AUTOMATED EXTERNAL DEFIBRILLATOR
EMERGENCY ACTION PLAN

Berlin Community School

Approved ______________
Berlin Community School  
EMERGENCY MEDICAL RESPONSE ACTION PLAN  
FOR AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)  
IN THE SCHOOL SETTING  

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EMERGENCY MEDICAL RESPONSE ACTION PLAN
FOR AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)
IN THE SCHOOL SETTING

1.0 Purpose

To provide direction and detailed procedures for the implementation of Janet's Law regarding the placement and use of Automated External Defibrillators (AED) on school grounds and responding to a sudden cardiac event. It is estimated that over 382,000 people experience sudden cardiac arrest (SCA) in the United States annually. Approximately 92% of those people do not survive. According to the American Heart Association (AHA), the only definitive treatment for SCA is a defibrillation shock that restores normal heart rhythm. The chance of a SCA victim’s survival decreases approximately 10% for every minute that passes without intervention.

2.0 Applicability & Background


Section 1 states, in part:

a. beginning on September 1, 2014, the board of education of a public school district and the governing board or chief school administrator of a nonpublic school that includes any of the grades kindergarten through 12 shall ensure that:

(1) Each public or nonpublic school has an automated external defibrillator, as defined in section 2 of P.L.1999, c.34 (C.2A:62A-24), which is made available in an unlocked location on school property with an appropriate identifying sign. The defibrillator 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 district or nonpublic school are participating. The defibrillator shall be within reasonable proximity of the school athletic field or gymnasium, as applicable;

(2) a team coach, licensed athletic trainer, or other designated staff member if there is no coach or licensed athletic trainer, who is present during the athletic event or team practice, is trained in cardiopulmonary resuscitation and the use of the defibrillator in accordance with the provisions of section 3 of P.L.1999, c.34 (C.2A:62A-25). A school district or nonpublic school 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; and

(3) each defibrillator is tested and maintained according to the manufacturer's operational guidelines and notification is provided to the appropriate first aid, ambulance, or rescue squad or other appropriate emergency medical services provider regarding the
defibrillator, the type acquired, and its location in accordance with section 3 of P.L.1999, c.34 (C.2A:62A-25).

b. A school district or nonpublic school and its employees shall be immune from civil liability in the acquisition and use of defibrillators pursuant to the provisions of section 5 of P.L.1999, c.34 (C.2A:62A-27).


Section 2 states, in part:

a. The board of education of a public school district and the governing body or chief school administrator of a nonpublic school that includes any of the grades kindergarten through 12 shall establish and implement an emergency action plan for responding to a sudden cardiac event including, but not limited to, an event in which the use of an automated external defibrillator may be necessary.

3.0 Responsibilities

The District Superintendent shall be responsible for ensuring that the provisions of this plan are implemented and enforced. It shall be the responsibility of the School Principal, and School Nurses to coordinate their efforts to ensure all elements of this program are followed at each applicable school or other location.

4.0 Automated External Defibrillator (AED)

4.1. General

4.1.1. AED: A portable electronic device that automatically diagnoses potentially life threatening cardiac arrhythmias in patient, and is able to treat them through defibrillation - the application of an electrical shock which stops the arrhythmia, allowing the heart to reestablish an effective rhythm.

4.1.2. AEDs are simple to use, provide audio and visual commands and their use is taught in CPR/AED classes available to laypersons as well as professional level rescuers.

4.1.3. Effective September 1, 2014, an AED shall be available within reasonable proximity of the school athletic field or gymnasium at which a school-sponsored athletic event or team practice in which pupils of the district are participating, is taking place.

4.2. AED Identification

4.2.1. Each AED shall be identified by a unique identifying number.

4.2.1.1. ex: (Unit Number).

4.2.2. AED may be:

4.2.2.1. Fixed: assigned to a specific location within the school/facility.

4.2.2.2. Must be easily accessible (unlocked or un-restrained).
4.2.2.3. May be located in a clearly marked, unlocked AED cabinet or mounted in another manner that allows ease of access in an emergency.

