

LANARK COUNTY

PUBLIC ACCESS DEFIBRILLATOR PROGRAM



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1.0 Purpose

To establish procedures and guidelines for the implementation of a Public Access Defibrillator (PAD) Program that will enhance response to Sudden Cardiac Arrest (SCA) casualty's within the County of Lanark by the use of an Automatic Electric Defibrillator (AED).

2.0 Scope

A Public Access Defibrillator (PAD) Program in Lanark County will provide access to an enhanced level of medical care. This procedure applies to staff in designated Public Access Defibrillator protected facilities in Lanark County. Assistance to private organizations that possess an AED will be offered by the program. It is recommended that all AED's located in Lanark County be registered with this program.

An automated external defibrillator (AED) is a device containing sophisticated electronics used to identify cardiac rhythms and deliver a shock to correct abnormal electrical activity in the heart. An AED will only advise the individual using the device to deliver a shock if the heart is in a rhythm which can be corrected by defibrillation.

The responsibilities of the partners and regular monitoring of the activities, associated with those responsibilities, will ensure the availability of the enhanced level of care in the identified public buildings.

The Heart and Stroke Foundation of Canada (HSFC) recommends that:

Canadians have widespread access to automated external defibrillators;

The public be trained and encouraged to apply cardiopulmonary resuscitation (CPR) (with an emphasis on chest compressions for lay rescuer trained persons) and AED skills when needed;

The responders be authorized, trained, equipped and directed to operate an AED if their responsibilities require them to respond to persons in cardiac arrest;

The AED programs are part of any comprehensive emergency response plans that are linked with the emergency medical services system.

HSFC encourages widespread access to AEDs in Canada. HSFC recommends that early defibrillation programs operate within systems which:

Integrate basic life support and/or advanced cardiac life support training with AED training, as appropriate;

Integrate the provision of AEDs within the health care system and establish linkages with the EMS system;

Consider the response time of the local EMS system when acquiring and placing AEDs in a community and/or workplace;

Place the program within the medical oversight of a physician and ensure immunity of the overseeing physician and responders from liability;

Comply with accepted guidelines for training and retraining;

Enhance public awareness of the role of early defibrillation in cardiac arrest; and

Receive training from an accepted and recognized training agency.

3.0 Authorization

Lanark County Council has the authority for the implementation and delivery of the PAD Program with the assistance of all partners.

4.0 Responsibilities

On an annual basis the Lanark County Emergency Services Coordinator and the Lanark County Paramedic Service (LCPS) PAD Coordinator will assess the effectiveness of the PAD program. If required they will provide suggestions for improvement to the program.

4.1 Lanark County Emergency Services Co-coordinator will:

Act as the administrative representative for the PAD program

Respond to all inquiries by the public, staff agencies or partner agencies regarding the program;

Liaison with the Ontario Heart & Stroke Foundation, ACT Foundation and other organizations to obtain funding for the placement of AED;

Liaison with individuals or organizations on obtaining a PAD or to advise on the funding options available (public building funding or private buildings);

Support CPR Mass Training events, to support outreach & education in CPR and AED use in training awareness events;

Review the Public Access Defibrillator Policy annually.

4.2 Lanark County Paramedic Service (LCPS) PAD Coordinator will:

Act as the operational representative for the PAD program;

Be certified as a Primary Care Paramedic with a level C CPR instructor's certificate;

Be familiar with the operation of all types of AED's;

Respond to inquiries by the public, staff agencies or partners about the Public Access Defibrillator Program;

Coordinate public information sessions on the Public Access Defibrillator Program and the use of Automated External;

Conduct and identify possible site locations for the Automated External Defibrillators (AED) if requested by the location user;

Develop and maintain an inventory of AED, including manufacturer make and model numbers, the site address of the defibrillator and contact information for that location;

Establish a formal monthly check list/system for inspection of each defibrillator (registered with the program) i.e. battery and/or pads, to be administered by the site personnel;

Monitor the expiry date of the battery and/or pads at the locations and prior to the expiry date of the battery and/or pads make contact to determine status of replacement of battery and/or pads (**replacement of batteries/pads/other equipment is the responsibility of the PAD site**);

Develop, maintain and coordinate a training program for AED's Providers and Automated External Defibrillator Instructors;

Coordinate public training of Cardiopulmonary Resuscitation and Automated External Defibrillator Courses when requested;

Provide AED and or CPR training to site personnel during the initial placement of the AED (when requested) and provide future update training if requested by the site user;

Maintain records of training and certification of training in the use of Automated External Defibrillators;

Review any incident in which an Automated External Defibrillator is involved (this includes emergency re-supply of AED pads);

Perform a site inspection of each unit annually and maintain an inspection log;

Will provide the Emergency Services Coordinator with a report of activities under the program;

Review the Public Access Defibrillator Policy annually.

