

Government of the District of Columbia
Fire and Emergency Medical Services Department
Office of the State Superintendent of Education

Guide for Developing a School Cardiac Emergency Response Plan

July 2025



**WE ARE
WASHINGTON
DC** GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

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Letter from the Fire and EMS Chief and State Superintendent of Education

Dear School Leader,


We are pleased to provide guidance and a model plan template that will assist schools to develop and effectively implement a Cardiac Emergency Response Plan (CERP). The Fire and Emergency Medical Services Department (FEMS), Office of the State Superintendent of Education (OSSE), and key stakeholders have worked collaboratively to enable schools to prepare for and respond to incidents involving sudden cardiac arrest (SCA), particularly during athletic events and practices.

Cardiac arrest is a leading cause of death in America. Under the leadership of Mayor Muriel Bowser, we understand it is vital to equip schools with the knowledge, tools, and protocols to effectively respond to such emergencies. Your school's development of its CERP is an important step in ensuring school personnel are prepared to act quickly and decisively to save lives in the event of a cardiac emergency.

This guide identifies the components of a high-quality CERP including, but not limited to, building a strong cardiac emergency response team (CERT) through training and drills, maintaining accessible and functional automated external defibrillators (AEDs), and implementing clear protocols for swift and effective intervention. Filling out the guide's model plan template will enable schools to deliver prompt, professional, and life-saving care to students, staff, and visitors. With the right training, equipment, and procedures in place, school staff can significantly improve survival rates and outcomes for those experiencing SCA.

We encourage you to review this document thoroughly and incorporate your CERP into your school's emergency response plans. Thank you for your commitment to the health and safety of our community. Should you have any questions or require additional support, please do not hesitate to contact Hands.OnHearts@dc.gov or OSSE.SchoolHealth@dc.gov.

Sincerely,



John A. Donnelly, Sr.
Fire and EMS Chief



Antoinette S. Mitchell, Ph.D.
State Superintendent of Education

Introduction and Purpose

According to the 2023 Annual CARES Report, in 2023, 31.6 percent of cardiac arrest victims in Washington, DC received bystander cardiopulmonary resuscitation (CPR) and only 11 percent of cardiac arrest victims had an AED applied before the arrival of emergency medical services.

Studies have shown that people who receive CPR within two minutes of suffering sudden cardiac arrest have an 81 percent higher chance of surviving and being released from the hospital.

According to the American Heart Association, of the people with cardiac arrest who receive a shock from an AED in the first minute, 9 out of 10 live. In addition, application of an AED in communities is associated with nearly a doubling of survival after out-of-hospital cardiac arrest.

Although school staff are not traditional first responders, they must be prepared and trained to respond immediately when a cardiac emergency occurs. The actions they take before the first responders arrive can be lifesaving.

Drawing on best practices, this guide is organized into two parts: Part I includes recommendations on how to prepare for and respond to a cardiac emergency; and Part II includes a fillable template that a school can use to develop a high quality CERP.

Part I is organized into seven sections:

1. Definitions of key terms.
2. How to develop a cardiac emergency response team (CERT).
3. CERT's roles and responsibilities.
4. AED placement, installation and maintenance.
5. Working with Fire and EMS.
6. Training and drills.
7. School-specific cardiac emergency response protocol.

Part II is organized into five sections:

1. Principles for developing a high-quality CERP
2. A model CERP template that when filled in constitutes a school's CERP.
3. Recommendations for sharing the CERP.
4. A graphic that identifies key cardiac emergency response actions and that can be posted throughout the school including near AEDs.
5. A resource on the Rave Panic Button Emergency Safety app.

DC Fire and EMS and OSSE are providing examples of practices and matters to consider for planning and implementation purposes. The guidance does not create any requirements beyond those included in applicable law and regulations.

