

# **AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PROGRAM**

DAVIS JOINT UNIFIED SCHOOL DISTRICT  
STUDENT SUPPORT SERVICES  
526 B Street  
Davis CA 95616  
530-757-5300 x 140

Continuous Working Plan  
August 24, 2019

## **CONFIDENTIALITY AND PRIVACY STATEMENT**

Some of the information in this document may be confidential. In addition, the disclosure of information in this program could compromise the security of essential equipment, services, and systems of the Davis Joint Unified School District or Yolo County Health Department otherwise impair the District's or Department's ability to carry out essential functions. Distribution of this document is limited to those associates who need to know the information in order to successfully activate and implement the plan.

Portions of this plan contain information that raises personal privacy or other concerns, and those portions may be exempt from mandatory disclosure under the Brown Act, Section 54957.

Any decision to disclose information in this plan outside the District or Yolo County Government or to withhold information in this plan from a non-County requester must be coordinated with the Yolo County Department of Health.

RECORD OF CHANGES

Version	Sect. Affected	Date	Change
1.0	All		

**Recommended changes should be addressed to Yolo County Emergency Medical Services Agency.**

## **AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PROGRAM**

### **Policies and Procedures**

#### **1. BACKGROUND**

**Sudden cardiac arrest** is the nation's leading cause of death. 350,000 relatives, coworkers, and neighbors will suffer a **sudden cardiac arrest** this year. Despite immediate CPR efforts and a rapid 911 responses, tragically less than 5% will survive. In response to these chilling statistics the Food and Drug Administration, federal and state legislatures, as well as OSHA, have approved **Automated External Defibrillators (AEDs)** and recommended their implementation in the workplace. AEDs are devices designed to administer an electric shock to the heart of a **sudden cardiac arrest** victim. This electric shock stops a fatal rhythm called **ventricular fibrillation** and allows the patient's heart to begin beating on its own. The shock can only be delivered after the device has verified the patient is in cardiac arrest. Delivery of an inappropriate shock is not possible. The American Heart Association and federal guidelines recommend that AED treatment be given within the first 3-5 minutes of a **sudden cardiac arrest**. To achieve this recommendation, AEDs must be strategically placed, and appropriate numbers of employees trained to use them. By doing so we may improve survivability of cardiac arrest by as much as 65%. Every minute that defibrillation is delayed 7-10% of survivability is lost. After 10 minutes without defibrillation the patient's chances of survival drop to less than 5%. To effectively treat **sudden cardiac arrest**, AEDs must be immediately available.

#### **2. PROGRAM OBJECTIVE**

To provide a rapid emergency response to a victim of **sudden cardiac arrest**.

To implement the American Red Cross recommended "Chain of Survival," including early defibrillation within 3 minutes of a reported event.

To make available to our employees, students, parents, contractors, and guests the best chances of surviving the nation's leading cause of death.

#### **3. PURPOSE**

This policy and procedure provides the necessary information to effectively implement, administer, and maintain the Davis Joint Unified School District ("District") AED program. Access and training on this policy and procedure should be provided to any employee who may voluntarily render assistance at the scene of a cardiac arrest or who wishes to be involved with the administration of this program.

All staff are required to become familiar with these policies, procedures, and locations of AED's on campus. Training for complete CPR/AED certification is offered through the district on a regular basis.

#### 4. SCOPE

This policy and procedure defines responsibilities and methods by which personnel of the District will comply with state regulatory requirements.

All AEDs of the District shall be subject to this policy and procedure.

This policy and procedure applies to all District employees who may render first aid, CPR, or defibrillation.

This policy and procedure is a compilation of California state standards and Yolo County EMS Agency Policies for the use of an AED by non-licensed personnel or Public Access Defibrillation Programs (PAD). Additional action by the **site contacts and/or AED coordinator** may be necessary to comply with these requirements.

#### 5. DEFINITIONS

**AED** is the acronym used to describe the AUTOMATED EXTERNAL DEFIBRILLATOR. The AED in use at the District is the Philips Heartstart. Operating instructions and maintenance manuals are available with each defibrillator.

