

R 5300 AUTOMATED EXTERNAL DEFIBRILLATORS (AEDS)

A. Automated External Defibrillator (AED)

1. Every school in the school district shall have an AED as defined in N.J.S.A. 2A:62A-24.
2. For the purposes of this Policy and Regulation, “automated external defibrillator” or “defibrillator” or “AED” means a medical device heart monitor and defibrillator that:
 - a. Has received approval of its pre-market notification filed pursuant to 21U.S.C.§360(k) from the United States Food and Drug Administration;
 - b. Is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia, and is capable of determining, without intervention by an operator, whether defibrillation should be performed; and
 - c. Upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.

B. Location and Availability of AED

1. The AED shall be made available in an unlocked location on school property with an appropriate identifying sign.
2. The AED shall be accessible during the school day and any other time when a school-sponsored athletic event or team practice is taking place in which pupils of the school district are participating.
3. The AED shall be within reasonable proximity of the school athletic field or gymnasium, as applicable.

C. Training Requirements for Using an AED

1. A team coach, licensed athletic trainer, or other designated staff member if there is no coach or licensed athletic trainer, who is present during athletic



events or team practices, shall be trained in cardio-pulmonary resuscitation and the use of the AED in accordance with the provisions of N.J.S.A. 2A:62A-25.a.

- a. The school district shall be deemed to be in compliance with this requirement if a State-certified emergency services provider or other certified first responder is on site at the event or practice.
2. Prior to using an AED a school employee must have successfully completed and hold a current certification from the American Red Cross, American Heart Association, or other training programs recognized by the Department of Health and Senior Services in cardio-pulmonary resuscitation and the use of an AED.
 - a. The Board of Education shall not be liable for any act or omission of any lay person who uses the defibrillator in the rendering of emergency care.
 3. Each AED shall be maintained and tested according to the manufacturer's operational guidelines.
 4. The Principal or designee shall notify the appropriate first aid, ambulance, rescue squad, or other appropriate emergency medical services provider that the school has acquired an AED, the type acquired, and its location.
 5. Prior to purchasing an AED, the Superintendent of Schools or designee will provide the prescribing licensed physician with documentation that the school district has a protocol in place to comply with the requirements of 2., 3., and 4. above.
- D. Immunity from Civil Liability
1. Any person who uses an AED shall request emergency medical assistance from the appropriate first aid, ambulance, or rescue squad as soon as practicable. However, a lay person who, in good faith, fails to request such emergency medical assistance shall be immune from civil liability for any personal injury that results from that failure.
 2. The school district and its employees shall be immune from civil liability in the acquisition and use of AEDs pursuant to the provisions of N.J.S.A. 2A:62A-27.



- a. Any person or entity who, in good faith, acquires or provides an AED, renders emergency care or treatment by the use of an AED, assists in or supervises the emergency care or treatment by the use of an AED, attempts to use an AED for the purpose of rendering emergency care or treatment, and who has complied with the requirements of Policy and Regulation 5300, N.J.S.A. 18A:40-41.a and b, and N.J.S.A. 2A:62A-23 through 2A:62A-27 shall be immune from civil liability for any personal injury as a result of that care or treatment, or as a result of any acts or omissions by the person or entity in providing, rendering, assisting in, or supervising the emergency care or treatment.
 - b. A person or entity providing or maintaining an AED shall not be liable for any act or omission involving the use of an AED in the rendering of emergency care by a lay person.
3. The immunity provided in 2. above shall include the prescribing licensed physician and the person or entity who provided training in cardio-pulmonary resuscitation and use of the AED.
 4. N.J.S.A. 2A:62A-27 shall not immunize a person for any act of gross negligence or willful or wanton misconduct. It shall not be considered gross negligence or willful or wanton misconduct to fail to use a defibrillator in the absence of an otherwise pre-existing duty to do so.
- E. Emergency Action Plan
1. The Superintendent of Schools or designee shall establish and implement an Emergency Action Plan applicable to each school in the district for responding to a sudden cardiac event including, but not limited to, an event in which the use of an AED may be necessary.
 - a. The Emergency Action Plan shall be consistent with the provisions of N.J.S.A. 18A:40-41.a and, at a minimum, shall include a list of no less than five school employees, team coaches, or licensed athletic trainers in each school building who hold current certifications from the American Red Cross, American Heart Association, or other training programs recognized by the Department of Health and Senior Services in cardio-pulmonary resuscitation and in the use of the AED. This list shall be updated, if necessary, at least once in each semester of the school year.



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- b. The Emergency Action Plan shall also include detailed procedures on responding to a sudden cardiac event including, but not limited to:
- 1) The identification of the persons in the school who will be responsible for responding to the person experiencing the sudden cardiac event;
 - 2) Calling 911;
 - 3) Starting cardio-pulmonary resuscitation;
 - 4) Retrieving and using the AED; and
 - 5) Assisting emergency responders in getting to the individual experiencing the sudden cardiac event.

Approved: June 9, 2014