Part I: Preparing for and Responding to a Cardiac Emergency

Definitions

- Automated External Defibrillator (AED)
 - A device used to help someone who has had a sudden heart problem (like a heart attack).
 - It checks the heart's rhythm and can give a shock to help it start beating correctly.
 - It's easy to use, with instructions on how to apply it.
- Cardiopulmonary Resuscitation (CPR)
 - A life-saving technique used when someone's heart or breathing stops.
 - It combines chest compressions and mouth-to-mouth breathing (or just chest compressions if you're not trained).
 - Helps keep the person alive until medical help arrives.
- Sudden Cardiac Arrest (SCA)
 - A condition where the heart suddenly stops beating properly.
 - It can happen quickly and causes a person to collapse and stop breathing.
 - It is an emergency and needs immediate action like CPR or using an AED to save the person's life.
- Staff
 - All teachers, administrators, school district personnel and adult volunteers who are present at the school on a regular basis.
- School Leaders
 - Principals and administrators who are responsible for the health and safety of all students, staff, and visitors to the school.

Developing a Cardiac Emergency Response Team

The CERT is a group of staff members who are CPR/AED trained. This group is responsible for providing basic life support during a cardiac emergency.

CERT Best Practices



The CERT should be made up of at least five people, or 10 percent of staff.



School leaders should keep and have available a list of CERT members. It should be updated prior to the start of each school year.



Members of the CERT should be able to step away from daily tasks or have classroom coverage to assist when the CERP is activated.



There should be at least one CERT member in each section of the building.



Potential team members include staff with AED and CPR training and certifications, nurses, administrators, health and physical education staff, athletic coaches, etc.

CERT roles and responsibilities

Role	Responsibilities
Cardiac Emergency Response Team Coordinator	Responsible for: (1) coordinating the delivery of training, education, and evaluation of CPR and AED programs; (2) ensuring that all CERT members and selected staff have current AED and CPR certifications; and (3) ensuring CERT members have the RAVE Panic Button App downloaded on their phones.
911 Caller and Provider of Emergency Location	Calls 9-1-1 or utilizes the RAVE Panic Button App and directs FEMS to the location of the cardiac emergency.
Cardiac Emergency Response Team	All members have current AED and CPR certifications and are available to provide care in an emergency.

AED placement, installation, and maintenance

Each school in the District of Columbia is required to have and maintain an AED on site ([D.C. Code § 7-2371.02c\(2\)](#)).

1. Where the AEDs should be located:
 - ❑ Inside the building: There should be enough AEDs so it takes no more than 3 minutes to get one from anywhere in the building.
 - ❑ Outside the building: AEDs can be stationary or mobile. They must be available at all outdoor events. Mobile AEDs can be carried by an athletic trainer or another qualified person. There should also be enough AEDs outside to ensure they can be reached within 3 minutes.
 - ❑ Accessibility: AEDs should never be locked in an office or cabinet. They must always be easy to access.
2. Regular Maintenance: AEDs are checked and maintained regularly. The AED is maintained and tested according to the manufacturer's operational guidelines, and written records of the maintenance and testing are maintained. There should be a designated AED Coordinator, this person can be the CERT Coordinator. The AED Coordinator is responsible for ensuring the AEDs are functioning properly and that accessories including the battery and electrodes are not expired.
3. Clear signage: AEDs must have signs that are easy to see and identify:
 - ❑ Signs should be visible from common walking paths.
 - ❑ A 3-D sign should be installed above the AED cabinet or wall rack to clearly show its location.
4. Extra pads: Each AED should have a spare set of pads available.
5. Emergency supply kit: Consider placing extra emergency supplies with the AED. These might include latex-free gloves, a razor, scissors, a towel, antiseptic wipes, and a CPR mask.
6. Coordinator responsibilities: The CERT Coordinator or AED Coordinator must ensure AEDs are in places where they can be quickly retrieved and delivered anywhere in the building within 3 minutes. They must also be available for outdoor events.
7. 24/7 Accessibility: AEDs are accessible whenever the building is occupied, including during after-school activities like sports.

Working with Fire and EMS

- Register all AEDs in the department's AED registry.
- ❑ Begin with a group of selected staff and ultimately train all staff members in Hands-only CPR and AED use:
 - For CPR certifications, contact the DC Fire and EMS CPR Office at (202) 673-6901.
 - For Hands on Hearts Hands-only CPR community awareness training, email Hands.OnHearts@dc.gov.

Training and drills

CERT members, selected staff, and selected students should receive a number of trainings in order to understand their roles and fulfill their responsibilities.