The **Emergency Medical Services (EMS) Administrator for the county, Kristin Weivoda**, has authority over the entire AED Program and its participants. General responsibilities include establishing guidelines for administration, implementation, and maintenance of the program. The EMS administrator oversees quality assurance, compliance to protocols, and proper training and provides positive reinforcement to individuals and the system, as well as corrective instruction. The EMS administrator and EMS Medical Director will provide post event review and make systems improvement recommendations.

The **AED Coordinator, Claire Benning, RN** is a District administrator or designee who is the primary liaison between the AED Program and the PHO. This person will help the organization fulfill its responsibility for maintaining the program from an administrative level. The AED coordinator will disseminate program information to and from the PHO and the **site contacts**. The AED coordinator will play an active role in the development of policies and procedures, quality assurance, and program evaluation.

The **Site Contacts** are site administrators or their designees at the individual sites equipped with an AED. The primary responsibility of the **site contacts** is to ensure the readiness of the AED Program at the local level. The **site contacts** are responsible for on-site coordination and for assisting the AED Coordinator and PHO

as necessary. The **site contacts** are also responsible to ensure that all AED units are inspected, maintained, and tested according to the manufacturer's guidelines.

The **School principal** is to ensure that the school administrators and staff annually receive information that describes sudden cardiac arrest, the school's emergency response plan, and the proper use of an AED, - the instructions must be no less than 14-point type, on how to use the AED and posted next to every AED.

## 6. PROGRAM DISCRIPTION

### A. Responsibility

The District first obtained and installed AED's at every site in January of 2009. In 2016 all of our current AED's were replaced with new ones with a grant from Yolo county Emergency Medical Services. Additional AED's were installed at each secondary school to bring the district total to 36 AED's. In order to best implement an effective AED program in the District, the following is required as a part of the medical and administrative oversight required and provided by the Medical Director provided by the AED vender.

#### Site Administrators:

The Site Administrator agrees to help identify and provide time for each **site contact** to attend mandatory trainings and to work with the **AED coordinator** to identify these individuals.

The AED will be placed in a location easily accessible, as determined by the **site contact** and the **AED coordinator**. A sign will prominently identify the location of the AED and the directions on how to use it. Concerns or complaints will be forwarded immediately to the **AED Coordinator**, and the contact information will be placed by the AED. Each employee will be provided with the location of the AED and its use annually. The site administrators will email this information to each employee at the beginning of the year. Brochures and posters will be located next to the AED regarding its use. The AED will be inspected and tested as per documentation at least monthly, by one of the **site contacts** through The National AED Registry website online and hard copy maintenance log. The **site contact** will turn in the hard copy of the maintenance forms to the **AED coordinator** annually as determined by the **AED coordinator**.

AED training will be included in CPR classes conducted by the District or by a contracted vendor.

#### AED Coordinator:

To establish an AED standard operating procedure.

To disseminate information to and from program elements to the **site contacts**.

To maintain the AED program to ensure compliance with these standards.

To periodically evaluate facilities for any change in conditions that could adversely affect program effectiveness.  
To ensure District sites have an appropriate number of trained responders.

**Site Contact:**

To ensure that all participating personnel are identified and receive training on these policies and procedures.  
To email location of the AED to each employee at the beginning of the year.  
To ensure brochures and poster are located next to the AED.  
To assure that proper safety procedures regarding AEDs are followed.  
To report any use of the AED to the PHO and the AED Coordinator by the next business day after use, or problems, violations, inconsistencies, or improvements related to the AED procedures.  
To ensure response, use, and inspection procedures in accordance with instructions and training.  
To provide appropriate signage identifying location of AEDs.  
To provide necessary safety equipment including personal protective equipment for **staff providing care**.

