

Public Access Defibrillation (PAD) Program Policy

Effective Date:

Director, Student Health Service

Vice President, Strategy and Operations

1. PURPOSE

Public access to defibrillation (PAD) is the access to automatic external defibrillators (AEDs) in public and/or private places of high occupancy and where people are at high risk for heart attacks. This policy sets forth standards, procedures, direction, and responsibilities for the oversight, installation, modification, replacement, repair, inspection, maintenance, and (non-medical) response to the AED network on Wake Forest University properties. This policy does not pertain to the medical procedures required during a medical response to a sudden cardiac arrest (SCA).

2. SCOPE

An AED is to be used in conjunction with Cardiopulmonary Resuscitation (CPR) in cases of sudden cardiac arrest on campus, in accordance with the accepted protocols developed by the National Safety Council, the American Red Cross, and the American Heart Association. Use of the AED and CPR will continue as appropriate during the course of emergency care until the victim resumes pulse and respiration, and/or local Emergency Medical Services (EMS) arrive at the scene and assume responsibility for emergency care of the victim.

3. INDEMNIFICATION

North Carolina law allows for the use of an AED during an emergency for the purpose of attempting to save the life of an individual who is, or who appears to be, in sudden cardiac arrest. Accordingly, North Carolina law also expressly provides immunity from civil liability for those who obtain and maintain AEDs, and those who use such devices to attempt to save a life. North Carolina General Statute provides for three classes of persons or entities who are exempt from civil liability related to the use, procurement, and maintenance of AEDs:

- The person or entity that provides the cardiopulmonary resuscitation (CPR) and AED training to an individual using an AED.
- The person or entity responsible for the site where the AED is located when the unit has provided for a program of training.
- A North Carolina licensed physician who writes a prescription, without compensation, for an AED.

General Statute Section 90-21.14 provides that the person who uses an AED to attempt to save or to save a life shall be immune from civil liability unless the person was grossly negligent or intentionally engaged in wrongdoing when rendering the treatment.

4. RESPONSIBILITIES

A. Director of Student Health Service

- 1. Provides medical direction for the use of the AED device (required by NC State Law).
- 2. Prescribes for use of the AED device (not required by NC State Law, but highly recommended).
- 3. Evaluates post-event review forms and electronic files downloaded from the AED.
- 4. Ensures the program stays current with Federal and State AED regulations.

B. AED Oversight Committee

- 1. Annual review of departmental maintenance, inspection records, new requests for purchase, annual site assessment, fiscal year funding (any budgetary changes), any policy changes, and an overall program review.
- 2. Promotes standardization of AEDs to aid staff in familiarization of AEDs installed at WFU. The Committee will advise the University as to additional areas that would benefit from installation of an AED.
- 3. Implementation and enforcement of policy requirements and manufacturer guidelines.

C. AED Program Coordinator

- Maintain a list of AEDs on campus as well as their locations. This list will also be provided to the University Police 911 Dispatch, as well as Forsyth County Emergency Manager. (Appendix A)
- 2. Coordinate CPR/AED training for potential AED users.

- 3. Review and revise the AED (PAD) Policy as needed in conjunction with the Director of Environmental Health & Safety, Risk Services Manager, and the Director of Student Health Service.
- 4. Serve as liaison between the University and the AED manufacturer.
- 5. Organize meetings and work with the Director of Student Health Service to maintain records, AED guidelines, and protocols.
- 6. Work with the Director of Student Health Service on issues related to this AED policy including post-event reviews.
- 7. Update online AED map as required by change in number or location of units.
- 8. Maintain current First Aid/CPR/AED trainer certification.
- Ensure that inspections and maintenance are conducted in a timely manner and in accordance with written user and service manuals provided by the manufacturer.

D. The Department of Environmental Health and Safety

- 1. The Department of Environmental Health and Safety will maintain the budget for equipment needs such as replacement batteries, pads, and training materials for Reynolda Campus units. Athletics, Real Estate Properties, Reynolda House, Graylyn, and Wake Downtown are responsible for budgeting for AED equipment maintenance.
- 2. The staff of Environmental Health and Safety will assist the AED Program Coordinator with inspections and one employee will be designated to serve on AED Committee.
- 3. The Director of Environmental Health and Safety will coordinate with responsible parties regarding upcoming improvements to the program.

E. Building Contact

- 1. Daily check of unit to report any deficiency (beeping, chirping, or damage to cabinet/unit).
- 2. Immediately report deficiencies to AED Program Coordinator.

5. TRAINING

The AED Program Coordinator will offer training/certification classes for faculty/staff/student workers. The cost of training is \$45.00 per person. The cost is charged to the department of the requestor.

6. PLACEMENT STRATEGY FOR NEW AEDS

Early defibrillation is the key to survival from sudden cardiac arrest (SCA). One of the strategies for achieving early defibrillation is placement of AEDs at locations that are readily accessible for designated trained responders, the general public, or both.

The American Heart Association (AHA) strongly advocates placing AEDs in targeted public areas such as sports arenas, gated communities, office complexes, doctor's offices, shopping malls, etc. When AEDs are placed in the community or a business or facility, the AHA strongly encourages that they be part of a defibrillation program in which persons responsible for using the AED are trained in CPR and how to use an AED.

Ideally, AEDs should be placed in easily accessible, well-marked locations, near a front lobby, telephones, exits, elevators, or fire extinguishers. They should be placed in such a way that the response time is no more than three minutes and the call-to-shock is no more than five minutes. The components of the call-to-shock interval include the time it takes designated responders to be notified, access the device, reach the victim's side, apply the electrodes and deliver the first shock.

An initial AED Site Assessment was completed by the Director, Environmental Health and Safety and the Program Coordinator to determine the optimal quantity and placement locations of AEDs required to provide timely response to sudden cardiac arrest. As part of the overall assessment, the following criteria was used in determining an appropriate location for each AED placement:

- highly visible, highly accessible locations
- near points of travel such as stairs or elevators
- near high risk areas such as fitness facilities, cafeterias, areas of strenuous physical activity, or high population areas
- at standardized locations in multi-level buildings
- · near telephones or occupied offices

An annual review by the AED Oversight Committee will determine the need for a reassessment due to new construction, renovations/additions, increases in enrollment/employees, or any other factor that may affect the effectiveness and accessibility of AEDs on campus.

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7. REPLACEMENT PLAN FOR AGING AEDS

Although routine maintenance is performed on existing AEDs to ensure they remain in proper working condition, it is in the University's best interest to have the same unit in all locations. This will allow for consistency of information, confidence and familiarity among users. An annual review of the replacement schedule is necessary to procure funding for the upcoming fiscal year and reevaluate the accuracy of the location and ownership of AEDs listed. The annual review will be conducted by the AED Oversight Committee.

8. PROCUREMENT PROCESS FOR AEDS

In the event that a single department requests the purchase and installment of an AEDs in their area, they must contact the AED Coordinator to submit the request. The request is made by generating an email to The Department of Environmental Health and Safety at wfuehs@wfu.edu

The requestor's department will be responsible for financing the new unit and continual maintenance costs.

9. REVISIONS

REVISION	REVISION DATE
Updated appendices to eliminate hard copy of google map locations and initial site survey	February 28, 2019
Appendix A updated to include additional units and new building contacts	February 28, 2019