- ❑ All members of the CERT and selected staff should receive training on the Cardiac Emergency Response Protocol.
- ❑ All members of the CERT and selected school staff should receive the AED and CPR training and have current AED and CPR certifications.
- ❑ Schools may determine that it would be helpful for selected students to be CPR certified.

Cardiac emergency response drills are an important part of this plan. The school must complete at least two successful cardiac emergency response drills every school year. CERT members and other staff trained in CPR and AEDs should take part in these drills.

A successful drill means the entire process is completed in 5 minutes or less. A member of the CERT will create a cardiac emergency response drill report for each drill. These reports must be kept for at least five years with other safety documents.

Each report will include:

- ☐ An evaluation of how the drill went.
- ☐ Suggestions for changes to the CERP if needed.

The school may want to include students in these drills.

Note: If the AED is taken with the patient or is removed from its cabinet, please place a sign about where the next closest one is located until there is an AED put back in the cabinet. Consider having a process or checklist for AEDs that have been used to verify all parts have been checked and replaced.

School-specific Cardiac Emergency Response Protocol

Sudden cardiac arrest events can happen in many ways. All staff and CERT members must follow the duties listed below. Taking immediate action is key to handling a cardiac emergency successfully. Plan by arranging on-site ambulance coverage for high-risk athletic events. Identify the nearest medical facility with advanced cardiac care to ensure quick access in an emergency. Sudden cardiac arrest events can happen in many ways. All staff and CERT members must follow the procedures listed below. Taking immediate action is key to handling a cardiac emergency successfully. Plan by arranging on-site ambulance coverage for high-risk athletic events. Identify the nearest medical facility with advanced cardiac care to ensure quick access in an emergency.

Steps to follow

Follow these steps in responding to a suspected cardiac emergency:

Recognize the emergency

1. The person is not moving, unresponsive, or unconscious.
2. The person is not breathing normally (has irregular breaths, gasping or gurgling, or is not breathing at all).
3. The person may appear to have a seizure or is experiencing convulsion-like activity. Cardiac arrest victims commonly appear to be having convulsions. If the person is having a seizure without a sudden cardiac arrest an AED will not deliver a shock.
4. If the person received a blunt blow to the chest, this could cause cardiac arrest, a condition called *commotio cordis*. The person may have the signs of cardiac arrest described above and is treated the same.

Call for help

1. Call 9-1-1 or utilize the RAVE Panic Button App as soon as you suspect a sudden cardiac arrest. Provide the facility address, cross streets, quadrant of the city, and patient's condition. Remain on the phone with 9-1-1. (Bring your mobile phone to the patient's side and put on the speaker, if possible.) Give the exact location and provide the recommended route for ambulances to enter and exit and escort emergency responders to the victim.
2. Immediately contact the members of the CERT using your facility's designated communication system (e.g., walkie talkies, paging system).
3. If you are a CERT member, proceed immediately to the scene of the cardiac emergency.

Start CPR as soon as possible

The first person who can start CPR should begin immediately and, if additional bystanders are available, other tasks can be delegated.

1. Begin continuous chest compressions and have someone retrieve the AED if not at the scene. Referred to the Act Now. Save a Life. (Simplified Adult Basic Life Support) graphic below.
2. Press hard and fast in the center of the chest, at 100-120 compressions per minute. (Think of songs like "Stayin' Alive," by the Bee Gees, "Man in the Mirror," by Michael Jackson, or "Baby Shark.")
3. Use two hands: The heel of one hand and the other hand on top (or one hand for children younger than age 8), pushing to a depth of at least 2 inches (or a third of the depth of the chest for children younger than age 8).
4. Follow the 9-1-1 telecommunicator's instructions, if provided.
5. If you are able and comfortable giving rescue breaths, please use a barrier and provide two rescue breaths after 30 compressions.
6. **AED Access:** The person who can retrieve the AED the fastest (ideally enroute to the scene) should get it to the site and leave the AED cabinet door open as a signal that the AED was retrieved.
7. **Additional communication measures**
 1. Give the exact location of the emergency to the FEMS and CERT members who may assist. ("Mr./Ms. ___ Classroom, Office or Room ___, gym, football field, cafeteria, etc."). Be sure to let FEMS know which door to enter.
 2. Assign someone to go to that door to wait for and flag down FEMS responders and escort them to the exact location of the patient.