**B. Equipment, Location, Inspection, and Maintenance**

The following equipment shall be maintained as part of the AED Program and is to be used only for AED emergencies:

- Philips Heartstart AED, case
- Sheers
- Gloves
- Absorbent towel/pad
- One set of each of adult and pediatric pads (notify AED Coordinator if batteries or pads need replacement)
- Razor
- Mask with one-way valve
- AED Program Packet including Use of AED Report form stored behind/under the AED

**Site contact or designee:**

- Will inspect the AED at least monthly and confirm:
  - In place and accessible.
  - Ready for use, with the electrodes attached to the unit.
  - All related supplies are in place with shelf life and in good condition.Will perform periodic software updates to individual units as directed by the vendor.

**C. Procedure**

**Responding to an Emergency:**

In the event of an emergency potentially requiring the use of CPR or the AED unit, the first responder shall immediately call “911” or direct someone to call “911” and state:

- The nature of the emergency
- The location
- Caller’s name
- Caller’s call back number

The **first responder** will direct someone to get the AED and bring it to the location of the emergency.

The normal response steps then continue starting with determination of breathing and signs of circulation.

Begin CPR, if indicated. Prepare the AED for use while CPR is in progress. Once the AED is operating, follow directions provided by the AED unit.

#### **Post Incident:**

Any cardiac event or use of the AED shall be reported to the Public Health Officer or AED Coordinator within 24 hours of the incident.

#### **Site Contact shall:**

- Contact the district AED coordinator.
- Complete report Form (stored under the AED) which will include:
  - Date/time of the incident,
  - Nature of the incident, location of the AED used
  - Patient’s name
  - Responders
  - Witnesses
  - Follow-up care (hospital, doctor)
  - Clean the AED and restock any used electrode pads or batteries
  - Perform post use inspection before placing the unit back in service.

#### **The AED Coordinator shall:**

- Contact the county EMS who can perform the post use download. They will also complete and submit the required AED use form for the county EMS.
- Contact Dr. Dana Vierra, ER physician Kaiser Vacaville to conduct incident debriefing, as needed.

#### **D. Program Evaluation**

The AED Coordinator for the DJUSD will complete the “AED Annual Program Update” annually and will submit it to the Yolo County Emergency Medical Services Agency.

### E. Training and Record keeping

At least once a year, offer a demonstration to staff associated with the building so that they can be walked through how to use an AED properly in an emergency.

Initial AED training, leading to certification, is required for all coaches, nurses, teachers going on field trips, and educators working with medically fragile students and/or performing specialized health care procedures. This training shall consist of a standard CPR/AED Training Program with mandatory skills evaluations. This skills evaluation, required in California, is necessary to maintain proficiency and may take a variety of forms. Re-certification training will be conducted every 2 years according to National Standards, including the American Heart Association and the American Red Cross. The AED Coordinator or contracted vendor certified as a CPR instructor will provide the training program.

Additionally, optional Cardiac Emergency Response drills may be held yearly. Information, resources and support can be found at Project ADAM at UC Davis Children's Hospital:

[www.ucdmc.ucdavis.edu/children/clinical\\_services/ProjectADAM](http://www.ucdmc.ucdavis.edu/children/clinical_services/ProjectADAM)

## 7. REPORTING AND RECORD-KEEPING REQUIREMENTS

Any cardiac event and the use of the AED will be reported to the AED Coordinator.

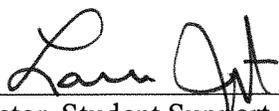
The AED Coordinator will submit the "AED Use Notification Form" to the DJUSD Superintendent and to the Yolo County Emergency Medical Services Agency (YEMSA).

AED incident reports shall be maintained in accordance with the requirements as required by law.

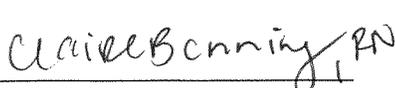
AED Coordinator will maintain all records.

**SIGNATURES:** Approved by:

**Davis Joint Unified School District**

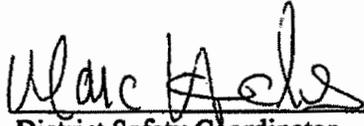
  
\_\_\_\_\_  
Director, Student Support Services  
Laura Juanitas

Date 9-4-19

  
\_\_\_\_\_  
Claire Banning, RN

Date 9/6/19

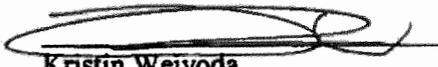
AED Coordinator  
Claire Benning, R.N.