4.3 Automated External Defibrillator Instructors will:

Be required to hold a valid Level C Cardiopulmonary Resuscitation certificate;

Participate in required training and undergo monitoring of classroom instruction every two years;

Within their physical capabilities and without compromising their personal security or the lives of other employees or public, respond to an emergency;

Complete and submit required documentation of completed courses to the LCPS PAD Coordinator within three (3) business days;

Order supplies and equipment from the LCPS PAD Coordinator for courses to be conducted at least twenty one (21) days in advance;

Maintain all equipment ordered and report any deficiencies immediately to the LCPS PAD Coordinator.

4.4 Automated External Defibrillator Site Providers will:

Designate a site coordinator who will be responsible for documenting the completion of a monthly inspection (battery/pads) and of the AED and who will be responsible for notifying the LCPS PAD Coordinator of any issues found;

Participate in required training;

Within their physical capabilities and without compromising their personal security or the lives of other employees or public, respond to an emergency;

Follow operational requirement of the Automated External Defibrillator as trained;

Report the use of, any damage to or any other problems with the Automated External Defibrillator or equipment to the LCPS PAD Coordinator.

5.0 Training Standards

5.1 Initial Certification

The initial certification on the use of Automated External Defibrillators will be conducted by an approved AED-CPR Instructor (usually provided by the AED Vendor) and will include CPR training if site personnel have not already been certified in CPR-AED use.

5.2 Re-certification

If requested by the site coordinator, recertification on the use of the Automated External Defibrillator may be conducted by the by the LCPS PAD Coordinator (or designate as approved by the LCPS) and will include CPR-AED recertification training if required.

6.0 Guidelines on the use of an Automatic External Defibrillator

6.1 Standing Orders for Use of an Automated External Defibrillator

During an emergency, the Automated External Defibrillator can be used in accordance with the **current** standards/directives as set out by the Heart and Stroke Foundation of Canada. For Lay rescuers the following will apply for the application of the electrode pads on a casualty:

- 1- Is Unresponsive;
- 2- Is 30 days of age or older.

6.2 Age and Size of Casualty:

The Automated External Defibrillator is for use on adults and children one month of age and older. If the Automated External Defibrillator is stocked with Pediatric Electrode Pads, the Automated External Defibrillator Provider will apply Pediatric Electrode Pads to the child. If Pediatric Electrode Pads are not available, the Automated External Defibrillator Provider will apply the Adult Electrode Pads on children as well as adults. Automated External Defibrillators are not to be used on patients less than 30 days of age.

6.3 Trauma Casualty:

Sudden Cardiac Arrest resulting from traumatic injuries (motor vehicle accidents, falls, crushing injuries, etc) will be treated as a medical cardiac arrest by lay

rescuers. CPR (as applicable to **current** Lay Rescuer standards) should be the normal practice in this situation until LCPS staff arrives on scene.

6.4 Pregnant Casualty:

Automated External Defibrillators may be used on a pregnant casualty of Sudden Cardiac Arrest.

6.5 Internal Pacemakers or Defibrillators:

Automated External Defibrillators may be used on a casualty with an implanted pacemakers or defibrillators. Ensure the electrodes are not placed directly over the implanted device.

6.6 Hypothermic Casualty:

Automated External Defibrillators may be used with a hypothermic casualty.

6.7 Oxygen Enriched Environments:

Automated External Defibrillators should not be used in Oxygen enriched environments. Remove the casualty from the area before using the Automated External Defibrillator.

6.8 Radio Interference:

Automated External Defibrillators can be affected by a radio transmitter operating in close proximity. Ensure radio transmitters are operated at least 1 meter from the Automated External Defibrillator.

