**Automated External Defibrillators Policy**



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| **PERSON RESPONSIBLE FOR POLICY:**  | **Seana Rose** |
| **APPROVED: L.J. Stanton**  | **DATE: 04.03.2021** |
| **SIGNED:**  | **ROLE: Principal** |
| **TO BE REVIEWED:**  | **DATE: March 2022** |

This policy has been written in relation to the document:

Automated External defibrillators (AEDs) A guide for schools April 2016

https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/519994/ AED\_guide\_for\_schools.pdf

Any quotes are taken directly from this document.

**Context**

‘An AED is a machine used to give an electric shock when a person is in cardiac arrest, i.e. when the heart stops beating normally. Cardiac arrest can affect people of any age and without warning. If this happens, swift action in the form of early cardiopulmonary resuscitation (CPR) and prompt defibrillation can help save a person’s life.

The AED will analyse the individual’s heart rhythm and apply a shock to restart it, or advise that CPR should be continued. Voice and/or visual prompts will guide the rescuer through the entire process from when the device is first switched on or opened. These include positioning and attaching the pads, when to start or restart CPR and whether or not a shock is advised.’

**Cardiac arrest and heart attacks**

 ‘It is important to understand the distinction between a heart attack and cardiac arrest as they are not the same, and require different interventions. CPR and/or the use of an AED is not appropriate for an individual experiencing a heart attack and who is conscious, as the heart will still be beating, and the device will not administer a shock in these circumstances. However, a heart attack is still a life-threatening situation, and the emergency services should be alerted immediately. A heart attack can also very quickly lead to cardiac arrest, in which case administration of CPR and use of an AED may help to save the person’s life.’

‘**Cardiac arrest** is when the heart stops pumping blood around the body. It can be triggered by a failure of the normal electrical pathway in the heart, causing it to go into an abnormal rhythm or to stop beating entirely. Oxygen will not be able to reach the brain and other vital organs. When a cardiac arrest occurs, the individual will lose consciousness and their breathing will become abnormal or stop. If basic life support is not provided immediately, the chances of survival are greatly reduced. Cardiac arrest can happen at any age and at any time.’

Possible causes include:

• heart and circulatory disease (such as a heart attack or cardiomyopathy) • loss of blood • trauma (such as a blow to the area directly over the heart) • electrocution • sudden arrhythmic death syndrome (SADS; often caused by a genetic defect)

‘When a cardiac arrest occurs, CPR can help to circulate oxygen to the body’s vital organs.

This will help prevent further deterioration so that defibrillation can be administered.’

‘A **heart attack** (sometimes referred to as a myocardial infarction), is caused by a clot forming in one of the arteries that supply blood to the heart muscle. This prevents oxygen from getting to a particular region of the heart. As a result, cells in this region start to die. The longer this continues, the more damage is caused to the muscle. This damage is permanent. However, as the heart is still beating, CPR and defibrillation are not appropriate.’

‘If a person experiences a heart attack, the correct course of action is to call 999 immediately. The person should be made comfortable, ideally seated on the floor supported by a wall or a person knelt behind them, and reassured until the ambulance arrives.’

‘Heart attacks are very rare among children, but the number of incidents in the adult population means that coronary heart disease (the most common cause of heart attacks) is the leading cause of death in the UK.5 Common symptoms of a heart attack include: • chest pain or tightness, like a belt or band around the chest, and which is not relieved by rest • pain which may spread to neck, jaw, back and arms • feeling sick, sweaty, short of breath, lightheaded, dizzy or generally unwell along with discomfort in the chest.’

‘Standard AEDs are suitable for use on people of all ages, except small children aged under 12 months. For children aged 1–8, it is recommended that AEDs be used in paediatric mode or with paediatric pads. However, adult pads may be used if paediatric pads are not available. Rescuers should not hesitate to use an AED on a pregnant woman in cardiac arrest, as resuscitation of the pregnant mother is the only way to keep her unborn child alive. Early defibrillation can therefore help provide the best chances of survival for both the unborn child and the mother. When calling 999, it is advisable to notify the operator that the casualty is pregnant as this may determine which response crew/vehicle is required.’