4.2.2.4. Cabinet or mounting may be alarmed with local and/or remote alarm capabilities.

4.2.2.5. "Fixed" AEDs shall not be removed from their designated location except in an emergency situation.

    4.2.2.5.1. If removed for maintenance or repair the cabinet/location shall be clearly marked as "Out of Service" and the next closest location shall be identified.

4.2.2.5.2. A portable AED may be temporarily placed in this location.

4.2.2.6. Portable: For use at locations remote from the building proper or to supplement fixed locations.

    4.2.2.6.1. Portable AEDs needed for off-site athletic contests shall be signed-out for use by contacting The School Nurse or the Assistant School Nurse who shall maintain a log of the user, date issued, location, and returned status. Portable AEDs needed for school field trips shall be signed-out for use by contacting The School Nurse or the Assistant School Nurse who shall maintain a log of the user, date issued, location, and returned status. The user while in possession of the AED is responsible for periodically checking the AED unit and supplies as per manufacturer's instructions, and reporting any issues to the Principal, Vice Principal or School Nurse. Portable AEDs are primarily for use outdoors on practice or playing fields or for other activities not easily supported by "Fixed" AEDs.

    4.2.2.6.2. Portable AEDs shall be housed in a weather-proof, shock-absorbent carrying case and stored the Nurse’s Office (room 51)

    4.2.2.6.3. Portable AEDs shall be clearly marked with their unique identifying number.

4.2.3. "Attachment A" shall list all AEDs in the possession of the school, and as a minimum shall include the AED identification number, location, type (Fixed or Portable) and status (Available for use or Out Of Service). A map shall be affixed to and made a part of "Attachment A" showing the facility's entrances/exits and AED locations. The current "Attachment A" shall be located in the Nurse's Office and maintained and updated as needed by the AED Program Coordinator (School Nurse)
4.3. AEDs shall be so located as to be within reasonable proximity to the covered event. As much as practical, this shall be within a reasonable response time to retrieve the AED and begin emergency care.

4.4. Location of "fixed" AEDs shall be provided to all staff members each school year by the provision of "Attachment A".

5.0 Designated Staff Responders

5.1. Each school shall have no less than five (5) school employees that hold a current CPR/AED certification. This shall include team coaches or other designated staff members. Additional certified employees shall be provided as necessary to ensure all applicable events are adequately covered.

5.2. A team coach shall be present during any athletic event or team practice.

5.3. Designated Staff Responders shall hold a current certification in a training program recognized by the NJ Department of Health and Senior Services in cardio-pulmonary resuscitation (CPR) and in the use of an Automated External Defibrillator (AED).

5.3.1. Certification from an "online only" web-based class is not acceptable.

5.4. The certification of the Designated Staff Responders shall be reviewed and updated at least once each school year.

5.5. "Attachment B" shall be completed and shall list the current Designated Staff Responders, their certification(s), and expiration date of their certification(s).

5.6. The Current Year "Attachment B" shall be maintained, held and made available by the AED Program Coordinator (School Nurse) and other key personnel as determined by the Program Coordinator (School Nurse).

6.0 Covered Events

6.1. An AED must be available, along with a trained designated employee or certified first responder during any school-sponsored athletic event, regardless of the physical location. The AED shall be within a reasonable proximity of the event. Medical experts have determined that a reasonable proximity is a three (3) minute retrieval time from the initial notification of a medical emergency. Factors such as terrain, obstacles and building access locations must be evaluated when determining this reasonable proximity.

6.2. For the purposes of this program, this will include all organized school athletics programs, physical education programs, recess activities, intramural games, after school clubs and similar school sponsored events with an athletic component.

6.3. When participating in athletic events at an off-site location, the Head Coach will ensure that the hosting site is equipped with an approved, functioning and maintained AED. If not, a school AED shall be signed out and
transported to the off-site location by the athletic coach from the School Nurse.

6.4. For athletic events in which the participants are spread out over a large area, such as cross country and golf, the Principal, Vice Principal, School Nurse and team coaches will determine the best methods for location of the AED(s) and designated staff responder(s). This will include stationing an AED in the starting/ending location.

