



REPORT TO CITY COUNCIL

DATE: OCTOBER 14, 2009

TO: HONORABLE MAYOR AND MEMBERS OF THE CITY COUNCIL

FROM: GREG RAMIREZ, CITY MANAGER 

BY: NATHAN HAMBURGER, ASSISTANT CITY MANAGER ^{hat}
CELESTE BIRD, ADMINISTRATIVE ANALYST 

SUBJECT: APPROVE RESOLUTION NO. 09-1554; AMENDING THE EMPLOYEE HANDBOOK TO INCLUDE AN AUTOMATIC EXTERNAL DEFIBRILLATOR (AED) POLICY

As part of the City's emergency operations plan, and using budgeted emergency services funds, the City purchased two Lifepak 1000 Automatic External Defibrillator (AED) units from Medtronic for a total cost of \$5,209.91. After comparing proposals from three different AED vendors, the City felt that Medtronic provided the best product in terms of overall price, long term replacement costs, service, training and customer support.

The two AED units will be located at City Hall and the Recreation Center, respectively. Only employees and volunteers who have been trained and certified through the American Red Cross in CPR and AED will be able to use the AED units. A roster of all certified users will be kept with each AED unit. Both units are portable and can be used by certified employees and/or CERT volunteers at offsite locations within the City during such events as Concerts in the Park and Reyes Adobe Days.

Before the AED units can be activated, a formal AED Policy should be adopted and approved by City Council, at the recommendation of the California Joint Powers Insurance Authority (CJPIA). The AED policy before you includes the following: information regarding medical oversight and authorization, training standards, proper maintenance and supplies, identification of authorized individuals, proper use of the AED, notification requirements, incident review requirements and record keeping.

The City Attorney has reviewed the attached resolution and policy and approved them as to form.

RECOMMENDATION

Staff recommends the City Council approve Resolution No. 09-1554; amending the Employee Handbook to include an Automatic External Defibrillator (AED) Policy.

Attachments: Resolution No. 09-1554
AED Policy

RESOLUTION NO. 09-1554

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF AGOURA HILLS, CALIFORNIA, TO ADOPT AND APPROVE AN AUTOMATIC EXTERNAL DEFIBRILLATOR (AED) POLICY AND AMENDING THE EMPLOYEE HANDBOOK TO INCLUDE THAT POLICY

WHEREAS, the City has purchased two Lifepak 1000 Automatic External Defibrillator (AED) units to be used by employees and/or volunteers certified in CPR and AED training; and

WHEREAS, one AED unit will be located at City Hall and the second unit will be located at the Recreation Center. Both units are portable and can be used by certified employees and/or volunteers at offsite locations within the City during such events as Concerts in the Park and Reyes Adobe Days; and

WHEREAS, a complete roster of all certified employees and volunteers will be kept with each AED unit; and

WHEREAS, prior to activation of AED units, the attached AED policy must be adopted and approved by City Council; and

WHEREAS, the AED Policy includes: information regarding medical oversight and authorization, training standards, proper maintenance and supplies, identification of authorized individuals, proper use of the AED, notification requirements, incident review requirements and record keeping.

NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF AGOURA HILLS DOES HEREBY RESOLVE AND ORDER AS FOLLOWS:

Section 1. The AED Policy, a copy of which is attached and incorporated into this resolution by reference, is approved and adopted.

Section 2. The AED Policy is included as part of the Amended Employee Handbook.

Section 3. The AED Policy shall also apply to other authorized individuals, as defined in the policy, who are not otherwise covered by the Amended Employee Handbook, such as certified volunteers.

Section 4. The effective date of the resolution is October 15, 2009.

PASSED, APPROVED and ADOPTED this 14th day of October, 2009, by the following vote to wit:

AYES: (0)
NOES: (0)
ABSENT: (0)
ABSTAIN: (0)

Denis Weber, Mayor

ATTEST:

Kimberly M. Rodrigues, City Clerk



AUTOMATIC EXTERNAL DEFIBRILLATOR PROGRAM

I. POLICY

This program establishes the training, medical oversight, and regulatory standards for the use of an automatic external defibrillator, AED, by non-licensed or non-certified personnel.

II. ASSIGNED RESPONSIBILITY

The Assistant City Manager or designee is responsible for administering the program in accordance with the provisions of this program.

III. APPLICABILITY

This program applies to all appropriately trained employees that have received written validation from the prescribing Medical Director to use the AED.

