor in a persons survival following sudden cardiac arrest.

Sudden cardiac arrest can occur when your heart beat is so fast it quivers instead of pumping blood to the body and brain. Untreated, it can lead to death in minutes. The most effective way to treat this form of sudden cardiac arrest is CPR and defibrillation. Defibrillation gets your heart back into its normal rhythm.

HeartSine samaritan® BRO

For the period 1 July 2014 to 30 June 2016 this is the Automated External Defibrillator on the ELB's procurement schedule (Ref: 60929).

### **INTRODUCTION**

his guidance document has been compiled on behalf of the Northern Ireland Education and Library Boards (ELB) and the Council for Catholic Maintained Schools (CCMS). The information is intended to provide guidance and support for schools who have, or are considering to purchasing an AED, and to dispel any myths and misconceptions on their use. It will also advise schools on their procurement, placement, care and required training.

At present there is no statutory legal requirement for schools to have a defibrillator; however The Health and Safety (First Aid) Regulations NI (1982) do not prevent an employer from providing defibrillators which could be of benefit to both their employees and visitors to the school. It states 'Where an employer decides to provide a defibrillator in the workplace, it is important that those who may use it are appropriately trained'

If the decision is taken by a school to purchase an AED, training and use of the AED must be considered in the context of the school's first aid risk assessment. Having an AED is an optional addition to First Aid provision in any school. The purchase of an AED and subsequent training of staff in the use of the school AED will not replace the employers legal responsibility under The Health and Safety (First Aid) Regulations NI (1982) to provide the appropriate number of suitably qualified First Aiders within the school.

It is important to note that it is more likely for an adult such as a member of staff, a parent or a visitor to the school to require the use of an AED than a child. If a child within the school has an existing heart condition then the school should in the first instance, seek advice from the parents. It may also be beneficial to seek additional advice from GP's, Community Paediatric Medical team and Regional Congenital Cardiac Service to ensure an appropriate care plan is in place for that child.

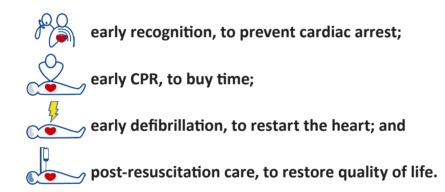
### BACKGROUND

According to Northern Ireland Ambulance statistics in 2011/12 approximately 1400 cardiac arrests occurred outside of the hospital environment. A very small number of these were children. The number of under 18's who have experienced a cardiac arrest in Northern Ireland each year is estimated at less than fifteen per year. Most of these arrests occur not on the sports field but as a result of other medical emergencies such as a drug overdose, choking incident or seizure. It is important to recognise that due to the random nature of cardiac arrest it is not possible with a high degree of accuracy to determine where or when an arrest will happen. However cardiorespiratory arrest is much less common in children than in adults. The use of an AED and Cardio Pulmonary Resuscitation (CPR) go hand-in-hand. There are many initiatives whose aim is to instruct members of the public in CPR, including children.

There are a number of initiatives whose key aim is to teach members of the public, including children, cardio pulmonary resuscitation (CPR) The evidence shows that the greater number of people trained in CPR, the increased likelihood of providing this lifesaving skill in the event of a medical emergency. **IMMEDIATE HELP** is vital to a person's chance of survival and recovery. The Chain of Survival is a concept which is well recognised internationally and which shows a series of actions that improve a person's chance of surviving a cardiac arrest. The Chain of Survival is only as strong as its weakest link.



THE FOUR LINKS IN THE CHAIN ARE:



It is important to note that defibrillation is the third link in the chain and to maximise its effectiveness link one and two <u>must</u> have been achieved. It is important that CPR continues during the time it takes to locate a defibrillator.

