

# MICHIGAN STATE UNIVERSITY

## Automated External Defibrillator (AED) Use Policy

### POLICY

Use of automated external defibrillators (AED) will be in compliance with the responsibilities and procedures outlined in this policy and consistent with American Heart Association guidelines and those identified by the State Emergency Medical Services Coordination Committee. All AED's must be approved by the Oversight Committee prior to purchase and must be obtained through MSU Purchasing. The policy applies to all AED units on campus, whether obtained by individual departments or by the University.

### RESPONSIBILITIES OF OVERSIGHT COMMITTEE

An Oversight Committee consisting of the University Physician's Office or designee; the Chief of Police or designee, General Counsel or designee, the director of Environmental Health & Safety (EHS) or designee, and the director of University Services or designee, and the director of Risk Management or designee will meet at least once per year, and will be responsible for performing and maintaining a record of the following activities:

- Disseminate information about the AED policy and the location of all campus AEDs to all employees.
- Approve the type of AED unit that can be purchased, its location and placement, and guidelines for maintenance, testing, training, and recordkeeping.
- Coordinate information regarding availability and location of AED's with local EMS system including determination that the approved AED unit(s) are compatible with local EMS equipment.
- Review of requests for purchase will include, but not be limited to, consideration of need, risk of location, population in building, response time of EMS, and ability to support a plan of response in 3-5 minutes.
- Development of a standard post incident debriefing protocol for individuals who use the AED.
- Review of each use of an AED as soon as possible after the event by the Oversight Committee Chairperson. This review may cause the chairperson to call a meeting of the Oversight Committee to review policy change prior to the next annual meeting.
- Annual review of departmental records of inspection, testing and maintenance.
- Periodic audit for compliance with policy.
- Annual review that the department maintaining the AED has demonstrated responsibility for funding and ongoing plan for all costs and activity associated with equipment maintenance and personnel training for the following year.
- Maintenance of records pertaining to the AED policy and Oversight Committee in the Office of Risk Management and Insurance.

## **PROCEDURE FOR THE PURCHASE, PLACEMENT AND USE OF AEDS**

1. The department/unit will request approval from the Oversight Committee to obtain and maintain an AED. The request must include the following information:
  - a. Justification of need.
  - b. Plan for training of personnel.
  - c. Plan for trained personnel coverage of location(s).
  - d. Designation of Area Coordinator responsible for compliance with policy, including training, maintenance, testing and recordkeeping.
  - e. Designated number and placement to support location.
  - f. Funds available for unit(s), required wall mounted and alarmed cabinet(s), supplies, spare batteries.
  - g. Agreement with purchase of standardized equipment on campus.
    - i. Departments will send a requisition to Purchasing. The requisition must include the information required as listed above.
    - ii. The Purchasing buyer, will forward the application materials to the University Physician's Office for final approval.
    - iii. Once approved, Purchasing will issue the purchase order.
2. After receiving approval and properly obtaining one or more AEDs, the Area Coordinator must:
  - a. Identify potential users and ensure that the users receive certified training. Forward list of trained users to EHS who will maintain a current database of all trained users.
  - b. Notify MSU Police, Risk Management, University Physician's Office, and EHS of the location and placement of the units.
  - c. Establish a maintenance schedule and maintain that schedule with the AED unit. This schedule must follow AED unit manufacturer's guidelines.
  - d. Maintain all documentation concerning repairs and replacements with the AED unit.
  - e. Complete Post-Incident Report form each time a unit is used or there is an attempt to use the unit. Forward the completed form to Risk Management and retain a copy in the department.
3. Training
  - a. Current certification in American Red Cross CPR/AED training and/or American Heart Association Heartsaver AED course is required for personnel who will use the AED with renewal as required to maintain certification. Information concerning certified training can be obtained through EHS or Purchasing.
4. Maintenance and Testing for AEDs
  - a. Each AED unit must have two batteries to assure that a spare is always available.
  - b. Each AED unit must have at least one additional set of pads at all times. The pads must be replaced by the expiration date printed on the packages, whether or not they have been used.

## **RESPONSIBILITIES OF AREA COORDINATOR**

The Area Coordinator will be responsible for performing and maintaining a record of the following activities:

- Assuring that there will be sufficient staff trained so that at least two trained staff members will be working whenever the location is in use. **Current certification in American Red Cross CPR/AED training and/or American Heart Association Heartsaver AED course is required for personnel who will use the AED with renewal as required to maintain certification.**
- A record of training dates and certification expiration dates will be maintained and reminders will be sent to trained staff in time to schedule necessary retraining.
- Maintaining and/or replacing all AED equipment and supplies according to the manufacturer's recommendations and documenting the maintenance schedule and funds to accomplish this maintenance as required by the manufacturer of the AED.
- Assuring the completion of the Post-Incident Report Form for all use of or attempted use of the AED . The form must be completed and delivered within twenty-four hours to the Office of Risk Management by the Area Coordinator or designee.