6.9 Wet Conditions:

Automated External Defibrillators may be used on a casualty's with wet clothing or skin. The "best practice" is to ensure the skin is dry before placing the Electrode pads. If the casualty is lying in puddles of water, move the casualty to a dry location. Do not use the Automated External Defibrillator if the casualty is submersed in water. Do not delay excessively the application of the AED when trying to find a dry location for the cardiac arrest patient.

6.10 Metal Conditions: Automated External Defibrillators should not be used when the casualty is lying on a metal floor. Move the casualty to a non-conductive surface before using an Automated External Defibrillator.

6.11 Medicated Patches on the Skin:

Medicated patches found on the chest of the casualty should be removed prior to applying the electrodes. Medicated patches found on other areas of the body are not a concern unless it is a hazard for the rescuer. When removing medicated patches from the skin of the victim, the rescuer will use protective gloves and wipes the skin clean with a cleaning wipe.

6.12 Body Hair on Chest:

Excessive hair on the chest may obstruct the electrode pads from sticking to the skin of the casualty. A razor may be used to remove excessive hair from the chest of the casualty. Remove the hair from the area in which the electrodes would be placed. If no razor is present, apply and push firmly on the AED pad for a period of 30 seconds. If the pad will still not adhere properly and a voice prompt “check pads” is repeatedly received, tear off the pads and apply a new set.

6.13 Explosive Environments:

Automated External Defibrillators should not be used in explosive environments. Remove the casualty from the area before using the Automated External Defibrillator.

7.0 Special Consideration – DO NOT RESUSCITATE ORDERS

7.1 Do Not Resuscitate Orders (Written):

Casualties of Sudden Cardiac Arrest with a valid “Do Not Resuscitate” Order will have their wishes honored.

7.2 Do Not Resuscitate Orders (Verbal):

If, during a rescue of a casualty of Sudden Cardiac Arrest, the Automated External Defibrillator Provider is informed by a family member, friend, caregiver, etc that a Do Not Resuscitate order exists for the casualty, the PAD-AED Provider will explain the seriousness of the casualty’s condition and request the continued rescue of the casualty. If emergency care is refused, the Automated External Defibrillator Provider will not force the issue and honor the requester’s wish. This information should be passed on to the Medical Authority or Police Services when they arrive.

8.0 Public Access Defibrillator Equipment:

8.1 Monthly Inspections:

Automated External Defibrillators will be inspected visually by a representative of the facility on a monthly basis and they will report any problems to the site coordinator and the LCPS if necessary.

8.2 Wall Mounting of the AED:

Automated External Defibrillators installed in facilities will be positioned in an easily accessible wall mounted location, in an approved cabinet with an audible alarm system when the door is opened.

8.3 AED Minimum Equipment:

- 1 package of Adult electrodes;
- 1 pair of Protective gloves;
- 1 Cardiopulmonary Resuscitation face shield or barrier device;
- 1 pair of Scissor;
- 1 Razor;
- 1 Absorbent towel;
- 1 package of cleaning wipes.

8.4 Public building owners:

Owners of both public and private buildings will be encouraged to participate in the Lanark County Public Access Program.

Responsibilities as funding recipient:

Installation and maintenance of the AED unit;

Ensure the personnel on site are CPR / 1st Aid trained;

Provide training, by instructors HSFO certified, in the use of AEDs in compliance with HSFO approved guidelines be compliant with applicable legislation.

9.0 Procedures

9.1 Safety:

Before entering the immediate vicinity of the casualty, ensure there are no hazards to the rescuer, by-standers or the casualty. If hazards are present, remove the hazards if it is safe to do so. If not safe, do not enter the area and call 911 for professional assistance (Emergency Medical Services, Police Services, Fire Services, Gas Company, hydro company, etc).

10.0 Transfer of Care to LCPS Paramedics

Care of the patient will be transferred to the LCPS Paramedics at the appropriate time.

10.1 Transfer of Care to the LCPS Paramedics will occur during the following times:

During the performance of Cardiopulmonary Resuscitation; or

Following a “No Shock Advised” prompt for the Automated External Defibrillator;
or

As directed by the Paramedics on scene.

