

Students

First Aid/Emergency Medical Care

Explorations Charter School strives to provide a safe environment for students, staff, parents and community at all times while in the Explorations Charter School.

To assist individuals who may experience cardiac arrest on school property, Explorations Charter School's Governing Council has acquired an external defibrillator for use in certain emergency situations. The AED and trained personnel shall be available during (1) the school's normal operational hours, (2) school-sponsored events on school grounds, and (3) school-sponsored events not taking place during normal school hours (on school grounds). It is the policy of the Council to support the use of this automatic external defibrillator on school property by individuals specifically trained in the application of the device and in cardiopulmonary resuscitation. Such training shall be in accordance with the standards set forth by the American Red Cross, the American Heart Association or another nationally recognized certification provider. Only individuals who have completed the required initial training and recurrent training as specified by state law and regulations and as advised by the school's Medical Advisor will administer the device. The school shall have school staff trained in the use of AEDs and in cardiopulmonary resuscitation (CPR).

The AED will be stored in a cabinet on the wall in the corridor outside of the Health Office. The AED shall be maintained and tested in accordance with the operational guidelines of the manufacturer and/or state regulations and monitored by the school nurse.

Students/staff who inappropriately access and/or use the AED will be deemed to have violated the school and/or Council policy on AED use and will be subject to disciplinary action.

In cases of emergency, the AED will be available and accessible to community members and groups using the facilities outside of school hours. All community users are responsible for providing a trained and certified person as their designee.

The Principal or his/her designee shall be responsible for developing and updating administrative regulations in furtherance of the AED policy, in conformity with the provisions of applicable statutes and regulations.

Acquiring an AED requires a physician's prescription; the procedures to be followed when using an AED constitutes a physician's order and must be written and/or approved by the School's Medical Advisor.

The Council recognizes that in accordance with applicable legislation (PA 09-94) it does not have to comply with these provisions if state, federal or private funding is not available to it for AED purchasing and for school personnel training.

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First Aid/Emergency Medical Care

Emergency Action Response Plans

Explorations Charter School shall develop an emergency action response plan addressing the appropriate use of school personnel to respond to incidents involving an individual (student, staff, client, visitor) experiencing sudden cardiac arrest or a similar life-threatening emergency while on school grounds. The response plan must also include a plan for AED emergency action when the school nurse is not in the building or readily available.

Legal Reference: Connecticut General Statutes

10-221 Boards of Education to prescribe rules.

52-557b “Good Samaritan Law.” Immunity from liability for emergency medical assistance, first aid or medication by injection. School personnel not required to administer or render (as amended by P.A. 09-59).

P.A. 09-59 An Act Concerning Automatic External Defibrillators.

P.A. 09-94 An Act Concerning the Availability of Automatic External Defibrillators in Schools.

Public Law 106-505 Cardiac Arrest Survival Act.

Public Law 105-170 Aviator Medical Assistance Act.

Public Law 107-188 The Public Health Security and Bioterrorism Response Act.

Policy Adopted: August 26, 2013

Policy Reaffirmed: June 24, 2025

EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut

Students

First Aid/Emergency Medical Care – Regulation

Automatic External Defibrillators (AEDs)

I. Definitions:

Automatic External Defibrillator (AED) – a device that: (1) is used to administer an electric shock through the chest wall to the heart; (2) contains internal decision-making electronics, microcomputers or special software that allows it to interpret physiologic signals, make medical diagnosis, and, if necessary, apply therapy, (3) guides the user through the process of using the device by audible or visual prompts; and (4) does not require the user to employ any discretion or judgment in its use.

Sudden Cardiac Arrest (SCA) – a condition that occurs when the electrical impulses of the human heart malfunction causing a disturbance in the heart's electrical rhythm called ventricular fibrillation (VF). This erratic and ineffective electrical heart rhythm causes complete cessation of the heart's normal function of pumping blood resulting in sudden death. The most effective treatment of this condition is the administration of an electrical current to the heart by a defibrillator, delivered within a short time at the onset of VF.

Predetermined AED Provider – that person who is CPR and AED certified and has a copy of his/her certification on record with Explorations School. School personnel who have fulfilled the training requirements of this policy providing emergency first aid involving the use of an AED, shall be immune from liability if they meet the statutory requirements for immunity, which include a course in first aid, CPR and training in the use of AEDs provided in accordance with the standards of the American Red Cross or the American Heart Association.

