



Cardiac Emergency Response Plan

This document provides guidance and outlines the Minnesota Transitions Charter School district's cardiac emergency response plan (CERP) and the district's comprehensive strategy for the preparation of and response to sudden cardiac arrest (SCA) in the school setting.

Legal Authority

121A.035 Crisis Management Policy..

Subdivision. 2. School district and charter school policy.

(a) A school board and a charter school must adopt a crisis management policy to address potential violent crisis situations in the district or charter school. The policy must be developed cooperatively with administrators, teachers, employees, students, parents, community members, law enforcement agencies, other emergency management officials, county attorney offices, social service agencies, emergency medical responders, and any other appropriate individuals or organizations. The policy must include at least five school lock-down drills, five school fire drills consistent with section [299F.30](#), and one tornado drill.

121A.241 Cardiac Emergency Response Plan.

Section. 5. Subdivision 1. Definition.

For the purposes of this section, a "cardiac emergency response plan" means a written document that establishes specific steps to reduce death from cardiac arrest in a specific setting.

Subdivision. 2. Cardiac emergency response plan.

Beginning in the 2026-2027 school year, a school district or charter school must develop a cardiac emergency response plan consistent with the model plan developed by the commissioner under section 121A.035, subdivision 1, for cardiac emergencies that occur on school property. At a minimum, the plan must:

- (1) establish a school cardiac emergency response team and plan of activation during the event of sudden cardiac arrest;
- (2) provide for placement of automated external defibrillators (AEDs) on school grounds following nationally recognized cardiovascular care organization guidelines;
- (3) provide for routine maintenance of AEDs;
- (4) provide for distribution of the plan on school grounds and in coordination with local emergency medical services providers;

(5) provide for annual cardiac emergency response plan drills for school staff and students;

(6) require the school board to annually review and evaluate the effectiveness of the plan; and

(7) address how school staff must respond to cardiac emergencies at school-sponsored activities, including athletic events on or off school grounds.

Abbreviations / Definitions

- AED: automated external defibrillator
- CERP: cardiac emergency response plan
- CERT: cardiac emergency response team
- CPR: cardiopulmonary resuscitation
- EMS: emergency medical services
- SCA: sudden cardiac arrest

Definition of Sudden Cardiac Arrest (SCA)

The American Heart Association (AHA) defines sudden cardiac arrest (SCA) as a sudden and unexpected loss of heart function where the heart stops beating due to an irregular heart rhythm in persons who may or may not have been diagnosed with a heart condition. When the heart beats abnormally it affects its ability to pump blood which may lead to cardiac arrest. Without immediate response and treatment, the person may lose consciousness and collapse, leading to death within minutes.

Signs of sudden cardiac arrest may include one or more of the following:

- Not moving, unresponsive, or unconscious;
- Not breathing normally (e.g. may have irregular breathing patterns, gasping or gurgling, or may not be breathing at all);
- Seizure or convulsion-like movements It is important to note that SCA may also occur when a person collapses shortly following a firm, sudden, direct hit to the chest.

Cardiac Emergency Response Team (CERT)

The school Director in each building will select a cardiac emergency response team (CERT) that will be trained to respond to emergency medical situations. CERT members should be available and willing adults who have current CPR/AED certification from a nationally recognized organization. This team is responsible for developing, implementing, and annually reviewing the district / school's adopted CERP. School Directors may consider including physical education teachers, athletic directors/trainers, coaches, staff overseeing recess, hall monitors, campus supervisors, behavior team members, and any other staff who are present before, during, or after the school day. This team leads the emergency medical response, but it is important that all school staff are familiar with the CERP and their role in responding to a cardiac emergency.

Members of the Cardiac Emergency Response Team

Each school will identify members for a Cardiac Emergency Response Team. Each team will consist of a minimum of four (4) individuals and the School Director. At a minimum, two (2) of the team members must be certified in CRP/AED. One (1) team member must be a member from the Health Services Office. School Directors will submit the list of team members annually to the District Office, including if there are adjustments throughout the school year.

Training / Education

MTCS provides CPR/AED/First Aid training annually. Every school in the district is required to send at least two (2) employees to the annual training. The Health Services staff are also trained annually and are not included in the count for the school staff who attend. It is strongly encouraged that all coaching staff and Physical Education teachers also attend the training.

Each school is required to review the Cardiac Emergency Response Plan annually with staff, prior to the first day of school with students.

MTCS provides instruction to secondary students, in alignment with the Minnesota Statute, section 120B.236, which states school districts must provide onetime cardiopulmonary resuscitation and automatic external defibrillator instruction as part of their grade 7 to 12 curriculum for all students in that grade beginning in the 2014-15 school year and later.

Communication

Each school will have an established method of communication for their Cardiac Emergency Response Team that allows for two-way communication when an emergency occurs.

The District will communicate and collaborate with the local authorities, as appropriate, regarding the District's Cardiac Emergency Response Plan and during / after any incident that occurs.

Automated External Defibrillator (AED) Equipment

Automated external defibrillators (AEDs) are devices used to analyze the heart's rhythm and, if necessary, deliver an electrical shock, to restore a normal rhythm. AEDs are lifesaving devices designed to be easy to use with visual and audio guidance.

The district has purchased and provides Automated External Defibrillator (AEDs) devices for every building in the district. The AEDs are placed throughout each of the facilities in high-traffic locations, and are installed so that should an emergency occur, one can be accessed within three (3) minutes for a response time.

All AEDs must remain unlocked and easily accessible without any access barrier. The AED storage container is also equipped with pads, gloves, scissors, a razor, and a CPR barrier mask.