District Safety Coordinator  
Marc Hicks

Date 9-4-19

**Public Health Department**



Kristin Weivoda  
EMS Administrator

Date 9/24/19

**Attachments included:**

- Public Access AED Program Form
- AED Annual Program Update
- AED Use Notification Form
- AED Site Administrators
- AED Maintenance Checklist
- Employee Brochure
- AED Locations & Serial Numbers



**Yolo Emergency Medical Service Agency**  
137 N. Cottonwood Street, Suite 2601  
Woodland, CA 95695 – (530) 666-8645

## PUBLIC ACCESS AED PROGRAM FORM

Company Name: _____		Type of Business: _____
Physical Address: _____		
Mailing Address: _____		
City: _____	State: _____	Zip: _____
Contact Person: _____		Title: _____
Phone: _____		Email: _____
Number of Personnel Trained: _____		Trained by: _____
Training Program: <input type="checkbox"/> American Heart Association <input type="checkbox"/> American Red Cross <input type="checkbox"/> Other		
Name of Oversight Physician: _____		Phone: _____

Do all the employees know the location of the AED?     Yes     No

How were employees notified?     Newsletter     Email     Verbal     Other \_\_\_\_\_

AED Manufacture:     Cardiac Science     Defibtech     Heartsine     Medtronic     Phillips  
                           Welch Allyn     Zoll     Other

AED Model:     AED 10     AED 20     AED plus     AEDpro     CR plus     FirstSave     FR2+  
                   FRx     G3     G3 Automatic     G3 Plus     Lifeline     Lifepak 1000     M Series  
                   On-Site     Powerheart     Reviver/DDU-100     Samaritan     Samaritan PAD  
                   Other \_\_\_\_\_

Is your AED approved for pediatric use?     Yes     No

Total Number of AED's? \_\_\_\_\_    Date AED(s) placed into service? \_\_\_\_\_

Is AED capable of 1 shock & 2 minutes CPR (which meets current AHA guidelines)     Yes     No

Location of AED(s): \_\_\_\_\_

I certify that all information on this application, to the best of my knowledge, is true and correct.

\_\_\_\_\_  
Signature of Contact Person

\_\_\_\_\_  
Date



**Yolo Emergency Medical Service Agency**  
137 N. Cottonwood Street, Suite 2601  
Woodland, CA 95695 – (530) 666-8645

**AED ANNUAL PROGRAM UPDATE**

Agency Name:		Year:
Phone #:		Fax #:
Mailing Address:		
City:	State:	Zip:
Program Contact:		Email:
Phone #:		Fax #:
Chief Name:		
Primary Instructor(s):		
# Personnel (Public Safety) trained to perform AED:		
# Personnel (EMR/EMT) trained to perform AED:		
AED Equipment (Brand Name, Model #):		

I certify that all information on this form, to the best of my knowledge, is true and correct.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print Name and Title of above signature

Application may be mailed or dropped off at the address above.  
The YEMSA drop box is across from the stairs at the Yolo County Health Dept., Bauer Building.  
(same address as above)



**Yolo Emergency Medical Service Agency**  
137 N. Cottonwood Street, Suite 2601  
Woodland, CA 95695 – (530) 666-8645

## AED USE NOTIFICATION FORM

**Directions:**

- Please complete one form for each AED used.
- Please complete one form for each AED **not** used, for example, AED attached to victim but "no shock indicated."
- Submit form even if some information is not available.
- Submit to address noted above.