6.5. Athletic events on school property involving third party groups or individuals are not covered under the provisions of this law.

7.0 Response

7.1. Communication

7.1.1. In the event of an emergency, Designated Staff Responders shall be contacted by any available means and shall begin the care of the injured or ill person consistent with their training.

7.1.1.1. Bystanders may be asked to assist in contacting additional personnel.

8.0 Recognition Of An Emergency

8.1.1. All staff participating or attending a school-sponsored function are expected to be cognizant of the activities of the participants in the event.

8.1.2. In the event that a participant is observed to be in distress due to a medical or traumatic event, the staff member shall assure that the appropriate Designated Staff Responders as identified in this document are alerted to the emergency, that 9-1-1 is activated (if deemed necessary), and assist if needed.

8.1.3. Designated Staff Responders shall assure that the injured or ill person is provided the appropriate care, including administration of CPR and application of the Automated External Defibrillator as needed and provided for in their training.

8.1.4. All attendees should be afforded the same level of care in the event of injury or illness as those specifically covered by this legislation.

9.0 Assessment/Intervention

9.1. The following actions must be performed (see "Attachment C").

9.1.1. Recognize that an emergency situation exists.

9.1.2. Assess situation/scene for safety of responders and bystanders.

9.1.3. Evaluate patient’s consciousness, breathing and circulation status and intervene as needed/appropriate in accordance with their training.

9.1.3.1. For non-responsive persons immediately activate the Emergency response.
9.1.3.1.1. Alert 9-1-1 and on-scene personnel.
9.1.3.1.2. Send for the AED.

9.1.3.2. For non-breathing patients.
9.1.3.2.1. Alert 9-1-1 and on-scene personnel.
9.1.3.2.2. Send for the AED.
9.1.3.2.3. Immediately begin CPR in accordance with provided training.
9.1.3.2.4. Patient shall be transported by Ambulance to hospital

9.1.4. Apply and use the AED when available and appropriate.
9.1.4.1. Follow the AED Voice Prompts for application.
9.1.4.2. Follow any additional manufacturer’s recommended guidelines for use of the AED.
9.1.4.3. Patient shall be transported by Ambulance to hospital

9.1.5. Assure prompt transport to medical facility by way of properly staffed Ambulance.
9.1.5.1. Do not transport by personal vehicle.

10.0 Post Event Actions
10.1. Replace any used AED equipment as recommended.
10.1.1. Electrode Pads and other consumable supplies.

10.2. Make notification to the AED Program Coordinator (School Nurse) regarding AED use.
10.2.1. See "Attachment D"

10.3. Inspect the AED for any damage prior to returning to storage.

10.4. Provide information to Superintendent/Principal/AED Program Coordinator (School Nurse) at a minimum.

11.0 Equipment Maintenance Plan
11.1. All AEDs placed in service must be inspected at regular intervals in accordance with the manufacturer’s guidelines to assure functionality when needed.

12.0 Physician Oversight
12.1. The following individual provides medical oversight and assists with quality assurance each time the AED is used.

12.1.1. Name: Dr. Julian Maressa
13.0 Annual Notifications

13.1. The AED Program Director (School Nurse) or designated representative shall on an annual basis notify in writing the local ambulance/rescue squad(s) of the presence of AEDs on school property. This shall include the number, types and locations of the AEDs. Attachment G may be used for this purpose. You may also provide Attachment A as part of this letter. Note that depending on the location of the school buildings, multiple ambulance squads may need to be notified.