10.2 Provide the LCPS Paramedics with the following Information:

Time of collapse

Name of casualty, medical conditions, medications, allergies,

History, events leading to the casualty’s condition

Any treatment given including number of shocks administered,

When Cardiopulmonary Resuscitation was started, etc

10.3 Assisting the LCPS Paramedics by:

Removing the installed electrode pads (if required);

Assisting with Cardiopulmonary Resuscitation compressions as directed;

Assisting with moving the casualty as directed

11.0 Following the use of the AED –Reporting Requirements:

Following the use of an Automated External Defibrillator, the facility or agency responsible for the AED should contact the LCPS PAD Coordinator and provide him with the following information:

Facility location and phone number where event took place

Time and date the Automated External Defibrillator was used

Automated External Defibrillator Provider name and phone number

Serial number of AED used (if more than one on site)

12.0 Public Access Defibrillator Post Automated External Defibrillator Event Form:

The Automated External Defibrillator Provider should complete a “Public Access Defibrillator Post Automated External Defibrillator Event “form with as much information as possible and submit to the LCPS PAD Coordinator as soon as possible.

APPENDIX A – PAD PROGRAM QUESTIONS AND ANSWERS

What is public access to defibrillation?

Public access to defibrillation (PAD) means making Automated External Defibrillators (AEDs) available in public and/or private places where large numbers of people gather.

Why is PAD Essential to Our Community?

Every year in Canada about 30,000 citizens die from sudden cardiac arrest (SCA) before they reach a hospital. SCA strikes people of all ages and various degrees of fitness. It usually happens without warning. Many of these victims can be saved if citizens are prepared to quickly phone 911, begin CPR and provide defibrillation within three minutes of collapse. The goal of an organized PAD program is to better prepare the public to deal with SCA prior to the arrival of Emergency Medical Services (EMS). This is essential in improving the Chain of Survival within our community.

70% of all Sudden Cardiac Arrests are caused by an abnormal heart rhythm known as ventricular fibrillation (VF). In layman terms, VF causes the heart to quiver like a bowl of jelly and therefore prevents the heart from pumping blood. As a result, the victim suddenly collapses and becomes lifeless. The treatment

for VF is defibrillation. Defibrillation is the delivery of an electric shock to the heart that stops VF and allows a normal heart rhythm to resume. Providing early defibrillation drastically improves survival rates for VF cardiac arrest. In communities with an organized PAD program, survival rates from VF cardiac arrest have risen to 70%. Currently only about 5% of all SCA victims survive in places where no PAD programs have been established to provide prompt CPR and defibrillation by citizens.

What is an AED?

The automated external defibrillator (AED) is a computerized medical device that can check a person's heart rhythm. It can recognize a rhythm that requires a defibrillation shock and advise the rescuer to deliver the shock if needed. The AED uses voice prompts, lights and text messages to tell the rescuer the steps they need to take. AEDs are very accurate and easy to use. With a few hours of education, anyone can learn to operate an AED safely. There are many different brands of AEDs, but the same basic steps apply to all of them. We do not recommend a specific model.

What is the Heart and Stroke Foundation of Ontario (HSFO) position on placement of AEDs?

HSFO supports placing AEDs in targeted public areas such as sports arenas, gated communities, office complexes, doctor's offices, shopping malls, etc. When AEDs are placed in the community, a business or facility, the HSFO strongly encourages that they be part of a defibrillation program in which:

Persons responsible for using the AED are trained in CPR and how to use an AED

Persons that acquire an AED notify the Lanark County PAD program

A detailed quality assurance and improvement program is established and that the site is linked to an expert in PAD (i.e. local EMS, physician etc.)

Why is notifying the Lanark County PAD Program important?

It is important for the local EMS system to know where AEDs are located in the community. In the event of a sudden cardiac arrest emergency, the 9-1-1 dispatcher will know if an AED is on the premises and will be able to notify the EMS system as well as the responders already on the scene.

Why should a defibrillation expert be involved with purchasers of AEDs?

This is a quality control mechanism. The defibrillation expert will ensure that all designated responders are properly trained and that the AED is properly maintained. He or she also can help establishments develop an emergency response plan for the AED program.

Why should people who are responsible for operating an AED receive CPR training?