II. AED Equipment and Location

1. Any AED device installed in Explorations Charter School must meet the definition outlined above (Section 1.)
2. The AED will be strategically placed and readily accessible to predetermined AED providers to maximize rapid utilization.
3. Contracted and other community activities utilizing school facilities are not guaranteed access to the AED as part of standard rental contracts.
4. The school's AED will be registered with the Town's Emergency Medical Service Provider and with the Connecticut Office of Emergency Medical Services. A report will be forwarded to the local EMS provider and the school's Medical Advisor for medical review each time the AED is activated.
5. Location of the AED:
The unit will be mounted in a cabinet outside of the Health Office.

Students**First Aid/Emergency Medical Care****Automatic External Defibrillators (AEDs) (continued)****III. Required Training for Predetermined AED Providers**

1. Explorations Charter School will provide on-site training to appropriate and interested staff members. American Red Cross or American Heart Association instructors certified in CPR First Aid/AED will do the training. Initial and annual or semi-annual refresher training (determined by certifying agency) is required by the Connecticut Department of Health.
2. On an annual basis, a Predetermined AED Provider shall certify in writing that he/she has read Explorations Charter School AED policy and administrative regulations, and provide such certification and a copy of current CPR and AED training completion documentation to the School Nurse (Appendix C).

IV. Medical Control

Explorations Charter School's Medical Advisor is the medical advisor of the AED program. He/She has ongoing responsibility for:

1. Providing medical direction for use of the AED.
2. Approving a prescription for use of the AED.
3. Reviewing and approving guidelines for emergency procedures related to the use of the AED.
4. Providing assistance in arranging for required training/retraining.
5. Evaluating post-event review forms and digital files downloaded from the AED.
6. Completing a report and forwarding it to the local EMS provider each time the AED is activated.

V. Predetermined AED Provider Responsibilities

1. Activating internal emergency response system and providing prompt basic life support including AED and first aid according to training and experience.
2. Understanding and complying with requirements of this policy and regulation.
3. Following the more detailed procedures and guidelines of the AED program.

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Automatic External Defibrillators (AEDs) (continued)

4. Accepting accountability and responsibility for the retrieval, use, and return of the AED when it is used.

VI. School Nurse Responsibilities

1. Receiving emergency medical calls from internal locations.
2. Determining the appropriate level of response.
3. Contacting the 911 response team (EMS) if required (Note: The state's 911 system must be contacted each time an AED is used.)
4. Deploying appropriately trained employees to the emergency location.
5. Assigning someone to meet the EMS aid vehicle and directing EMS personnel to the site of the emergency.

VII. Use of AED Follow-up

1. AED data will be downloaded within 24 hours with copies sent to EMS, school nurse and Explorations Medical Advisor.
2. After use:
 - a. AED is to be wiped clean by the school nurse.
 - b. Electrodes are to be replaced and reconnected to the device.
 - c. Contents of attached resuscitation kit are to be replaced as necessary.
 - d. The school nurse will complete and file an incident report.

VIII. Emergency Action Response Plans

1. Explorations Charter School shall develop an emergency action response plan.
2. Whenever Explorations Charter School is used for school-sponsored or school approved curricular or extracurricular activities, the Principal or designee responsible for such school activity shall ensure that AED equipment is provided on site and that there is present during such event or activity, at least one staff person who is trained in accordance with applicable Connecticut statutes in the use of an AED. School-sponsored or school-approved curricular or extracurricular events or activities mean events or activities of the School that are, respectively, associated with its instructional curriculum or otherwise offered to its students.

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First Aid/Emergency Medical Care

Automatic External Defibrillators (AEDs) (continued)

Maintenance, Testing and Record Keeping

IX. Maintenance, Testing and Record Keeping

1. The school nurse will check the defibrillator on a regular basis, as least daily when school is in session. It will be the nurse's responsibility to verify that the unit is in the proper location, that it has all the appropriate equipment (battery, mask, case emergency pack) that it is ready for use, and that it has performed its self diagnostic evaluation. If the nurse notes any problems, or the AED's self diagnostic test has identified any problems, the nurse is to contact the building administrator immediately.
2. After performing and AED check, the nurse or his/her designee shall note on the AED service log (Appendix D) indicating that the unit has been inspected and that it was found to be "In-Service" or "Out-of-Service".
3. The school nurse shall be responsible for the following:
 - a. AED service checks during the school year.
 - b. Replacement of equipment and supplies for the AED.
 - c. Repair and service of the AED.
 - d. All record keeping for the equipment during the school year.
 - e. Training records of Predetermined AED Providers which include both CPR certification and AED certification.
 - f. Maintaining a list of predetermined and properly certified AED providers employed by Explorations Charter School.
 - g. Incident record keeping
 - h. Securing and maintaining copies of the certifications signed by Predetermined AED Providers regarding understanding of and agreement to comply with Explorations Charter School Board of Director's AED policies and procedures (Appendix C).
 - i. Providing/scheduling opportunities for CPR and AED training and recertification for school staff.
 - j. Reporting the need for revising the policy and administrative regulations to the Principal.
 - k. Assisting Predetermined AED Providers in other appropriate ways as determined by the administration.
 - l. Registering the AED in accordance with state law.