14.0 Attachments

14.1. Attachment A: Location of AEDs.
14.2. Attachment B: Designated Staff Responders.
14.3. Attachment C: Assessment/Intervention Flow Chart.
14.8. Attachment H: Copy of Janet’s Law
14.9. Attachment I: Memo - Clarification To Janet’s Law
## AEDs Located at: Berlin Community School

<table>
<thead>
<tr>
<th>AED ID #</th>
<th>Brand</th>
<th>Model</th>
<th>Serial Number</th>
<th>Fixed (F) Portable (P)</th>
<th>Location/Comments</th>
<th>Status</th>
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<tr>
<td>#1</td>
<td>ZOLL AED PLUS</td>
<td>PLUS</td>
<td>X05C055705</td>
<td>F</td>
<td>Outside cafeteria across from Elementary Office</td>
<td>In-Service</td>
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<tr>
<td>#2</td>
<td>Philips Heart Start</td>
<td>Heart Start</td>
<td>REF MMM5070</td>
<td>F</td>
<td>Middle School entrance on wall @ Mrs. Madara’s window</td>
<td>In-Service</td>
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### Designated Staff Responders at Berlin Community School

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<thead>
<tr>
<th>Name</th>
<th>Certification (CPR/AED, FA,)</th>
<th>Brand</th>
<th>Expiration Date</th>
<th>Comment</th>
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<tr>
<td>Monica Shallow, RN</td>
<td>CPR/AED</td>
<td>ARC</td>
<td>December 2015</td>
<td></td>
</tr>
<tr>
<td>Heather Karbach, RN</td>
<td>CPR/AED</td>
<td>ARC</td>
<td>September 2016</td>
<td></td>
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<tr>
<td>Andy Snyder</td>
<td>CPR/AED</td>
<td>ARC</td>
<td>Sept. 2016</td>
<td>All coaches are certified during their designated seasons per NJSIAA and DOE requirements. All expiration dates are kept on file.</td>
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<tr>
<td>Barbara Caruso</td>
<td>CPR/AED</td>
<td>ARC</td>
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<td>Coach/PE</td>
</tr>
<tr>
<td>Michael Ford</td>
<td>CPR/AED</td>
<td>ARC</td>
<td>Sept. 2016</td>
<td>Coach</td>
</tr>
<tr>
<td>Frankie Harris</td>
<td>CPR/AED</td>
<td>ARC</td>
<td>Sept. 2016</td>
<td>Coach</td>
</tr>
<tr>
<td>Kate Walsh</td>
<td>CPR/AED</td>
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<td>Sept. 2016</td>
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<tr>
<td>Jennifer Zingaro</td>
<td>CPR/AED</td>
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<td>Coach</td>
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<td>Michael Galeone</td>
<td>CPR/AED</td>
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<td>Sept. 2016</td>
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<tr>
<td>Debra Mansis</td>
<td>CPR/AED</td>
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<td>Coach</td>
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<td>Erin Maloney</td>
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<td>Coach</td>
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<td>Sarah Browne</td>
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<td>Edward Goodman</td>
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<td>Sept. 2016</td>
<td>Coach</td>
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<td>Brent Woods</td>
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<td>Sept. 2016</td>
<td>Coach</td>
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<td>Matt Jenkins</td>
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<td>Coach/PE</td>
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<td>Tyler Brown</td>
<td>CPR/AED</td>
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<td>ARC</td>
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**Attachment C  Emergency Care Flow Chart**

**Emergency Care Flow Chart**

1. **Check Scene Safety**
   - Safe
   - Un-Safe
     - Make Safe or LEAVE GET HELP
2. **ANY Significant Injury or Illness**
   - Yes
     - CALL 9-1-1 and On Scene Responders
     - Continue Care
   - No
     - Continue Appropriate Care and Assessment. Contact 9-1-1 as appropriate
3. **Check Victim for Responsiveness**
   - Yes
     - (Continue)
   - No
     - (Continue)
4. **Check Victim for Breathing**
   - Yes
     - Breathing Returns Signs of Life
     - (Continue)
   - No
     - (Continue)
5. **Send For AED**
   - (Continue)
6. **Start CPR**
   - Compression Only
   - Or
   - 30 Compressions/2 breaths
   - (Continue)
7. **Apply AED When Available**
   - Turn On and Follow Prompts
   - (Continue)
8. **Place in Recovery Position**
   - Yes
     - Breathing Returns Signs of Life
   - No
     - Continue CPR/AED

Note: "(Continue)" indicates the flowchart continues to the next step without ending at that point.
### Berlin Community School

**Notification of AED Use**

This form may be used to notify appropriate personnel of the use of an AED. Copies are to be provided as below.