Early CPR is an integral part of providing lifesaving aid to people suffering sudden cardiac arrest. CPR helps to circulate oxygen-rich blood to the brain. After the AED is attached and delivers a shock, the typical AED will prompt the operator to continue CPR while the device continues to analyze the victim.

If AEDs are so easy to use, why do people need formal training in how to use them?

An AED operator must know how to recognize the signs of a sudden cardiac arrest, when to activate the EMS system, and how to perform CPR. It is also important for operators to receive formal training on the AED model they will use so that they become familiar with the device and are able to successfully operate it in an emergency. Training also teaches the operator how to avoid potentially hazardous situations.

Can anyone buy an AED?

Yes...but we recommend that you approach a reliable knowledgeable expert to assist you in your decision. In our community, local EMS can provide this service.

What steps should an organization take to buy an AED for its premises?

Any person or organization wanting to buy an AED should contact the Lanark County PAD Program representative for advice.

Can AEDs be used on children?

Children over the age of one month can be treated with a standard AED. While the HSFO recommends that pediatric attenuated electrodes be purchased for children 1-8 years or age, the use of adult AED pads on the child is permitted. For small children the rescuer may need to place one pad on the chest and one pad on the back.

Which AED model does the HSFO recommend?

The HSFO does not recommend a specific device. All AED models have similar features, but the slight differences allow them to meet a variety of needs. The HSFO encourages potential buyers to consider all models and make a

selection based on the buyer's particular needs. The local EMS system can help you with this decision.

How can I enroll in a CPR or AED class?

Persons interested can contact the Lanark County PAD program.

What kind of training on AEDs is available?

The HSFO has developed a Heart Saver AED Course that integrates CPR and AED training. The course is less than six hours long.

What is the Chain of Survival?

The Chain of Survival consists of the actions needed to treat a life-threatening emergency. The adult Chain of Survival has 5 vital links:

- 1 - Immediate Recognition of a cardiac arrest and activation of the emergency response system – call 911**
- 2 - Early CPR with an emphasis on chest compressions**
- 3 - Rapid Defibrillation**
- 4 - Effective advanced life support**
- 5 - Integrated post-cardiac arrest care**

APPENDIX B – DEFINITIONS

AED – Automated External Defibrillator:

A fully automated battery operated electronic device designed to deliver a lifesaving electric shock in an attempt to restore normal heart rhythm to a person who has suffered Sudden Cardiac Arrest.

Automated External Defibrillator Instructor:

Members of the Lanark County Paramedic Service, private contractors or members of the community who are authorized to conduct training in Basic Life Support skills and the safe use of an Automated External Defibrillator.

Automated External Defibrillator Provider:

Members of the Lanark County Paramedic Service, private contractors or member's of the community who are trained to provide Basic Life Support and the safe use of an Automated External Defibrillation an emergency setting.

Emergency and Use of an Automated External Defibrillator:

Use of an Automated External Defibrillator in an emergency situation is considered an act of first aid. Except from Policy #4-03 Delegation of Controlled Acts – The College of Physicians and Surgeons of Ontario, November 2004.

“Although the Regulated Health Professions Act prohibits performance of controlled acts by those not specifically authorized to perform them, it does not apply if the person performing the act is doing so to render first aid or temporary assistance in an emergency. For example, if a passer-by sees someone in cardiac arrest in an airport and uses an automated external defibrillator to assist him or her, there is no breach of the Regulated Health Professions Act. Although applying a form of energy prescribed in the regulations is a controlled act under the Regulated Health Professions Act, when it is done in an emergency it is not prohibited.”

Emergency Medical Services:

Lanark County Paramedic Service is responsible for the operational oversight of this program.

PAD Program – Public Access Defibrillator Program:

A program developed by the County of Lanark and the Lanark County Paramedic Service to assist in the obtaining and use of Automated External Defibrillators in Lanark County in order to increase survival rates from Sudden Cardiac Arrest.

LCPS- Lanark County Paramedic Service

The County Paramedic service

Lanark County Emergency Services Coordinator:

The Lanark County Emergency Services Coordinator is responsible for the administrative oversight of the PAD program and to liaise with partner agencies in order to secure AED's for locations in Lanark County.

Lanark County Paramedic Service PAD Coordinator:

The Lanark County Emergency Services PAD Coordinator is responsible for the operational oversight of the PAD program.

