Office/Contact: Office of Safety & Security

Source: SDCL 20-9-4.4 and 20-9-4.6

Link: <https://sdlegislature.gov/Statutes/Codified_Laws/2045656>

**SOUTH DAKOTA STATE UNIVERSITY**

**Policy and Procedure Manual**

SUBJECT: Automated External Defibrillator (AED) Policy

NUMBER: 10:5

1. Purpose

The purpose of this policy and its procedures is to establish the standards for the purchase, installation, testing, training, inspection, maintenance, and non-medical use of automated external defibrillators at the University. This policy and its procedures do not apply to medical response use of automated external defibrillators.

1. Definitions
   1. Automatic External Defibrillator (“AED”): A medical device that is designed to analyze sudden cardiac arrests and deliver an electronic shock to the heart if the computerized system deems it necessary.
   2. AED Owner: The department or division where an AED(s) is located will be considered the local owner of the device(s).
   3. AED Program: A coordinated system of purchase, installation, testing, training, inspection, maintenance, and non-medical use of AEDs at the University.
   4. Departmental AED Program: An AED Program that is approved by the Department of Environmental Health and Safety (“EHS”) to meet University AED Program requirements.
   5. Good Samaritan Law: SDCL 20-9-4.4. “Civil immunity for emergency use or nonuse of AED. Any person, who in good faith obtains, uses, attempts to use, or chooses not to use an AED in providing emergency care or treatment, is immune from civil liability for any injury as a result of such emergency care or treatment or as a result of an act or failure to act in providing or arranging such medical treatment.”
   6. Sudden Cardiac Arrest: A life-threatening event when a person’s heart stops or fails to produce a pulse.
2. Policy
   1. The Department of Environmental Health and Safety (“EHS”) is the primary responsible office for the University AED Program. AED Owners are responsible for maintaining an EHS approved Departmental AED Program.
   2. All purchase, installation, testing, training, inspection, maintenance, and non-medical use of University AEDs will performed in a standardized manner as coordinated through the AED Program.
   3. Individuals are not required to use or attempt to use and AED at the University. Those who choose to use an AED in a non-medical instance in an emergency do so on a voluntary basis and are not directed to do so by the University.
3. Procedures
   1. The Department requesting an AED is responsible for:
      1. Prior to purchasing or acquiring an AED:
         1. Developing a Departmental AED Program and obtaining approval by EHS under the University AED Program;
         2. Obtaining AED and AED location approval from EHS;
         3. Contacting Facilities and Services to determine AED installation costs;
         4. Providing the University Purchasing Office the AED purchase request and the required EHS and appropriate unit supervisory approvals prior to purchasing or acquiring an AED.
      2. The development of a Departmental AED Program that will comply with the University AED Program and will also include:
         1. Identification of Departmental staff responsible for the Departmental AED Program, including also
            1. The designation of at least one (1) individual trained on proper use of the AED(s) on site during normal business hours,
            2. A Department individual who regularly checks to ensure that the AED is intact and is working order with no parts missing or the door on the unit has not been opened or damaged;
         2. Retention of the AED instructions, manuals, and part diagrams;
         3. Departmental AED inspection, training, maintenance and certificate records, and requirements;
         4. Requesting, scheduling, coordinating, and recording all AED training provided by EHS;
         5. AED installation through Facilities and Services;
         6. AED supply kit;
         7. Regular inspection of the AED to ensure the AED is intact and operational with no parts missing and that the door on the unit has not been opened or damaged;
         8. Requirement to notify EHS of AED deficiencies, system abnormalities, or use of AED;
         9. Responsibility for all costs associated with the AED, including, but not limited to initial purchasing and installation, training, and purchasing and replacing batteries, pads or other materials as needed, including the cost of restoring the unit after use.
   2. EHS is responsible for the following AED support services:  
      1. Development of a University AED Program that includes
         1. University AED standards and requirements;
         2. Approval of Departmental AED Programs and AED acquisitions as well as their locations;
         3. Recording AED(s) information to include; AED make, model and serial number;
         4. Adding and updating the location(s) of the AED(s) to the UPD master list of AED locations on campus;
         5. Maintain AED training records;
         6. Monitor updates to statutes and regulations concerning AEDs and inform the University Departments of updated requirements;
         7. Act as a liaison for AED Owners, UPD, and others for maintenance and compliance;
         8. Labelling the AED(s) to facilitate documentation of AED checks;
         9. Inspecting the AED(s) at a minimum of every six (6) months or as recommended by the manufacturer, including battery testing and any other testing or system software upgrading as mandated by the manufacturer;
         10. Record noted deficiencies or system abnormalities that are reported to EHS for corrective action;
         11. Ensure that used AED(s) are restocked and tested as per manufacturer recommendations. All costs of restocking of the unit will be charged back to the AED Owner.
      2. Routinely reporting to the Emergency Management Team Chair the status of AEDs and the program at SDSU.
   3. Notification  
      1. When an individual in a Department uses an AED, the Department’s designated responsible individual shall notify EHS of use within twenty-four (24) hours.
      2. When used in an emergency, staff of the UPD will notify EHS that a devices has been used and requires maintenance. UPD will forward all reports of AED use to EHS and the South Dakota Office of Risk Management within twenty-four (24) hours of the incident.
   4. AED Removal  
      1. EHS will remove inoperable devices.
         1. EHS will request Facilities and Services remove AED(s) upon written request or notice from the Department the AED requires maintenance, or upon EHS determination that the AED requires maintenance.
         2. All cost associated with the removal of the AED(s) will be the responsibility of the Department that owns the AED(s).
   5. Construction and Renovation   
      1. In new construction and facility renovation the purchase and installation may be considered as part of the cost of the project.
      2. The proposed AED is subject to all the requirements of this policy and its procedures.
   6. Existing Devices  
      1. With the exception of purchase and installation, all existing AEDs will conform to this policy within thirty (30) days of its approval or will be removed.

1. Responsible Administrator

The Vice President for Technology and Security, successor, or designee, is responsible for the annual and ad hoc review of this policy and its procedures. The University President is responsible for approval of this policy.

SOURCE: Approved by President 02/23/2016; Revised and Approved by President \_\_/\_\_/\_\_.