AED Registration & Maintenance

Minnesota Statutes, section 403.51, states that a person who purchases or obtains a public access AED shall register that device with an AED registry within 30 working days of receiving the AED. School districts and charter schools can register their public access AEDs with the Minnesota AED Registry. MTCS AEDs are registered with the Minnesota AED Registry, in collaboration with Advanced First-Aid Inc. Each AED is maintained annually and the District monitors each AED monthly to ensure functionality. Should an AED ever be used, the District would have the AED maintenance / assessed to determine what needs to be replaced to ensure full operational status.

Protocol for Cardiac Emergency Response

The following are the steps that should be taken should a Cardiac Emergency occur:

1. Identify signs of sudden cardiac arrest (may include one or more of the following):
Not moving, unresponsive, or unconscious; not breathing normally (e.g. may have irregular breathing patterns, gasping or gurgling, or may not be breathing at all), may have seizure or convulsion-like movements, change in color, straining to speak, and other individualized signs.

*The first staff member to observe the unresponsive person should assess the area for immediate danger. If and only if there is no danger, should the staff member go to the unresponsive person to administer care. If there is danger and the unresponsive person cannot be reached safely, 9-1-1 should be called immediately for assistance.

2. If the environment is safe and care can be administered, the first staff member to observe the unresponsive person should designate another adult to call 9-1-1.

The individual contacting 9-1-1, should communicate and obtain the following:

- a. Provide school / building address.
- b. Explain the person's condition/symptoms.
- c. Share what care is currently being given.
- d. Listen carefully to the dispatcher for additional guidance.
- e. Stay on the line and answer any dispatcher questions.

3. The staff member who finds the unresponsive person should designate someone to retrieve and deliver an AED from the nearest location to the emergency.

4. The first staff member at the scene of the emergency should begin CPR. If they are not CPR certified, they can provide hands-only CPR until another individual arrives who is CPR certified and can take over. CPR should be continued until Emergency Services (EMS) arrive on the scene.

***Cardiopulmonary Resuscitation (CPR)**

- a. Place the unresponsive person on their back on a firm flat surface.

b. Using two (2)-hands place the heel of one hand in the center of the chest, on the lower half of the breastbone, with the other hand directly on top (or one hand for smaller children), pushing hard and fast to a depth of about two (2) inches (or one-third the depth of the chest for smaller children). You can lift or interlock fingers to keep them off the chest.

c. Perform 100-120 compressions per minute, allowing the chest to rise fully between compressions.

d. If able and willing to provide rescue breaths, use a CPR barrier mask and provide two (2) breaths after 30 compressions.

e. Continue compressions until help arrives.

5. Once 9-1-1 has been called, the CERT should be notified immediately so that the team can respond for assistance.

6. School Directors, who are part of the CERT, should follow the communication procedures within the crisis management policy and place the school in a “hold” for a medical emergency. Any bystanders who are not part of the CERT, should be removed from the area of the emergency.

7. CERT members should report to the emergency location and support based on roles and responsibilities assigned.

Responsibilities should include, but are not limited to:

- Ensuring CPR certified staff remain on scene and are providing consistent CPR.
- Securing the location and removing bystanders.
- Posting at school entry points to quickly direct EMS personnel to the emergency.
- Documenting time of the emergency, when CPR was initiated, when the AED was used if applicable, the time 9-1-1- was called, the time EMS arrived and took over care, the individual’s symptoms, and current condition.
- Communicating with the school office regarding visitors and the “hold” that is in place.
- Supporting those who are currently providing the care.
- Assisting with the use of the AED when it arrives.

8. When the AED arrives, turn the device on immediately. Follow the AED’s visual and audio prompts for pad placement and shock advisement. *Note: the AED will only deliver electrical shocks if advised by the device.* CPR should be continued in collaboration with the directions from the AED until the person becomes responsive or EMS takes over.

9. Upon arrival of the EMS, care should be transferred to EMS when they determine appropriate. A member of the CERT should be available to answer any questions and provide the documentation recorded to the EMS regarding the emergency. If the EMS requests the AED data and asks for it to be sent with them, this will be provided by the CERT.

10. Following the transfer of the care to the EMS, the CERT should determine an individual who will contact the individual’s guardian / emergency contact, to notify them of the emergency and that medical professionals are at the emergency providing care.

11. Once the emergency response has concluded, the CERT members must hold a debriefing meeting. The School Director will determine the appropriate time and place for this debriefing meeting to occur. It must be held within 24 hours of the emergency. The team should discuss the steps taken, the flow of communication, if the plan was followed, how to improve the response and support for future emergencies, and determine if any adjustments need to be made to the current response plan. Teams should also discuss and provide resources for any individuals involved who may need additional post-incident mental health support.

Plan Review

Annually, MTCS Health Services Department and the Director of Student Services will review the Cardiac Emergency Response Plan. The team will assess the accuracy of the plan, determine if changes are needed, and make recommendations for adjustments as appropriate. MTCS School Board will be presented with the plan annually and have the opportunity to review / approve it. The plan will also be reviewed following any incident that should occur, to assess if there are any adjustments needed to ensure that our district's response is strong and aligned with best practices.

Legal Resources / References

- Minnesota Statutes, section 604A.01 (Good Samaritan Law)
- Minnesota Statutes, section 120B.236 (Cardiopulmonary Resuscitation and Automatic External Defibrillator Instruction)
- Minnesota Statutes, section 121A.035 (Crisis Management Policy)
- Minnesota Statutes, section 403.51 (Automatic External Defibrillation; Registration)
- American Heart Association. (n.d.). Cardiac emergency response plan-Schools.
<https://cpr.heart.org/en/trainingprograms/nation-of-heartsavers/cardiac-emergency-response-plan>