STUDENTS**First Aid/Emergency Medical Care****Automatic External Defibrillators (AEDs) (continued)**

Legal Reference: Connecticut General Statutes

10-221 Boards of Education to Prescribe Rules

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Regulation Approved: August 26, 2013
Regulation Reaffirmed: June 24, 2025

EXPLORATIONS CHARTER SCHOOL
 Winsted, Connecticut

Appendix A

**EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut**

AUTOMATIC EXTERNAL DEFIBRILLATOR LOG

A Predetermined AED Provider who is CPR and AED certified and has a copy of his/her certification on record with Explorations Charter School can retrieve, use and return this AED. Please complete the necessary information below:

Retrieved (Date & Time)	In- Service	*Out-of Service	Returned (Date & Time)	In- Service	*Out- Of- Service	AED Provider Signature

***If out-of-service, immediately notify the School Nurse and Principal.**

**EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut**

AUTOMATIC EXTERNAL DEFIBRILLATOR EVENT SUMMARY

This summary should be complete with input from all rescuers whenever possible

Date of Event: _____ Time of Event: _____

Location of Event: _____

Time of arrival at patient's side with AED: _____

Patient's Name: _____

Sex: M F Age: _____

Name of AED Rescuer: _____

911 Caller: _____

CPR Rescuer: _____

Bystanders: _____

Transporting Ambulance Service: _____

Describe the Incident:

Patient's condition at time of transport by EMS: _____

Time Patient Transported: _____ Number of Shocks Delivered: _____

Your Signature: _____ Date: _____

Please forward to School Nurse within 48 hours after the incident

Appendix C

**EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut****CERTIFICATION OF COMPLIANCE WITH AED POLICIES AND PROCEDURES**

I, _____, have read Explorations Charter School's Automatic External Defibrillation Program and Administrative Regulations. I am aware of its contents and I am comfortable with the procedures. I have had an opportunity to ask questions regarding the program and have had my questions answered. If at any time I have a concern or a question while functioning as an AED provider using the AED available in Explorations Charter School, I will ask the School Nurse or his/her designee for clarification. I agree to follow the terms and conditions set forth in the policy and administrative regulations.

AED Provider's Signature: _____ Date: _____

School Nurse's Signature: _____ Date: _____

AUTOMATIC EXTERNAL DEFIBRILLATOR SERVICE LOG

The School Nurse will inspect the AED regularly. If the AED is out-of-service or does not have the appropriate equipment, the School Nurse or the Principal is to be notified immediately.

Appendix E

**EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut****AED AGENCY NOTIFICATION****To: Office of Emergency Medical Services****From: Explorations Charter School**

We would like to notify you and your department that Explorations Charter School, located in Winsted, Connecticut, now has an automatic defibrillator housed within the school building. Our Medical Director for the AED program is Dr. Jason Perkel. He works directly with the school regarding the implementation and management of the AED program. The Automatic External Defibrillator is strategically placed within the school building and readily accessible to predetermined AED providers to maximize rapid utilization. The AED is available during school hours and after school hours during on site school activities. The School Nurse has received training in the use of the AED. A list of Predetermined AED Providers is available in the School Nurse's office. The Predetermined AED Providers have been certified in CPR and AED by the American Heart Association or the American Red Cross and have completion cards on file with the School Nurse. All Predetermined AED Providers have also received and read Explorations Charter School's policy and administrative regulations and have certified in writing their agreement to comply with same.

Thank you for your support and cooperation in helping us to meet today's healthcare challenges.

Sincerely,

Principal

School Nurse

Appendix F

**EXPLORATIONS CHARTER SCHOOL
Winsted, Connecticut**

DISTRICT MEDICAL ADVISOR'S SIGNATORY PAGE

I have read and give my approval to the Automatic External Defibrillator Policy for Explorations Charter School.

Signed: _____ Date: _____