**Please complete as much information as possible.**

AED Program Name: \_\_\_\_\_  
AED Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
AED Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Incident Information:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Other Location Description: \_\_\_\_\_  
Patient Name (if known): \_\_\_\_\_ Sex: \_\_\_\_\_ Estimated Age: \_\_\_\_\_  
Was CPR Performed? \_\_\_\_\_ CPR Provider: \_\_\_\_\_  
Total number of shocks delivered? \_\_\_\_\_  
Please describe any useful information about the incident or the use of the AED:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Times Noted:**

Witnessed Arrest or collapse: \_\_\_\_\_  
Start of CPR: \_\_\_\_\_  
Call to 911: \_\_\_\_\_  
First Shock: \_\_\_\_\_  
911 Arrival on the Scene: \_\_\_\_\_

## DJUSD Site Administrators & Contacts at Sites Equipped with AED's

School	Principal/Manager	School Nurse/Contact
Birch Lane	Jim Knight	Rhona Youtsey
Cesar Chavez	Veronica Dunn	Natalie Johnson
Children's Center	Jenna Gonzalez	Amy Stacy
Fairfield School	Gay Bourguignon	Claire Benning
Korematsu	Diana Curtaz	Laura Bork
Montgomery	Jennifer McNeil	Natalie Johnson
North Davis	Sarah Roseen	Amanda Gibson
Patwin	Gay Bourguignon	Claire Benning
Pioneer	Patricia Astin	Amanda Gibson
Willett	Heidi Perry	Natalie Johnson
Emerson Jr. High	Scott Thomsen	Claire Benning
Holmes Jr. High	Jean Kennedy	Laura Bork
Harper Jr. High	Kellie Sequeira	Karla Mahoney
Davis Senior High School	Tom McHale	Abby Serin
Da Vinci Charter	Tyler Millsap	Amy Stacy
King High	Cristina Buss	Rhona Youtsey
Davis School for Independent Study	Rob Kinder	Claire Benning
Operations Center	David Burke	Maureen Poole
District Office	Laura Juanitas	Deniece Figueroa

**Davis Joint Unified School District  
Automated External Defibrillator (AED) Program  
Maintenance Checklist**

School Year \_\_\_\_\_

Location \_\_\_\_\_ AED Serial Number \_\_\_\_\_ Inspector \_\_\_\_\_

Criteria	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Comments
<b>AED</b>													
Placement visible, unobstructed and near a phone													
Alarm disable key present													
"Rescue Ready" light green													
Check battery expiration date													
Inspect exterior components for damage													
<b>Supplies</b>													
One set Adult AED pads in AED and one set Peds pads in package													
Ped Pad Expiration date													
Adult Pad Expiration date													
Pocket mask with one-way valve													
Examination gloves													
Razor													
Absorbent gauze or hand towel													
<b>Signature (initials) &amp; Date</b>													

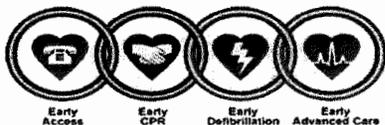
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## AED Program

Most of the people who die suddenly from cardiac arrest are outside of a hospital setting. Fewer than 7% of those who experience sudden cardiac arrest outside of a hospital setting will survive.

CPR and Automated External Defibrillators (AEDs) increase a person's chance for survival when used.

Chance of survival decreases 10% for every minute that passes. To be effective, defibrillation should be delivered within the first few minutes of collapse.



### Phillips Heartstart AED

### Liability Protection

The California Health and Safety Code and Civil Code give liability protection to those who acquire an AED and abide by regulations and additionally covers the Medical Director and individuals who use AEDs in rendering emergency care.



Contact the district Curriculum & Instruction Department for training dates!

DAVIS JOINT UNIFIED SCHOOL DISTRICT

526 B Street

Davis, CA 95616

Phone: 530-757-5300

Fax: 530-757-5323

Email: [djusd.net](mailto:djusd.net)



# DJUSD

DAVIS JOINT UNIFIED  
SCHOOL DISTRICT

**District Office**

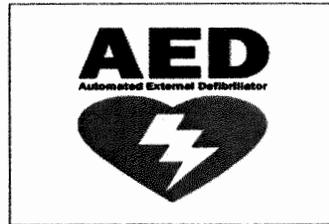


**Early Defibrillation & CPR  
Saves Lives**

Many lives are saved each year in Yolo County communities because of CPR and early defibrillation programs. More lives may be saved if the placement and use of AEDs is increased within our community.