#### WHEN A CARDIAC ARREST IS RECOGNISED IT IS THE PRIORITY TO:

- 1) Call 999
- 2) Start CPR
- 3) Ask a colleague or member of the public to enquire if there is a defibrillator and bring it to the casualty
- 4) Attach the defibrillator as directed and continue CPR and defibrillation until emergency services arrive



### THE AED

There has been increased availability of Automated External Defibrillators (AEDs) to try and increase the survival from an out-of-hospital cardiac arrest. AED's are a portable device designed to be used by members of the public, and are very effective at guiding the operator through the process of administering a shock if required. They have become widely available, are safe and easy to use and will not allow a shock to be given to a victim who does not require one.

There are a number of different providers and shapes and sizes of AED but essentially they all do the same thing:

- \* Analyse the victim's heart rhythm
- Determine if a shock is required
- Provide voice and/or visual prompts to assist the rescuer.

The Resuscitation Council UK (RCUK) have developed extensive guidelines on the use and training in AEDs which are recognised as the appropriate standard setting organisation for Northern Ireland.

#### http://www.resus.org.uk/pages/pub\_AED.htm

Standard AED pads are suitable for use in children older than 8 years. Special paediatric pads, that reduce the current delivered during defibrillation, should be used in children aged between 1 and 8 years if they are available; if not, standard adult-sized pads should be used (as per RCUK).

### SHOULD YOUR SCHOOL PURCHASE AN AED?

Prior to the purchase of a defibrillator, School Governors, Principal and senior staff may wish to carry out a needs analysis. This discussion may help clarify and identify the level of risk the school may have and thus inform the decision making process. To help evaluate the potential level of risk, you may wish to consider the following questions, Please note that this is not a definitive list.

Have you considered;

- Which type of school Primary/Post-Primary/Special?
- The emergency response time of your nearest emergency services?
- How many pupils do you have in your school?
- How many staff do you have?
- \* Have any of your students or staff been diagnosed with a heart condition, or pre-existing medical condition
- Do you facilitate community use of your school?
  - ★ How often?

What types of activities take place?

- ✤ School shows
- Parents meetings
- Sports events/open days

Cardiopulmonary Resuscitation and

Automated External

Defibrillation Second Edit

If a school decides not to purchase an AED it may wish to consider promoting a CPR training programme for staff and pupils. Recent evidence suggests that good CPR alone can save lives. If the school decides to proceed with the purchase of an AED, they should contact their ELB Procurement section. The ELB's procurement section through the tendering process has identified an AED supplier.

### **STORAGE AND ACCESSIBILITY**

#### **Correct location of AED**

The AED should be situated centrally where it can be easily accessed. Where you keep your AED is critical to its performance, the AED should be publicly located in an open display rack and **must be accessible at all times**. Ideally it should be located in a central entrance hall. To enable the AED to function correctly it is essential that the location of the AED complies with the manufacturers recommendations for temperature and humidity. If a school locates the AED in an out-building eg. close to the playing fields, the manufacturers recommended parameters must be met. The AED should be stored in a carry case which will carry the AED and the additional equipment. The additional equipment includes the following; disposable face shield, Tuff Cut scissors, disposable razor, disposable latex-free gloves and disposable towel/absorbent cloth.

The Resuscitation Council UK (RCUK) suggest that ideally, the device should be accessible within two minutes brisk walk from anywhere in the building. Appropriate signage should be displayed throughout the school site indicating the AED location/s. AED signage can be purchased through the ELB's procurement section. Signs can also be ordered free of charge from The British Heart Foundation .

To order the AED Signs call 0870 600 65 66 or emailing orderline@bhf.org.uk quoting;

- \* code M118B for the self-adhesive signs
- \* code M118A for the projecting sign
- \* code M118C for the accompanying screws.

### MANAGEMENT OF THE AED.



Prior to the purchase of an AED, schools/ educational premises should give consideration to how the AED will be managed on a day to day basis. It is envisaged that schools/educational premises may allocate this role to at least two school based personnel, the latter effectively being an AED Co-ordinator and assistant.

It is recommended that the appointees noted above should hold an approved current up to-date first aid qualification. ELB/CCMS will require all AED operatives to have undertaken the ELB approved training course. Please note that "An AED information and awareness demonstration which may be provided by the AED supplier is NOT appropriate training as recommended by the Resuscitation Council UK".