IV. DEFINITIONS

- A. Authorized Individual: means any person, not otherwise licensed or certified to use an AED, who has met the training standards set forth by this policy and Section 1797.196 of the Health and Safety Code, and who has been issued a written validation from the prescribing Medical Director for the use of an AED on a patient not specifically identified at the time the Medical Director's prescription is given.
- B. Automatic/Automated External Defibrillator: or AED, means an external defibrillator capable of analyzing and delivering a shock to a patient when it determines the patient's heart is in ventricular fibrillation or ventricular tachycardia.
- C. Cardiopulmonary Resuscitation: or CPR, means a basic emergency procedure for life support, consisting of artificial respiration and manual external cardiac massage in compliance with the standards of the American Heart Association or American Red Cross and the regulations adopted by the local Emergency Medical Services (EMS) Authority.
- D. Internal Emergency Response System: is a plan of action for the use of the AED and for responders to activate the 9-1-1 emergency system to provide access, coordination and management of advanced cardiac life support for the seriously ill or injured patient(s).

- E. Prescribing Medical Director: means a California licensed physician/surgeon who issues a written prescription/authorization for the use of the AED by authorized individual(s) and who assists in the development, implementation, and maintenance of the medical control of the AED program.

V. REGULATORY OVERSIGHT

The U.S. Food and Drug Administration oversees the manufacture of AEDs because they are medical devices. To comply with federal standards, the AED label must describe the indications and conditions for the AED use.

VI. MEDICAL OVERSIGHT

A. Medical Control

Before prescribing and authorizing the use of an AED, the prescribing Medical Director shall approve appropriate policies and procedures for the use of an AED that shall include:

1. A description of the use of the AED, including, but not limited to, written medical protocols, identification of authorized personnel, standing orders, notification of use and a method to review incidents;
2. Provisions to comply with federal, state, and the Los Angeles County Emergency Medical Services (EMS) policies and procedures;
3. A program for training and testing personnel in the use of the AED that complies with regulations adopted by the EMS Authority and the standards of the American Heart Association or the American Red Cross;
4. A program to ensure the continued competency of authorized individuals, including periodic training and quarterly skill proficiency demonstrations, monitored by either the prescribing Medical Director or designee;
5. Procedures for the review of each AED application and the recording of such; and,
6. Conditions for the rescission or termination of authority for the use of an AED.

B. Testing

In order for an individual to obtain authorization to use an AED, the individual shall pass both written and skill examinations, as approved by the prescribing Medical Director. The examinations shall test the ability of the individual to access and manage the conditions as specified in this program.

C. Written Validation

The prescribing Medical Director or designee shall issue a written validation or other documented proof of the individual's authorization to use an AED.

VII. MEDICAL AUTHORIZATION

Any physician and/or surgeon licensed to practice medicine in the State of California may authorize an individual to apply and operate an AED once that individual has been successfully trained according to the standards required by this program.

VIII. TRAINING STANDARDS

Training shall include continuing education, quarterly demonstration of skills proficiency, regular updates on new methods/skills, and current knowledge of pertinent issues regarding the use of AED. Training shall consist of not less than four (4) hours and shall include the following topics and skills:

- A. Proper use, maintenance and inspection of the AED.
- B. The importance of:
 - 1. CPR
 - 2. Defibrillation
 - 3. Advanced life support
 - 4. Internal emergency response system
- C. Overview of the local EMS system, including 9-1-1 access and interaction with EMS personnel.
- D. Assessment of an unconscious patient to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED.
- E. Defibrillator safety precautions that will enable the authorized individual to administer shock without jeopardizing the safety of the patient, him/herself or other nearby persons.
- F. Recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged.
- G. Rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary.
- H. Authorized individual's responsibility of continuation of care, such as repeated shocks if necessary and/or administering CPR/First Aid until the arrival of more medically qualified personnel.

IX. AED MAINTENANCE AND SUPPLIES

- A. The AED shall be maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, the American Heart Association or the American Red Cross, and any applicable rules and regulations

set forth by the governmental authority under the Federal Food and Drug Administration or other applicable state and federal authority.

- B. The AED is to be checked for readiness after each use and at least once every 30 days. Records of the periodic checks shall be maintained.
- C. A supply kit shall be maintained at the facility and be readily available for use with the AED. The kit shall contain at least the following:
 - 1. Safety razor for shaving chest hair when necessary to apply the pads
 - 2. Cardiovascular pulmonary resuscitation barrier (face shield or mask) for protection from transmission of infectious disease
 - 3. Two pairs of unused medical examination gloves
 - 4. Scissors
 - 5. Antiseptic wipe

X. PLACEMENT OF AED

The AED is to be located within City buildings where they can be accessed by trained staff. During large City functions outside of City buildings, or during a disaster, the AED may be strategically placed in a location by the Assistant City Manager or designee. When the AED is removed from a City building, a sign should be posted that provides the current location of the AED.

XI. IDENTIFICATION OF AUTHORIZED INDIVIDUALS

- A. As mandated previously in this program, the prescribing Medical Director or designee shall issue to the authorized individual a written validation or other documented proof of the authorized individual's ability to use an AED once the individual passes written and skill examinations.
- B. Identification cards will be prepared by the American Red Cross or issued by the Medical Director or designee once the individual has successfully passed both the written and skills examinations.