**Location—Staff Lounge  
near East Conference  
Room**

## Cardiopulmonary Resuscitation (CPR)



### You Must be Trained:

- Place the individual on a firm flat surface
  - Check for responsiveness
  - If no response, CALL 911.
  - Open the airway
  - Check for breathing
  - If no breathing give 30 chest compressions.
  - Push hard, push fast in the middle of the chest at least 2 inches deep and at least 100 compressions per minute.
  - Give 2 rescue breaths.
  - Continue cycles of CPR until an AED is ready to use.
- To start: Remove AED from case. Pull handle. Remove protective cover.
  - To turn ON: Press Green on/off button.
  - Remove all clothes from victim's chest.
  - Peel off film seal and remove pads. Peel each pad from yellow plastic liner.
    - *Use adult pads for adult or child older than 8 years or weighing more than 55 pounds.*
  - Place the pads (without stopping CPR) exactly as shown in the picture.
  - If shock is advised press flashing orange shock button. Do not touch patient.
  - If not advised it will prompt you to continue CPR.

Sudden Cardiac Arrest (SCA) claims over 350,000 lives in the United States each year. The most common cause of SCA is ventricular fibrillation, when the heart's electrical impulses become irregular and the heart is unable to pump oxygen-rich blood through the body. If left untreated, death occurs within minutes.

Traditionally the ability to defibrillate outside of the hospital setting was solely the responsibility of EMS personnel. Survival was dependent on early activation of the 9-1-1 system and early arrival of EMS first responders.

Today, the new generation of Automated External Defibrillators (AEDs) makes it possible for the general public to provide defibrillation outside of the healthcare setting. These new AEDs are safe, effective, require low maintenance, and are easy to use.

## Defibrillators - DJUSD

SCHOOL	NURSE	LOCATION	SERIAL NUMBER	Maintenance Log	
				Online	Paper
Birch Lane	Youtsey	Office	A16B-03348	x	x
	Youtsey	MPR	A16B-03310	x	x
Cesar Chavez	Johnson	Office	A16B-03236	x	x
	Johnson	Staff Room	coming soon	x	x
Children's Center	Stacy	Office	A16B-03301	x	x
Da Vinci High	Stacy	Office	A16B-03314	x	x
Davis High	Serin	Nurse's office	A16B-03300	x	x
	Serin	Brunnell Theater	A16B-03316	x	x
	Serin	North Gym	A16B-03324	x	x
	Serin	Stadium snack bar	A16B-03224	x	x
	Serin	South Gym	A16B-03372	x	x
	Serin	Athletic Trainer	A15J-02422	x	x
	Serin	Portable (student)	A15J-02421	x	x
	Serin	All Student Center	A16B-03241	x	x
	Serin	Sp Ed Inclusion Room	A15J-02413	x	x
	District Office	Juanitas	Staff Rm-near East Conf	A16B-03296	x
DSIS	Benning	Office	A16B-03328	x	x
	Benning	North office	A16B-03243	x	x
Emerson Jr. High	Benning	Office	A16B-03304	x	x
	Benning	MPR	A16B-03225	x	x
	Benning	Gym	A16B-03219	x	x
Fairfield	Benning	Office	A16B-03463	x	x
Harper Jr. High	Mahoney	Office	A16B-03239	x	x
	Mahoney	MPR	A16B-03313	x	x
	Mahoney	Gym	A16B-03455	x	x
Holmes Jr. High	Bork	Office	A16B-03305	x	x
	Bork	MPR	A16B-03529	x	x
	Bork	Gym	A16B-03330	x	x
King High	Youtsey	Office	A16B-03246	x	x
Korematsu	Bork	Office	A16B-03226	x	x
Montgomery	Johnson	Office	A16B-03247	x	x
North Davis	Gibson	Office	A16B-03208	x	x
Operations Center	Serin	Copy room	A16B-03215	x	x
Patwin	Benning	Office	A16B-03380	x	x
Pioneer	Gibson	Office	A16B-03218	x	x
Willett	Johnson	Office	A16B-03381	x	x