



Municipality of the District of Shelburne Policy Statement

Automated External Defibrillator (AED) Policy

1.0 Title

1.1 This policy may be cited for all purposes as the “Automated External Defibrillator (AED) Policy.”

2.0 Purpose

2.1 The purpose of this policy is to ensure that the Municipality of the District of Shelburne’s automated external defibrillators (AEDs) are properly maintained and that procedures are followed as to their use.

3.0 Background

3.1 An automated external defibrillator (AED) is a portable electronic device that automatically diagnosis potentially life threatening cardiac arrhythmias in a patient and is able to treat them through defibrillation, sending an electric shock to the heart, which allows the heart to re-establish an effective rhythm.

4.0 AED Locations

4.1 AEDs have been installed in the following locations:

- Adjacent to the Finance Office; 1st floor, Shelburne Municipal Building (public area)
- Lock-Up Facility – Control Room (secured area)

4.2 Each AED will have one set of defibrillator electrodes connected to the device and one spare set of electrodes with the AED. One resuscitation kit will be connected to the handle of the AED. Each kit shall contain two pairs of latex-free gloves, one razor, one set of trauma shears and one facemask barrier device.

5.0 AED Storage

5.1 The AED located in the public area shall be kept in a cabinet at all times when not in use. The cabinet shall be free of clutter and accessible at all times.

5.2 Once the AED is removed, an audible alarm will sound, alerting the employees.

5.3 You may silence the alarm by placing the key in the lock on the right side of the cabinet and turning. One key is to be kept inside the AED cabinet while the other key is to be kept in the key cabinet located in the Administration Office.

5.4 The AED unit will not be removed from its alarmed box for the purpose of training or testing staff in its use. AED trainers are available for this purpose and may be obtained by a staff person.

5.5 The AED unit will not be removed from its alarmed case for the purpose of recreational use.

5.6 The AED located in the secured area will be accessible to Lock-up staff only.

6.0 AED Maintenance Schedule

6.1 The AED completes a daily maintenance self-check and will light continuously to confirm it is working correctly.

6.2 The Safety Officer shall complete a weekly visual check to ensure that the "OK" light is lit continuously and this confirmation shall be documented in a written log.

6.3 The By-Law Enforcement Officer shall complete a monthly check to ensure that the medical device and accessories are in place and ready for use.

6.4 Lock-up staff shall complete all checks of the AED located in their facility and shall advise the Safety Officer of any issues with the device.

6.5 Once each calendar year, the System Owner or their designee shall conduct and document a system readiness review. This shall include review of the following elements:

- Training records (ie. First Aid/CPR)
- Equipment operation and maintenance records

7.0 Volunteer Responder Responsibilities

7.1 Anyone can, at their discretion, provide voluntary assistance to victims of medical emergencies. The extent to which these individuals respond shall be appropriate to their training and experience. These responders are encouraged to contribute to emergency response only to the extent they are comfortable. The emergency medical response of these individuals may include CPR, AED or medical first aid.

7.2 Section 3 of the **Volunteer Services Act** states the following:

“Where, in respect of a person who is ill, injured or unconscious as a result of an accident or other emergency, a volunteer renders services or assistance at any place, the volunteer is not liable for damages for injuries to or the death of that person alleged to have been caused by an act or omission on the part of the volunteer while rendering services or assistance, unless it is established that the injuries or death were caused by gross negligence on the part of the volunteers, and no proceeding shall be commenced against a volunteer which is not based upon his alleged gross negligence.”

8.0 Procedure

8.1 Call 9-1-1

8.2 Determine if victim:

- Is unconscious
- Not breathing
- Has no pulse and/or shows no signs of circulation such as breathing, coughing or movement.

Apply the AED if the victim is:

- Not responding
- Not moving
- Not breathing normally
- Not breathing at all

If in doubt, apply the AED

8.3 When emergency medical personnel arrive, tell them what actions you have taken. Tell them how long the victim has been unconscious, if you delivered shocks, the number of shocks delivered, and if you performed CPR. Do not worry if you cannot recall precisely what happened. Your AED makes a digital recording of heart rhythms and shocks that can be transferred to a computer at a later time.

8.4 Complete the Automatic External Defibrillator Event Summary and notify the Chief Administrative Officer (CAO) of the event.

Clerk's Annotation For Official Policy Book

Date of Notice to Council Members of Intent to Consider

(7 days minimum): November 12, 2013

Date of Passage of Policy: November 25, 2013

[Signature]
Clerk

December 6, 2013
Date

Municipality of the District of Shelburne
Automatic External Defibrillator Event Summary
(To be completed by User)

User Name: _____

Victim was: ☼-Staff ☼-Resident ☼-Other

AED was activated by: ☼-Staff ☼-Resident ☼-Other

Name of Victim if known: _____ DOB: _____

Date & Time AED Activated: _____

Describe events in chronological order:

Information for this report was obtained from the following individuals/agencies:

Please attach all applicable documentation (incident reports, etc.) to this form.

Signature of User

Date