XII. INTERNAL EMERGENCY RESPONSE SYSTEM

- A. In the event of a serious medical emergency, the following steps should be followed by authorized individuals:
 - 1. Assess the situation and try to confirm the scene is safe prior to proceeding with assistance.

2. Activate the 9-1-1 system to call for EMS. Provide the nature, location, number of people involved and what actions are currently being taken to manage the incident.
3. Designate someone to promptly direct the resources that arrive at the scene.
4. Those administering medical aid shall take necessary bloodborne pathogens isolation precautions (gloves, goggles, masks, etc.).
5. Determine the most appropriate course of action for providing the best care to the individual(s) involved.
6. Assess whether the AED is needed.
7. If the AED is not needed, continue to give proper care until medical professionals arrive.
8. If the AED is needed, direct someone to retrieve it from its current location.
9. If the AED is delayed in the arrival and patient is pulse less/non-breathing, initiate basic CPR.
10. Use the AED in accordance with appropriate training methods.
11. Transfer care to medical professionals upon arrival at scene.
12. Document all actions taken.
13. Report use of the AED to AED Program Coordinator, who will in turn notify the local EMS authority and the prescribing Medical Director.

XIII. FAILURE OF THE AED

In the unlikely event that the AED does not operate properly, authorized individuals shall continue with basic life support measures, including CPR, until a more highly trained medical authority arrives on scene.

XIV. USE OF THE AED

- A. Prior to using the AED, and in accordance with American Heart Association or American Red Cross training, the authorized individual should confirm:
 1. The patient is unconscious, absent of respirations, and has no pulse.
 2. The patient's condition is not a result of trauma.

3. The patient is not hypothermic.
4. The patient is 8 years of age or older.
5. The patient's body weight is over 55 pounds.

XV. USE OF THE AED WITH OTHER MEDICAL PROFESSIONALS

- A. When on the scene of a medical emergency involving a sudden cardiac arrest with other medical professionals, authorized individuals are to use the AED in the manner they were trained, so long as it does not interfere with the actions of other public safety personnel (firefighters and paramedics) and other medical professionals (nurses, physicians and surgeons).
- B. Should more highly trained medical professionals arrive on scene after authorized individuals have used or are currently using the AED, the individual should communicate with these professionals and ask for their direction regarding continued use of the AED.

XVI. NOTIFICATION AND PLACING THE AED BACK IN SERVICE

- A. Once the AED Program Coordinator is notified that the AED has been used in an actual incident, the AED Program Coordinator shall contact the following as soon as possible, but no later than the next business day:
 1. Prescribing Medical Director
 2. Local EMS Authority
 3. City Manager or Assistant City Manager
 4. Any other contacts deemed necessary
- B. Appendix A details a list of steps that must be followed after an AED has been used but before placing the AED back in service.

XVII. REVIEW OF INCIDENTS

- A. Internal Post Event Documentation: It is important to document each use of the AED. As such, an accident form shall be completed by the responding authorized individual each time the AED is used. These forms will be available from the AED Program Coordinator.
- B. External Post Event Documentation: After notification of the use of the AED, the prescribing Medical Director and other appropriate personnel shall review the incident for the purpose of medical control. This will be accomplished by

transferring the data stored on the AED to a computer where the time, number of shocks delivered, and heart rhythm pre/post shock may be analyzed.

XVIII. RECORD KEEPING

The AED Program Coordinator shall maintain the following records:

- A. A copy of the Medical Director's prescription/authorization for the AED.
- B. Training documentation from an American Heart Association or American Red Cross-recognized AED training class.
- C. Log of maintenance checks of the AED, including the dates checked and the name of the person that performed the review.
- D. A current roster of all personnel who are authorized individuals.
 - 1. A copy of a valid AED operator's certificate for any employee authorized to operate the AED.
 - 2. A log of quarterly proficiency demonstrations for each holder of an AED operator's certificate. The log shall contain the dates of the demonstrations as well as the manner of demonstration.

XIX. REFERENCES

- A. Health and Safety Code Division 2.5, Chapter 3, 1797.196.
- B. California Civil Code, Section 1714.21.

Appendix A

Placing an AED Back in Service After Use

The following steps shall be followed when placing the AED back in service after use (*NOTE: Consult with the AED manufacturer to ensure these are the steps recommended for your agency's AED*):

- Replace battery in the AED (After 4-5 uses or 5 years if unused)
- Perform complete battery insertion test (BIT)
- Request a new battery from the manufacturer or licensed equipment supplier
- Mark used battery "training only" and send to (insert job title)
- Note use and battery insertion test (BIT) date on maintenance log
- Replace electrode pads (replacement pads should be obtained from the manufacture or licensed equipment supplier) Replace after each use.
- Request new AED data card from manufacturer or licensed equipment supplier

Place this checklist with maintenance records.