Further information and guidance is available from each board's Health and Safety Section.

Annual refresher training is advised, an accurate record of trained AED operators should be maintained by each school / educational establishment.



#### ROLE OF AED CO-ORDINATOR INCLUDES THE FOLLOWING.

- \* Daily visual AED system check
- \* Weekly recorded check of the AED unit
- \* Maintenance of school AED training record
- \* Liaison with ELB/supplier in the event of problems

#### DAILY VISUAL AED SYSTEM CHECK

 Ensure that the AED system status indicator is operational.

#### **RECORDED WEEKLY CHECKS**

(SEE APPENDIX 2 FOR A SAMPLE CHECKLIST) On a weekly basis the following should be checked:

- The AED that it is in its correct location and has not been tampered with
- Battery status indicator to ensure the battery is working correctly
- Pads are unopened
- Additional items are present and correct

   disposable face mask/shield, tuff cut
   scissors, disposable razor, disposable latex
   free gloves and disposable towel/absorbent
   cloth.

#### SIX MONTHLY CHECKS

(SEE APPENDIX 4 FOR A SAMPLE CHECKLIST)

- Battery expiry date
- \* Pad expiry Date
- Order new battery or defibrillator pads at least one month before expiry date.
- Review of training records

## CHECKS FOLLOWING INCIDENT AND USE OF AED

- \* Check battery-seek advice from supplier.
- \* Replace Pads used during incident
- Replace used items from additional equipment –disposable face mask/shield, tuff cut scissors, disposable razor, disposable latex free gloves and disposable towel/ absorbent cloth.
- \* Returning the AED to service

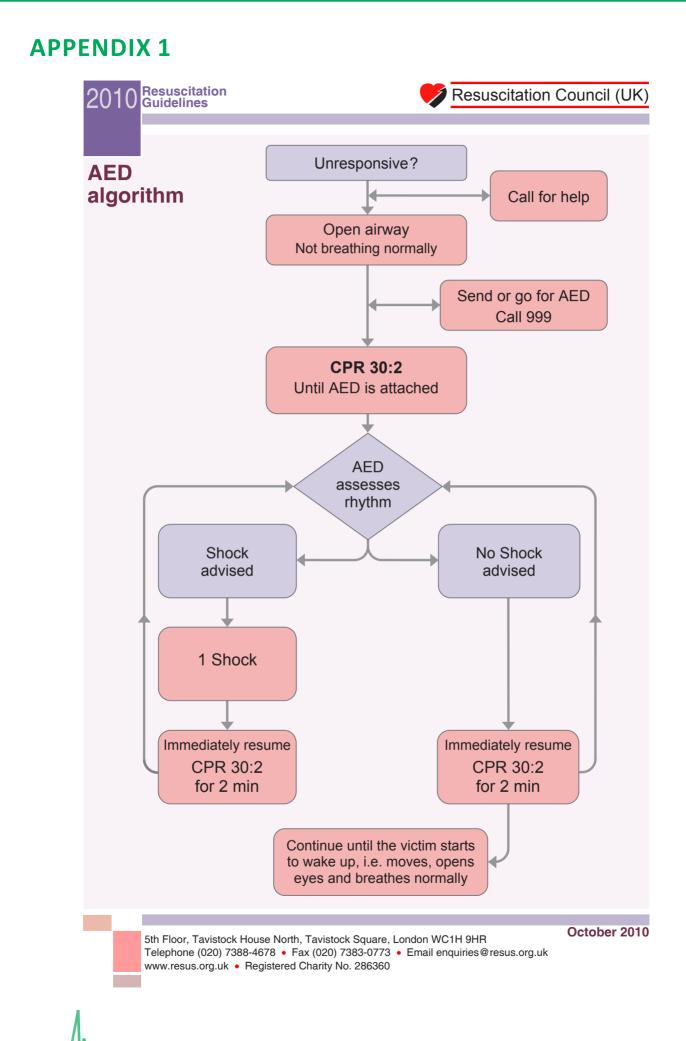
## POST INCIDENT PROCEDURE AND EVENT REVIEW

Procedures must be established outlining the actions to take after the use of an AED. Use of the AED must be reported to the boards Health & Safety Manager/Officer and a comprehensive review actioned to include:

- Downloading and transferring data from the AED - If requested by ambulance service.
- Recording details of the incident on the employing authorities Accident Report Form

Any review should include:

- \* ELB or employing authority
- \* School governors
- **\*** SMT if applicable
- Staff, pupils and members of the public who witnessed the incident.



