

# LANCASTER ROYAL GRAMMAR SCHOOL

## POLICY STATEMENT

Number 56

Approved by SLT  
June 2023

### The use of Automated External Defibrillators (AEDs) in school - cardiac emergency response plan

#### Aim of the policy

- To ensure that Lancaster Royal Grammar School- in line with government guidance - has a comprehensive and appropriate Cardiac Emergency response plan, in order for every pupil, employee and visitor to receive the best care in the event of an emergency.
- To ensure that staff and pupils are aware of the presence of Automated External Defibrillators on campus.

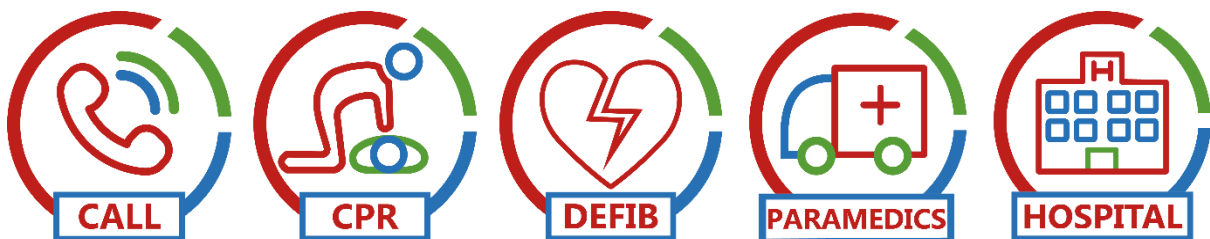
#### Legislation and Guidance

This policy is based on guidance from the Department of Education on the use of Automated External Defibrillators (AEDs) in schools (January 2023) and guidance from the Resuscitation Council UK.

#### Cardiac Emergency response plan

A cardiac emergency requires immediate action. Cardiac emergencies may arise as a result of a sudden cardiac arrest or a heart attack. Sudden cardiac arrest occurs when the electrical impulses of the heart malfunction, resulting in sudden death.

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:



### **Follow these steps in responding to a suspected cardiac emergency:**

1. Recognise the signs of Sudden Cardiac Arrest (SCA) and take action in the event of one or more of the following:
  - The person is not moving, or is unresponsive or appears to be unconscious.
  - The person is not breathing normally (i.e. may have irregular breathing, gasping or gurgling or may not be breathing at all).
  - The person appears to be having a seizure or convulsion-like activity (cardiac arrest victims commonly appear to be having convulsions).
2. Facilitate immediate access to professional medical help
  - Call 999 as soon as you suspect a sudden cardiac arrest. Provide the school address and patient condition. Remain on the phone to 999. Give the exact location (what3words can be used – see below) and provide the recommended route for an ambulance to enter and exit.
  - Assign somebody to wait and direct the Emergency services to the scene
  - Assign someone to retrieve the Automated External Defibrillator (AED) closest to your location.
  - Assign someone to notify other staff (school nurse, first aiders)
3. Start CPR - Begin continuous chest compressions until the AED is recovered
4. Use the AED
  - AEDs are designed to be used by anybody even without any medical training. When the AED is brought to the patient's side, open the lid by pressing the button at the front. Visual and audio prompts will guide your next moves. Attach the pads to the patient as shown on the pads cover and follow the audio and visual instructions. The AED will perform an ECG. If the person needs to be shocked to restore normal heart beat, the AED will deliver the shocks. The shocks can only be delivered by the AED. The rescuer cannot initiate a shock
  - Continue CPR until the patient is responsive or a professional responder arrives and takes over.

### **Location and access**

In view of the importance of responding swiftly to a cardiac arrest, defibrillators should be located strategically to ensure they can be accessed quickly in an emergency. Devices should ideally be situated no further than a two-minute walk from the areas where they are most likely to be needed.

Following the LRGS First Aid risk assessment and based on the number of pupils, staff and activities undertaken, the defibrillators have been placed in the following areas:

1. **City view** (main entrance)(What3words address: ///hospitals.drill.carting)
2. **Medical centre** (clinical room) (What3words address: ///ordinary.tonality.jolt)

3. **Cricket pavilion**( next to entrance) (What3words address: ///wooden.informer.months)
4. **Memorial field**(Through main entrance, above water fountain) (What3words address: ///teaches.sensitive.beads)
5. **Sports Hall**(Entrance) (What3words address: ///cities.juggles.toast)
6. **Lee House** (external public defibrillator in lockable heated cabinet)( What3words address:///retailing.adults.rely)

If an AED is temporarily moved from its usual location other than in an emergency (for example to provide cover at a sports event elsewhere, or during a boarding daytrip), a prominent notice must be placed at its usual location, giving details of an appropriate telephone number on which the member of staff who holds the AED can be contacted.

The indoor defibrillators are kept on specially designed wall mounts. The external/community defibrillator, outside Lee House, is kept in a lockable, heated cabinet. The code for this cabinet can be obtained by calling the emergency services and giving them the identifying code written on the cabinet.

All cabinets and wall brackets are clearly marked using the standard sign for AEDs and an extra sign stating that no training is required to use this device.

### **Training**

AEDs as work equipment, are covered by the Provision and use of work equipment Regulations 1998 and as such this places duties on employers in respect of employee training and the provision of information and instructions in the use of such equipment. However, 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. It is therefore sufficient for the school to circulate the manufacturer's instructions to all staff and provide a short general awareness briefing session in order to meet statutory obligations.