SCA - Sudden Cardiac Arrest:

A condition when the electrical impulses of the human heart malfunctions causing Ventricular Fibrillation (VF) or Pulseless Ventricular Tachycardia (VT).

911:The emergency telephone number which is used for accessing all of the emergency services within the geographical region of Lanark County.

APPENDIC C – PAD PROGRAM SITE GUIDELINES

It is essential that all Automated External Defibrillators (AEDs) within the Lanark County be registered with Emergency Medical Service (EMS) system.

All AED / PAD programs are expected to be managed following the Heart and Stroke Foundation of Canada Guidelines to ensure that comprehensive education is in place and followed.

APPENDIX D – HEART AND STROKE FOUNDATION OF CANADA

ONTARIO HEART & STROKE FOUNDATION

The Heart and Stroke Foundation of Canada (HSFC) is an international leader in developing the science behind CPR and Emergency Cardiac Care and is a leading funder of Heart and Stroke research in Canada. HSFC has been playing the leadership role in resuscitation in Canada since the inception. This leadership is embodied through HSFC's role in Guideline development, training, public awareness, advocacy, research and partnership development in support of a strong Chain of Survival™.

In Ontario, the Heart and Stroke Foundation has been responsible for overseeing, implementing and coordinating resuscitation training. In April 2006, HSFO became actively engaged in the placement of AEDs in public places throughout the province. The Restart a Heart, a Life Program and The Chase McEachern Tribute Fund was established and made possible with funding from the Ontario Government, private and community donors along with fundraising activities. The focus for AED unit placement as well as the associated training has been public/community based venues such as arenas, pools, community centres and schools.

The vision of the Heart and Stroke Foundation of Ontario is to ensure that communities are cardiac safe with enhanced survival following a cardiac arrest through improved bystander CPR and greater use of AEDs.

Heart & Stroke Foundation of Ontario will

Provide and support the PAD program;

Collect financial contributions for purchase & placement of AED in public settings;

Support CPR Mass Training events;

Provide a standard plaque at each location of AED by HSFO;

Provide outreach & education in CPR and AED use in training awareness events;

Work with PAD representative to raise awareness of PAD program;

Provide promotional or marketing material.

APPENDIX E – THE ACT FOUNDATION OF CANADA

The ACT Foundation is a national charitable organization with a mission to promote health and empower Canadians to save lives. Since its inception in 1985, the organization has concentrated its efforts on promoting citizen CPR training, early defibrillation programs and paramedic systems.

The ACT Foundation is spearheading an initiative to establish CPR training in all high schools so that all youth will graduate with the skills and knowledge to save lives. The program has a strong health promotion component and educates youth in the importance of adopting healthy lifestyle habits from a young age.

The ACT High School CPR Program is based upon the ACT Foundation's successful community-based model of partnerships and support. ACT first gains commitment from schools to a long-term, self-sustaining program. ACT then brings together multiple community partners to provide start-up resources for schools. These partners include corporations, foundations, service clubs and governments who support ACT's community coordination role and donate funds for mannequins, teacher training and materials.

ACT Foundation will:

Establish CPR training in all high schools so that all youth will graduate with the skills and knowledge to save lives;

Coordinate funds for AED, mannequins, teacher training and materials;

Provide support for the Lanark County PAD program;

Provide a standard plaque at each location of AED by ACT Foundation;

Provide outreach & education in CPR and AED use in training awareness events;

Work with Lanark County PAD representative to raise awareness of PAD program.

APPENDIX F – LIABILITY

LIABILITY

In 2007, following an effective advocacy effort, Bill 171 was passed, the Chase McEachern Act (Civil Heart Defibrillator Liability Act), effectively eliminating the liability for anyone using an AED.