### **APPENDIX 2** WEEKLY AND POST-USE AED CHECK

			Name and Signature		Authorised Person							
			Absorbent cloth		$\mathbf{\Sigma}$	replace after use						
	1 prep razor		Þ	replace after use								
		1 pair TUFF CUT	scissors	Þ								
			2 pair latex free	gloves		replace after replace after use						
				1 face mask		Þ						
			Pads intact			replace after use						
			Battery status OK		Þ							
		umber	AED intact		D							
School Name	AED location	Device serial number	Date									

In the event of a fault please refer to device manual.

### **APPENDIX 3** AED OPERATOR TRAINING RECORD

Comments					
Date of refresher training 5					
Date of refresher training 4					
Date of refresher training 3					
Date of refresher training 2					
Date of Initial training 1					
Contact number					
Dept.					
Name of AED operator					

### **APPENDIX 4** AED SIX MONTHLY CHECK

Name and Signature										
Training records up to date 🗹										
Pads expiry date										
Battery expiry date										
Date										

### ACKNOWLEDGEMENTS

The preparation and writing of this guidance document faced many challenges. The research associated with this document would not have been possible without the contribution of all working group members. A special gratitude is extended to Mrs Stephanie Leckey, Area Development Manager, British Heart Foundation Northern Ireland (BHFNI), and Adam Hanna, Resuscitation Officer, Northern Health and Social Care Trust, (NHSC Trust), who provided extensive expert guidance and advice.

We would also acknowledge the valuable contribution of Dr. Andrew Hamilton Consultant Cardiologist Western Health and Social care Trust, (WHSCT), Dr Ian Erskine, A&E Consultant Antrim Area Hospital and Dr Nigel Ruddell, Assistant Medical Director, NIAS, Health and Social Care Trust.

An extended thank you to Marie Stewart, Health and Safety Officer BELB, principals and teachers who gave valuable feedback on our final draft document.

#### **DEFIBRILLATOR WORKING GROUP MEMBERS**

Brendan O'Reilly, Health and Safety Manager BELB/SEELB, [e] Brendan.O'Reilly@belb.co.uk (Chairperson) Clare Caldwell, Assistant Health and Safety Officer, SEELB, [e] clare.caldell@belb.co.uk (Project co-ordinator) Sharon Campbell, Assistant Health and Safety Officer, WELB, [e] Sharon.Campbell@welbni.org JJ Cavanagh, Principal Procurement Officer, WELB John Donnelly, AAO PE and School Sport, BELB Orla Martin, Health and Safety Manager NEELB, [e] Orla.Martin@neelb.org.uk Gillian Sterritt, Assistant Health and Safety Officer SELB, [e] Gillian.Sterritt@selb.org Art Kernan, Co-ordinator DEFIBS4KIDS, Teacher, St Colman's PS Lambeg Stephanie Leckey, Area Development Manager BHFNI

Dr Nigel Ruddell, Assistant Medical Director, NIAS, Health and Social Care Trust

Adam Hanna, Resuscitation Officer NHSC Trust

### REFERENCES

Resuscitation Council (UK) Guidelines 2010 A guide to Automated External Defibrillators (AED's) 2013 http://www.resus.org.uk

British Heart Foundation Northern Ireland Guidelines Advice and best-practice guidance for the use of Automated External Defibrillators (AED) in schools (2011) http://www.bhf.org.uk

Belfast City Council AED Guidelines Guidance note on the Deployment and use of AED's (2009) http://www.belfastcity.gov.uk

If you have any queries in relation to the content of this document

please contact the working group member in your board.