Please PRINT

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<tr>
<td>School Physician</td>
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<tr>
<td>Nurse</td>
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<tr>
<td>Principal</td>
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<td>Vice Principal</td>
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**Date:** __________________  **User:** __________________

**AED ID Number:** __________________  **Current Status:** __________________

**Location Used:** __________________

**Brief Description of Emergency:**

________________________________________

________________________________________

________________________________________

**Supplies Expended:**

**Completed by:** __________________

**Date:** __________________
## AED Monthly Check List

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<th>AED#</th>
<th>Battery Ok</th>
<th>No Damage</th>
<th>Adult Pads Ok</th>
<th>Pediatric Pads Ok</th>
<th>Ancillary Supplies OK</th>
<th>Status Light OK</th>
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Inspection Date ____________________________
Annual Notification Letter to Local Emergency Medical Services

September 2014

Chief DeLorenzo
Berlin Borough Police Department
59 S. White Horse Pike
Berlin, N.J. 08009

RE: AED Notification Letter

Dear Chief DeLorenzo:

In accordance with P.L. 1999, c.34 and P.L. 2012, c51, this letter is to inform you that the Berlin Community School has Automated External Defibrillators on its premises. Please see attached for location of AED’s.

The AEDs are overseen by the AED Program Coordinator and School Nurse, Monica Shallow. You may contact me at 856-767-0129 extension X205 with any questions or concerns.

Thank you for your attention to this matter.

Sincerely,

Monica Shallow, RN, BSN, CSN
Certified School Nurse
Berlin Community School
Attachments: School map Interior with
In accordance with P.L. 2012 c. 51, this AED Emergency Action Plan shall be reviewed by the AED Program Coordinator or other qualified person at least each school year for the purposes of reviewing and updating the list of certified Designated Staff Responders and at least annually for the content of this program. Any changes to the program shall be communicated to all key personnel in writing.

**PROGRAM REVIEW DOCUMENTATION**

**DESIGNATED STAFF RESPONDER LIST REVIEW**

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**ANNUAL PROGRAM REVIEW**

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Attachment H-Copy of Janet’s Law

§§1-3 - C.18A:40-41a to 18A:40-41c

Assembly Committee Substitute for Assembly, No. 1608

AN ACT concerning sudden cardiac events and schools and supplementing Title 18A of the New Jersey Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. a. Notwithstanding the provisions of any law, rule, or regulation to the contrary, beginning on September 1, 2014, the board of education of a public school district and the governing board or chief school administrator of a nonpublic school that includes any of the grades kindergarten through 12 shall ensure that:

(1) each public or nonpublic school has an automated external defibrillator, as defined in section 2 of P.L.1999, c.34 (C.2A:62A-24), which is made available in an unlocked location on school property with an appropriate identifying sign. The defibrillator 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 district or nonpublic school are participating. The defibrillator shall be within reasonable proximity of the school athletic field or gymnasium, as applicable;

(2) a team coach, licensed athletic trainer, or other designated staff member if there is no coach or licensed athletic trainer, who is present during the athletic event or team practice, is trained in cardio-pulmonary resuscitation and the use of the defibrillator in accordance with the provisions of section 3 of P.L.1999, c.34 (C.2A:62A-25). A school district or nonpublic school 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; and

(3) each defibrillator is tested and maintained according to the manufacturer’s operational guidelines and notification is provided to the appropriate first aid, ambulance, or rescue squad or other appropriate emergency medical services provider regarding the defibrillator, the type acquired, and its location in accordance with section 3 of P.L.1999, c.34 (C.2A:62A-25).