The Partners will acknowledge and agree that Lanark County shall not be held liable for fulfilling its obligations hereunder and shall be indemnified and saved harmless by the Partners with respect to any claims, losses, expenses, damages or liabilities incurred by it, except to the extent that such claims, losses, expenses, damages or liabilities result from Lanark County own willful misconduct as well as the negligence, or illegal activities. The Partners will acknowledge that Lanark County has no responsibilities of any kind with respect to the service, maintenance, ownership, use, supervision, repair, or replacement for the AED unit with the completion of a Memorandum of Understanding

APPENDIX G- PAD POST EVENT AED USE FORM

General Information		
Incident Date:	Incident Time:	
Facility Name/Location:		
Location of Incident: <input type="checkbox"/> Office <input type="checkbox"/> Client/Sales Area <input type="checkbox"/> Washroom <input type="checkbox"/> Parking Lot <input type="checkbox"/> Vehicle <input type="checkbox"/> Outdoors Other: _____	First Arriving EMS Agency: <input type="checkbox"/> Paramedics <input type="checkbox"/> Fire Department <input type="checkbox"/> Police Department	Estimated Time for EMS Arrival: <input type="checkbox"/> Less than 5 Minutes <input type="checkbox"/> 5 to 10 Minutes <input type="checkbox"/> 10 to 15 Minutes <input type="checkbox"/> Greater than 15 Minutes
Casualty Information		
Name: <input type="checkbox"/> Not Known	Age (Years):	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: <input type="checkbox"/> Not Known		
Medical History: Heart Disease <input type="checkbox"/> Breathing Problems <input type="checkbox"/> Diabetes <input type="checkbox"/> Stroke <input type="checkbox"/> Seizure <input type="checkbox"/> <input type="checkbox"/> Not Known Other: _____		
Events Prior to Collapse		
Chest Pain <input type="checkbox"/> Difficulty Breathing <input type="checkbox"/> Nausea or Vomiting <input type="checkbox"/> Dizziness <input type="checkbox"/> Feeling Unwell <input type="checkbox"/> No Complaints <input type="checkbox"/> Unknown <input type="checkbox"/> Other: _____		
Collapse Information		
Collapse Witnessed <input type="checkbox"/> Unwitnessed <input type="checkbox"/> Unsure <input type="checkbox"/>	Estimated time before discovering victim (Minutes):	
Casualty Care Information		
No Shocks Delivered <input type="checkbox"/> Shocks Delivered <input type="checkbox"/> Number of Shocks Delivered before EMS arrival:	Estimated time CPR was performed prior to EMS arrival (Minutes):	
PAD Provider Information		
Additional notes regarding casualty care: _____ _____ _____		
Do you feel you were adequately prepared to handle this emergency based on your training program? Yes <input type="checkbox"/> No <input type="checkbox"/> Comments: _____ _____ _____		
PAD Provider Name:	Other Rescuer's Name: N/A <input type="checkbox"/>	
PAD Provider Signature:	Other Rescuer's Name: N/A <input type="checkbox"/>	

APPENDIX H- MEMORANDUM OF UNDERSTANDING

MEMORANDUM OF UNDERSTANDING

This MEMORANDUM OF UNDERSTANDING (hereinafter called the "Memorandum") is made in duplicate as of the day of , 20XX

Between

(Hereinafter called the "Recipient")

And

THE CORPORATION OF THE COUNTY OF LANARK

(Hereinafter called the "County")

WHEREAS the County of Lanark is an upper-tier municipality which has purchased Automated External Defibrillators (hereinafter called "AED") to place in public settings and communities within the County of Lanark;

AND WHEREAS the Recipient is a lower-tier municipality and/or public building owner located in the County of Lanark and the Recipient wishes to place AEDs at public sites within the lower-tier municipality;

NOW THEREFORE, in consideration of the mutual covenants and understandings herein contained, the Recipient and the County of Lanark agree as set out below:

RESPONSIBILITIES OF THE COUNTY OF LANARK

The County of Lanark shall be responsible:

To grant and transfer to the Recipient, ownership of one (1) AED unit(s); and

If requested by the Recipient, to provide training, for approximately, but not limited to, six trainees per AED unit, in AED operation and application for use by instructors appropriately certified in compliance with HSFO approved guidelines.

RESPONSIBILITIES OF THE RECIPIENT

The Recipient shall be responsible, at its own cost for:

Installation and maintenance of the AED unit;

Providing training, by instructors appropriately certified in the use of AEDs in compliance with HSFO approved guidelines;

Making available to County of Lanark information and access to data, including date of installation, date of training and number of persons to be trained;

The Recipient acknowledges that County of Lanark has no responsibilities of any kind with respect to the service, maintenance, ownership, use, supervision, repair, replacement or training for the AED unit granted pursuant to this Memorandum.