Use the nearest AED

1. When the AED is brought to the patient's side, press the power-on button, and attach the pads to the patient as shown in the diagram on the pads. Then follow the AED's audio and visual instructions. If the person needs to be shocked to restore a normal heart rhythm, the AED will deliver one or more shocks. Be familiar with your school's AED and be aware if you need to press the shock button or if it will deliver automatically. *Note:* The AED will only deliver shocks if needed; if no shock is needed, no shock will be delivered.
2. Minimize interruptions of compressions when placing AED pads to patient's bare chest.
3. Continue CPR until the patient is responsive or a professional responder arrives and takes over. Make sure to rotate people doing compressions to avoid getting tired.
4. Do not remove AED pads even if the patient regains consciousness - the pads should be left in place until handoff to EMS occurs. This precaution is necessary in case the patient has a relapse.
5. If the AED is used, be sure to have a plan to download the data, store the data, and deliver to the patient's cardiology care team.

Transition care to FEMS

1. Once FEMS arrives, there should be a clear transition of care from the CERT to FEMS.
2. CERT focus should now be on assisting FEMS safely out of the building/parking lot.
3. Provide FEMS a copy of the patient's emergency information sheet.

Action to be taken by Office/Administrative Staff

Immediate response

1. Confirm the exact location and condition of the patient.
2. Activate the CERT and provide the exact location.
3. Confirm that the CERT has responded.
4. Call 9-1-1 or utilize the RAVE Panic Button App if it hasn't been done already by the CERT.
5. Assign a staff member to direct FEMS to the scene.

Managing the scene

1. Perform "crowd control" – directing others away from the scene.
2. Notify other staff, such as the school nurse, athletic trainer, athletic director, safety director, safety manager, and sports facilities manager.

After the initial response

1. Plan for ongoing coverage following the emergency in case another event happens.
2. Consider having people stay in place to facilitate CPR and EMS functions, like delaying class changes or hallway traffic.
3. Designate people to cover the duties of the CPR responders.
4. Copy the patient's emergency information for EMS.
5. Notify the patient's emergency contact (parent/guardian, spouse, etc.).

Communication and coordination

1. Notify faculty and students, staff, employees, and sports attendees when to return to the normal schedule or services.
2. Contact organization leadership (e.g., school district administration), human resources, and/or other facility management (e.g., sports facility management).

Debrief

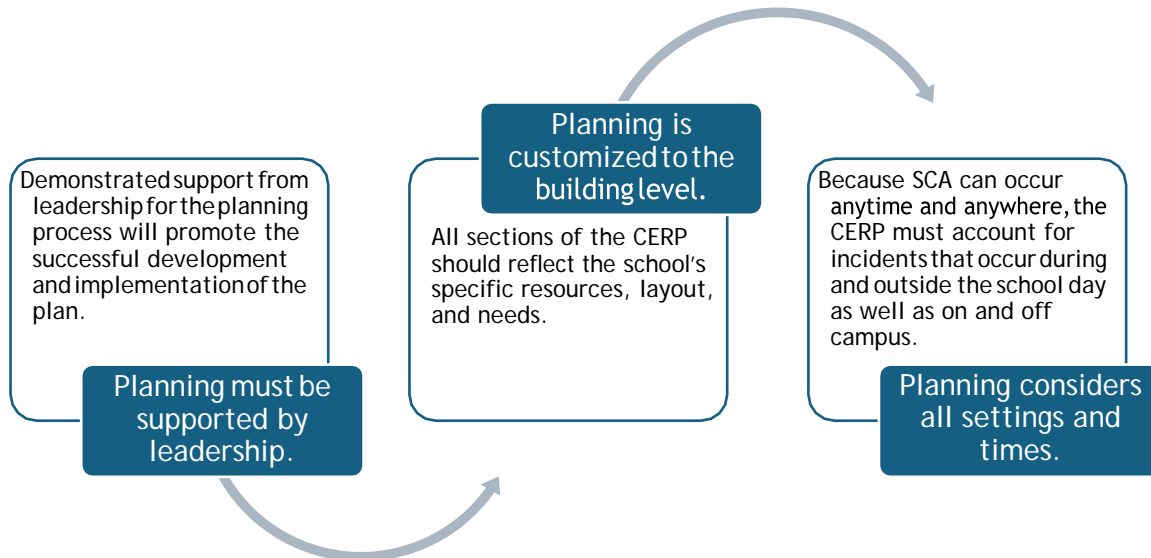
1. Talk about what happened during the cardiac emergency. Include a summary of the person's medical condition if that information is publicly available. Do not collect personal details unless they are already public.
2. Review if the CERP worked well for the specific emergency. If the plan didn't work as expected, suggest ways to improve it and how it is used. The review may include talking with medical staff (ideally through the organization's medical team) to help understand what happened and address any concerns about on-site medical care.
3. Evaluate how the debriefing process went for responders and what support was given after the event. Make sure to identify available aftercare services, like crisis counselors, for those who need them.