b. A school district or nonpublic school and its employees shall be immune from civil liability in the acquisition and use of defibrillators pursuant to the provisions of section 5 of P.L.1999, c.34 (C.2A:62A-27).
2. a. The board of education of a public school district and the governing body or chief school administrator of a nonpublic school that includes any of the grades kindergarten through 12 shall establish and implement an emergency action plan for responding to a sudden cardiac event including, but not limited to, an event in which the use of an automated external defibrillator may be necessary.
b. The emergency action plan shall be consistent with the provisions of section 1 of this act and also, at minimum, include the following:
   (1) a list of no less than five school employees, team coaches, or licensed athletic trainers who hold current certifications from the American Red Cross, American Heart Association, or other training program recognized by the Department of Health and Senior Services, in cardio-pulmonary resuscitation and in the use of a defibrillator. The list shall be updated, as necessary, at least once in each semester of the school year; and
   (2) detailed procedures on responding to a sudden cardiac event including, but not limited to, the identification of the persons in the school who will be responsible for: responding to the person experiencing the sudden cardiac event, calling 911, starting cardio-pulmonary resuscitation, retrieving and using the defibrillator, and assisting emergency responders in getting to the individual experiencing the sudden cardiac event.

3. The State Board of Education, in consultation with the Commissioner of Health and Senior Services, and in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations as may be necessary to implement the provisions of this act.

4. This act shall take effect immediately.

"Janet’s Law"; requires public and nonpublic schools to have automated external defibrillators and to establish emergency action plans for responding to sudden cardiac events.
Attachment J-Janet’s Law Clarification Memo

To: ACCASBOJIF Fund Commissioners
    BCIPJIF Fund Delegates
    GCSSIDJIF Fund Delegates

From: John W. Geitz, Safety Coordinator

Date: May 8, 2013

RE: Janet's Law Clarifications

JANET’S LAW CLARIFICATIONS

In January 2013 I distributed a safety notice detailing the requirements of Janet's Law. This law requires an accessible automated external defibrillator in all schools and where school-sponsored athletic events are taking place. Further, it mandates an action response plan to be implemented and certified staff on-site to respond during these activities. The law goes into effect in September 2014.

The law, as written, was ambiguous in several areas. I contacted the NJ Department of Education in order to clarify several potential conflicts within the law. Below is a list of my questions and the responses provided by Christene DeWitt-Parker, MSN, CSN, RN. She is the Coordinator for School Health in the Office of Student Support Services with the New Jersey Department of Education. Her responses have clarified many of the concerns and questions that materialized during the initial report of this law.

Question:
1. What constitutes a "school-sponsored athletic event"? Is it simply a competitive sports team that plays other schools or would it include activities such as intramural games, student/teacher games for fundraisers or fun days, after school clubs with an athletic component and regular physical education programs?

Answer:
1. The law states that the AED must be accessible during the school day and any other time when a school-sponsored athletic event or team practice is taking place in which the pupils of the district or nonpublic school are participating. **The intent of the law is to ensure that there is a defibrillator and someone trained and certified to use the AED if necessary. Therefore, the answer is yes, it must be available for all events that involve any type of athletic participation, as well as during physical education and recess (physical activity).**

Question:
2. What about off-site practices for teams such as golf and swim? Does the school need to take along an AED for these events?

Answer:
2. Each district is responsible for developing a district-wide policy for managing a cardiac emergency. The policy should address, among many other things, the disposition of the AED for all events. The
policy should include the mechanism for deciding how many AEDs are needed and who is responsible for ensuring that one is available for each after-school athletic event as well.

For example, if there is an athletic trainer (AT) on staff it is logical to consider that the policy may state that part of the AT’s job description includes reviewing the calendar for all school-sponsored athletic events, whether on campus or away, and establish a protocol for ensuring that an AED is present at every game and practice. (Some schools have been doing this for years) So, if the swim team or golf team practices somewhere off campus, the AT would communicate with the swim facility/golf course and have a written agreement that the facility will have an AED that is available and ready for use if necessary.

If the facility does not have an AED the school must bring one to the site, either with the coach or AT, however the district policy indicates. If there is no AT at the school then it could be the coach’s responsibility to be responsible for ensuring the AED is appropriately designated for each event. For athletic teams playing at another school, the host school should provide the AED. If the team is going to a school that does not have an AED the school must bring it with them. Again, these are details that must be considered in the development and the implementation of the school policy as well as the notification of all employees, parents and students regarding what is in the policy. [The law also says that someone must be designated at the school to be responsible for maintaining the defibrillator(s), including ensuring that the battery is active and the materials and supplies are current and in good order and ready for use if needed.]