### **Accessories and consumables**

Every AED should be kept with a number of accessories/consumables to ensure that it is always ready for use:

1. Electrode pads (they should be pre-connected to the device)
2. Scissors
3. Protective gloves
4. Towel or dry wipes
5. Safety razor
6. Pocket mask/Face shield

### **Maintenance**

Modern AEDs undertake regular self-tests and if a problem is detected this will be indicated by means of a warning sign or light on the machine

AEDs must be checked weekly by designated members of staff (Appendix 2) using a standardised check list (Appendix1). The completed form must be returned to the medical centre.

The condition of the heated outdoor cabinet (Model type: Six Case SC1340/1440) must be checked, including the door closure and locks. As the control of temperature is of paramount importance for the lifespan and performance of the device, a cabinet's heater check should be done regularly according to the guidance provided by the manufacturer. The checks are performed by the school's maintenance team monthly (Appendix 3).

### **Replacing consumables**

Pads, battery, safety razors, protective gloves and pocket masks need to be replaced after every incident

The batteries and pads must be replaced after the period of time specified by the manufacturer. The medical centre is responsible for the ordering and replacement of consumables.

### **Registration with The Circuit**

The Circuit is the national defibrillator database which provides a national overview of where defibrillators are located, and it is linked to all ambulance services in the UK.

If someone suffers a cardiac arrest, the ambulance service will use The Circuit to find the nearest accessible defibrillator to direct the caller to the correct location to access it.

Registration with the Circuit also means that regular reminders are received to check the defibrillator and change the electrode pads when they have expired.

LRGS has one defibrillator accessible to the general public. It is located to the right of the main entrance to Lee House. The device is registered with the Circuit. It is essential that all the necessary procedures are followed to remain part of the Circuit, including regularly updating the status of the device on the Circuit's website.

The primary public defibrillator Guardian is the Operations Manager. Support Guardians can be nominated to receive reminders and help with the maintenance. Monthly updates on the status of the defibrillator on the Circuit website are done by either the primary or the support Guardians.

### **Additional considerations**

#### **After an incident:**

Assisting someone who has suffered a cardiac arrest can be a stressful experience for the rescuer. Should a rescuer need support after an incident, they may be able to request a debriefing from the local ambulance service. Alternatively they can seek help from their GP.

Most defibrillators will store data, which can subsequently be used to assist with ongoing patient care. The schools should therefore contact the local ambulance service after a defibrillator has been used and make arrangements for the data to be downloaded.

The school should ensure that the defibrillator is ready for use again by replacing pads, batteries and other consumables as required.

If a cardiac arrest occurs as a result of an accident or act of physical violence arising out of or in connection with work, this may constitute a reportable incident under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Reporting requirements will differ according to whether the individual suffering cardiac arrest is an employee or a non-employee (e.g. pupil, parent, visitor). Further information can be found in the Health and Safety Executive guidance on incident reporting in schools (<http://www.hse.gov.uk/services/education/index.htm>).

### **Legal considerations**

Ensuring that there is a plan to make staff and pupils aware of the chain of survival and when to use a defibrillator, will render the school prepared in the event of an emergency. Further information and support can be found through the Resuscitation Council UK and its publications, for example, Cardiopulmonary resuscitation, automated defibrillators and the law.

Modern AEDs are very reliable and will not allow a shock to be given unless it is needed. They are, therefore, extremely unlikely to do any harm to a person who has collapsed with a suspected SCA. They are also safe and present minimal risk of a rescuer receiving a shock. AEDs require very little routine maintenance or servicing; most perform daily self-checks and display a warning if they need attention. Those currently offered for sale have a minimum life expectancy of 10 years. The batteries and pads have a long shelf life, allowing the AED to be left unattended for long intervals. These features make AEDs suitable for use by members of the public who have little or no training, and for use in public access defibrillation schemes.

A claim for negligence could be brought if it could be shown that a duty of care had been breached, leading to harm. In the UK, there is no legal obligation for others to help a person in need of resuscitation, provided they were not the cause of the person needing help. However, there are circumstances in which certain professionals, and people who have a particular relationship with the collapsed person, would be considered to have a duty of care. Also, once a bystander volunteers to help, they are then considered to have a duty of care to assist the person as far as they are able.

Anyone who attempts resuscitation would only be legally liable if it could be shown that the intervention had left a person in a worse position than they would have been in had no action been taken. In the case of a cardiac arrest, this would be virtually impossible, since without intervention death is inevitable. Additionally, an AED will only deliver shocks if it detects a pattern consistent with a cardiac arrest. Someone could potentially be left worse off if CPR were carried out inappropriately, but this is highly unlikely. In this case, it would have to be shown that the standard of care was to blame and this would be judged according to the rescuer's training level. Third parties, such as first aid trainers, or organisations that provide training, maintain resuscitation equipment or administer the system under which rescuers operate, could also be potentially held liable. However, a claim would only be successful if the training were below standard, or equipment had not been correctly maintained, leading directly to harm.

The best way to avoid personal liability is to follow good practice. This means:

- acting in good faith for the benefit of the person with SCA to improve their chance of survival
- following instructions from 999 dispatchers, from the AED or from a volunteer professional at the scene
- following the guidelines recommended by authoritative bodies such as the Resuscitation Council UK, both in the teaching and practice of resuscitation techniques

- keeping training up-to-date
- Using the correct equipment recommended for the procedure and keeping it well maintained in accordance with the manufacturer's recommendations.

Insurance cover may vary according to circumstances such as where and when resuscitation takes place.



## Appendix 2

1. **City view:** Michelle Bird
2. **Medical centre:** Medical centre staff
3. **Cricket pavilion:** PE department to assign this task yearly under their Health and Safety instruction
4. **Memorial field:** PE department to assign this task yearly under their Health and Safety instruction
5. **Sports Hall:** PE department to assign this task yearly under their Health and Safety instruction
6. **Lee House:** Monika Brzeska