In the event that an AED is placed at a site which is later approved for an AED through additional grant funding, the Recipient agrees to accept the funded AED at the location.

LIABILITY

Neither party shall be liable for any indirect, consequential or other similar damages suffered or incurred by the other party in connection with this Memorandum including, but not limited to, loss of revenues or savings by the other party, or for any demands, claims, actions or proceedings against the other party by any other person that is not a party to this Memorandum.

Notwithstanding the foregoing sentence, each party (hereinafter called the "indemnifying party") shall indemnify, defend and hold harmless the other party (including its agents and representatives) from and against any and all direct damages including, but not limited to, demands, claims, actions, proceedings and charges of any kind arising from or in connection with either or both of: (a) the indemnifying party's breach of any provision of this Memorandum; and either of both of (b) the negligence, willful misconduct or illegal activities of the indemnifying party or its agents or representatives.

The Recipient agrees that the County of Lanark shall not be held liable for fulfilling its obligations hereunder and shall be indemnified and saved harmless by the Recipient with respect to any claims, losses, expenses, damages or

liabilities incurred by it, except to the extent that such claims, losses, expenses, damages or liabilities result from the County of Lanark own willful misconduct as well as the negligence, or illegal activities.

MISCELLANEOUS PROVISIONS

Nothing contained in this Memorandum shall place the parties or their employees or affiliates in the relationship of partners, principal-agent, or employer-employee and neither party shall have any right to obligate or bind the other in any manner whatsoever.

Neither party shall assign its rights or obligations under this Memorandum without the prior written consent of the other party, nor shall any assignment without consent be null and void.

All notices, requests, or other communications to be given by a party hereto shall be in writing (including facsimile or similar writing) and shall be given:

To the COUNTY OF LANARK at:

PO Box 37Sunset Blvd.,

99 Christie Lake Road,

PERTH ON

K7H 3E2

Attn: Kurt Greaves, CAO

To the Recipient at:

Or such other address as such party may hereafter specify by notice to the other party. Each such notice, request, or other communication shall be effective (i) if given by facsimile, when such facsimile is transmitted to the specified facsimile number and the appropriate answer back is received or (ii) if given by any other means, when delivered at the specified address.

Neither party shall be responsible for delays, failure, or omissions due to any cause beyond its reasonable control, wherever arising and not due to its own negligence and which cannot be overcome by the exercise of due diligence, including, but not limited to, riots, fires, earthquake, floods, storms, lightning, epidemics, war, disorders, hostilities, expropriation or confiscation of properties, interference by civil or military authorities or acts of God.

This Memorandum contains the entire agreement between the parties, superseding any and all prior verbal or written communications with respect to the terms hereof, and may only be altered, modified, or changed by a written document signed by the parties.

Each party represents and warrants to the other that it has full power to enter into and perform this Memorandum and to grant the rights herein granted, and that the person signing below on its behalf has been properly authorized and empowered by it to execute this Memorandum.

The Recipient and the County of Lanark have caused this Memorandum to be duly executed by the authorized representatives of the parties.

Recipient **THE CORPORATION OF THE COUNTY OF LANARK**

Name:

Title:

Name: Kurt Greaves

Title: CAO

Name:

Title:

We have authority to bind the corporation

Name:

Title: Warden

We have authority to bind the Corporation

APPENDIX I- MONTHLY DEFIBRILLATOR CHECK SHEET



PARAMEDIC SERVICE

613-257-7572

Monthly Defibrillator Inspection Check List

Defibrillator Type: XXXX

Unit Serial Number: xxxxxxxx

Location: XXXX

Action	Expected Results
Verify in Place	Unit in Cabinet
Check Readiness Indicator	Unit indicates OK
Check Use by Date on Electrode Packets	If date exceed contact supplier
Check Defibrillator for Damage Foreign Substances	

If Expected Result not as listed contact:

Rick Hannah
Emergency Services Coordinator
Lanark County
613-267-4200 ext. 1701

	Date	Signature		Date	Signature
January			January		
February			February		
March			March		
April			April		
May			May		
June			June		
July			July		
August			August		
September			September		
October			October		
November			November		
December			December		