Other considerations

- **Additional Medications:** Consider adding lifesaving medications near AEDs, such as—
 - Narcan (Naloxone)
 - Epinephrine autoinjector (EpiPen)
- **Emergency Supply Kit:** Each AED location should have an emergency kit containing—
 - Latex-free gloves
 - Razor
 - Scissors
 - Towel
 - Antiseptic wipes
 - CPR barrier mask
- ☐ **Accessibility:** AEDs will always remain unlocked and easily accessible, including after-school activities.
- ☐ **Signage:** Clear AED signage will be installed above each AED location, visible from walking paths.

Part II: Developing a High-Quality CERP

The following planning principles are key to the development of an effective CERP.



A high-quality CERP must not only comply with applicable legal requirements, it must also be feasible, comprehensive, and tailored to the individual characteristics of the school. It should include effective communication procedures, provide for training responders how to administer CPR and use an AED, ensure that the AEDs and other emergency equipment are available for quick use, and include protocols for working with the local FEMS system.

When filled out the following template will constitute a school's annual CERP. As indicated earlier, the model template is based on recommended best practices, and schools have the discretion to adopt or not adopt individual practices unless they are required by law or regulation. Legal requirements are highlighted in the template.

The template is formatted in part through a series of "yes" or "no" questions. It is perfectly acceptable for school to answer "no" to one or more of the questions unless it relates to a legal requirement, and schools should only answer affirmatively to the yes/no questions if it plans on carrying out the action or activity.

Model CERP Template

- ☐ School Year _____
☐ Name of School _____
☐ Name of Local Educational Agency (LEA) _____

Cardiac Emergency Response Team (CERT) Composition

Role	Name and School Position Title	Room Number	Cell Phone	Email	CPR Expiration
CERT Coordinator					
9-1-1 Caller					
CERT Member 1					
CERT Member 2					
CERT Member 3					
CERT Member 4					
CERT Member 5					
CERT Member 6					
CERT Member 7					

CERT Training

CERT Training	Date of Last Training	Date of Next Training
Cardiac Emergency Response Protocol Training		
CPR Training		
AED Training		

CERT Administration	Yes	No
Do all CERT members have current AED and CPR certifications?		
Does the school leader have a list of the CERT members?		
Was the list of CERT members updated for the current school year?		
Are CERT members authorized to step away from daily tasks if the CERT is activated?		
Is class coverage established for CERT members who have to step away to assist when the CERT is activated?		
Is there at least one CERT member in each section of the building?		
Are all CERT members equipped with the school's designated communication system (e.g., walkie talkies, paging system) to ensure immediate communication.		

Staff and Student Training

Non-CERT Staff and Student Training	Date of Last Training	Date of Next Training
All Staff Cardiac Emergency Response Protocol Training		
Selected Staff CPR Training		
Selected Staff AED Training		
Selected Student CPR Training (if applicable)		

CPR and AED Training	Yes	No
Have the following individuals successfully completed a CPR and AED program?		
Athletic coach, coaching assistant and athletic trainer		
Athletic director		
Team or game physician		
School nurse		
Is at least one individual trained in a CPR or AED program present during the school's hours of operation and during any athletic activity?		