# The chain of survival

‘In the event of a cardiac arrest, defibrillation can help save lives, but to be effective, it should be delivered as part of the chain of survival. ‘

There are four stages to the chain of survival, and these should happen in order. When carried out quickly, they can drastically increase the likelihood of a person surviving a cardiac arrest.

They are:

1. Early recognition and call for help. Dial 999 to alert the emergency services. The emergency services operator can stay on the line and advise on giving CPR and using an AED.
2. Early CPR – to create an artificial circulation. Chest compressions push blood around the heart and to vital organs like the brain. If a person is unwilling or unable to perform mouthto-mouth resuscitation, he or she may still perform compression-only CPR.
3. Early defibrillation – to attempt to restore a normal heart rhythm and hence blood and oxygen circulation around the body. Some people experiencing a cardiac arrest will have a ‘non-shockable rhythm’. In this case, continuing CPR until the emergency services arrive is paramount.
4. Early post-resuscitation care – to stabilise the patient.

‘It is important to emphasise that life-saving interventions such as CPR and defibrillation (stages 2 and 3) are only intended to help buy time until the emergency services arrive, which is why dialling 999 is the first step in the chain of survival.’

The academy will endeavour to carry out procedures in line with the four stages to the chain of survival.

The Principal with the support from SLT will ensure that staff are regularly reminded about emergency procedures.

# Location and access

 ‘In view of the importance of responding swiftly to a cardiac arrest, AEDs should be located strategically to ensure that they can be accessed quickly in an emergency.’ The AED is located **on the wall at the back left of the main school office.**

The academy reviews the location of the AED on a least an annual basis, especially if there are any changes to the academy buildings and site.

If the device is moved temporarily then the academy will display a prominent notice to this effect in its usual location, giving appropriate details.

The academy will ensure that the local ambulance service is informed of the make, model and location of the AED, and any access arrangements, in order to assist 999 operators and ambulance crews.

The AED will only be locked away in exceptional circumstances and if this is the case guidance from the ambulance service will be sought.

The academy’s insurance arrangements cover the maintenance and use of the AED.

# Training

‘AEDs are designed to be used by someone without any specific training and by following step-by-step instructions on the AED at the time of use.’

The academy will circulate the manufacturer’s instructions to all staff and to provide a short general awareness briefing session in order to meet our statutory obligations. We will take regular opportunity to raise awareness of the AED in the academy and to promote its use should the need arise.

The Principal will ensure that all staff are aware of emergency procedures.

# The resuscitation plan

The academy adheres to the guidance by ensuring that:

‘If one person is on the scene, they should immediately call the emergency services (step 1 of the chain of survival) and start CPR immediately afterwards (step 2).’

‘If two people are on the scene, one should call the emergency services while the other starts CPR. The person administering CPR should not leave the casualty unless absolutely essential.’

‘Where possible, it is suggested that arrangements are implemented to enable the AED to be brought to the scene by someone already close to its usual location, as this is likely to be quicker than sending somebody to fetch it. If this is not practical, the rescuer should remain with the casualty and a second individual should be sent to fetch the AED.’

The academy will contact the local ambulance service after an AED has been used and make arrangements for the data to be downloaded

The academy will ensure that the AED is ready for use again by replacing pads and other consumables as required, and ensure that it is not displaying any warning lights or messages.

The Principal will ensure that the appropriate ‘follow up’ procedures will take place after an incident and after the use of the AED.

# Maintaining the AED

The academy will ensure the AED will be checked on a regular (and no less frequently than weekly) basis.

The designated person for checking the device is **Seana Rose**

Records of the checks will be kept by the designated person.

The designated person will consult the AED manual. The manual is kept **in the filing cabinet next to the AED.**

The academy will expect notice of any changes and software updates from the AED suppliers.

# Those Responsible

The TMB is responsible for ensuring that policy is put into practice and this will be reviewed at least annually. They will also support all staff involved by agreeing to them accessing training and by ensuring that they feel secure and comfortable that they are adhering to national and local guidance.

The TMB with the Principal will ensure that there are appropriate levels of insurance in place.

The TMB with the Principal will ensure that there are identified members of staff with up to date first aid training and certificates.