Question:
3. What if a practice or game is played at a third party location (i.e. the fields of a third school district not involved in the game under a shared services agreement?) Does the third party have to provide the AED and certified user or one of the teams involved in the game?

Answer:
3. Third party sites for athletic events - The (school) person responsible for the team should bring their own AED in this case to ensure that there is working AED available.

Question:
4. I am assuming that the requirement for no less than 5 employees such as coaches, trainers, etc. being certified in CPR/AED is per school and not per district? So if a district has 5 schools where events would take place, they would need a minimum of 5 per location, or 25 total?

Answer:
4. You are correct in your understanding that the requirement for no less than five employees certified in CPR/AED applies to each school, not merely five in the district.

Question:
5. The law states that the AED must be within "reasonable proximity" to the gymnasium or athletic field where the event is taking place. Does the NJ Department of Education or NJ Department of Health have a determination of what is considered "reasonable proximity"?

Answer:
5. The scientific literature recommends a three-minute retrieval and return to victim time span. Some schools have golf carts to help with reaction time, but many simply bring the AED to the field (best practice).
Note: The U.S. Department of Health and Human Services, as well as many medical associations indicate a 3 minute response time from the time of the event to the time when you are starting to use the AED. Using the average human ability to run at approximately 5 mph, this equates to 440 feet/minute. Therefore, running 90 seconds out and 90 seconds back would require the AED to be within 660 feet of the event, assuming no other obstacles such as doors, gates, fences, hilly terrain, etc.

Some industry standards are more conservative and use a 90 second total response time, which would require the AED to be within about 325 feet of the event. As has been proven, the quicker the AED is employed, the greater the risk of survival. I would err on the side of caution and use a more conservative approach when possible. As noted, the best practice is to have the AED unit right at the event.

Unfortunately, until this "reasonable proximity" definition is tested in court, we will not know for sure what is deemed appropriate.

Question:
6. Expanding on the off-site concerns, what about the unique exposure presented by cross-country running teams? In many cases, the students are individually running off-site through a local town on a multi-mile course. How does a school district provide an AED within "reasonable proximity"?

Answer:
6. There is no universal answer to the cross-country runner question. Each district needs to determine the approach based on their location and I recommend the school administrator discuss it with the local First Aid Squad.

Note: This will be a difficult issue to address because of the logistics presented by the events. We have discussed the liability issues with these teams previously. Some districts have opted to keep the teams on school property, which helps to limit liability risk and would allow the district to easily address the AED requirements. However, if your cross-country team still runs off-site, you may need to consider a "chase car" or "chase bike" that rides the course while students are running. Local paid emergency squads may be able to respond quickly, however volunteer squads will have a slower response time in most cases. This type of exposure will need to be properly addressed in your Emergency Action Plan. Again, until this type of exposure is legally challenged, we may not have a clearly defined guideline.

Summary
Based on these clarifications of the law, districts will need to evaluate all school-sponsored events with an athletic component. This should include on-site and off-site activities. When visiting third-party locations, you must verify the presence of an AED or bring your own, along with a certified user. Proximity to the events must be taken into account as larger districts may have several events spread out over different fields. Additional AEDs may need to be purchased to ensure adequate coverage.

The Joint Insurance Fund can assist in providing certifications training. As a reminder, you are entitled to one CPR/AED certification class annually from July 1 through June 30 for up to 16 people free of charge. Since this is a two year certification, you could have up to 32 people certified at all times at no charge.

Further, your Safety Incentive Program award money can be used towards the purchase of defibrillators. If you are not yet participating in the program or not achieving the highest level, now would be a great time to review the requirements and start the process. As always, we are here to assist you in any way possible. I hope that this memo has helped to provide guidance in developing your program and addressing key issues. Please let me know if you have any questions or need any assistance. Thank you.