Drills	Yes	No
Will the school conduct at least two drills this year?		
Date of Drill 1:		
Date of Drill 2:		
Will the school create a cardiac arrest response drill report for each drill?		
Will the school keep the drill reports on file for five years?		
Will each drill report include an evaluation of the drill and suggested changes to the CERP if needed?		

AEDs

How many AEDs does the school have?	
Where are the AEDs located?	Location 1: [e.g., Main Office by Reception Desk]
	Location 2: [e.g., Gymnasium Hallway near Locker Rooms]
	Location 3: [e.g., Carried by Athletic Trainer during events]
	Location 4:

AEDs	Yes	No
Are the AEDs located so it takes no more than 3 minutes to get one from on to anywhere in the building?		
Are AEDs available at all outdoor events?		
Are there enough AEDs located outside to ensure they can be reached within 3 minutes?		
Are all AEDs accessible whenever the building is occupied including during after-school activities like sports?		
Is all AED signage visible from common walking paths?		

Is a 3-D sign installed above the AED cabinet or wall rack to clearly show its location.					
Does each AED have a spare set of pads available?					
Are extra emergency supplies with the AED (e.g., latex-free gloves, a razor, scissors, a towel, antiseptic wipes, and a CPR mask)?					
Are lifesaving medications like Narcan (Naloxone) or an EpiPen (Epinephrine autoinjector) with the AED?					
Have all the AEDs been registered in the DC Fire and EMS AED registry?					
Are all the AEDs maintained and tested according to the manufacturer's operational guidelines?					
Are written records of the maintenance and testing maintained?					
Has the school established an AED inspection schedule?					
AED	Date of Last Testing and Inspection	Date of Next Testing Inspection	Notes (e.g., battery replaced)		
AED 1					
AED 2					
Mobile AED					

Post-Event Reviews

Post-Event Reviews	Yes	No
Does the school have a post-event review process?		
Does the school post-event review process include the following?		
A list of individuals to be notified in case of a cardiac emergency.		
Procedures for the release of information regarding cardiac emergencies.		
The date, time, and location of the of the cardiac emergency.		
Identification of the person(s) who responded to the emergency.		
The outcome of the cardiac emergency including a summary of events leading to the cardiac emergency and any health information about person who experience the cardiac emergency.		
An evaluation of whether the CERP and CERP protocol was sufficient to enable an appropriate response to the specific cardiac emergency.		
An evaluation of the debriefing process for responders and post-event support.		

CERP Administration

CERP	Yes	No
Was the CERP shared with all and staff at the start of the school year?		
Has the CERP been posted near AEDs?		
Has the CERP been attached to all the mobile AEDs?		
Has the CERP been shared with people and groups who regularly use the school and its outdoor areas for sports activities?		
Has the CERP been incorporated into the school's Emergency Response Plan?		

CERP	Yes	No
Will the school conduct an annual CERP review before the start of the school year to update the members of CERT discuss ways to improve the implementation of the CERP?		
Date of annual CERP review:		
Names of staff who participated in annual CERP review: 1. 2.		
Date of next annual CERP review:		
<p>Where has the CERP been displayed throughout the school?</p> <p>Location 1: [e.g., Main Office by Reception Desk] Location 2: [e.g., Gymnasium Hallway near Locker Rooms] Location 3: [e.g., Carried by Athletic Trainer during events] Location 4:</p>		
<p>Persons who have reviewed and approved the CERP:</p> <p>School leader: [name and date] LEA representative: [name and date] CERT coordinator: [name and date] Nurse: [name and date]</p>		

CERP Signature Page

SchoolPrincipalName:

_____	_____	_____	_____
Signature	Date	Approver	Date of Approval

DCPS/PCSB Administrator Name:

_____	_____	_____	_____
Signature	Date	Approver	Date of Approval

FEMS Name:

_____	_____	_____	_____
Signature	Date	Approver	Date of Approval

Share the Plan Widely



Give the CERP to all staff at the start of the school year.

The CERP should be displayed in visible places throughout the school.

Examples of where to post it:
classrooms, offices, staff rooms, restrooms, cafeterias, auditoriums, gyms, and pool areas.

It should also be posted near AEDs and public phones.

A copy should be attached to any mobile AED.



Staff should:

Get a copy of the CERP at the start of the school year.

Receive an updated copy if there are any changes.

Be trained on how to follow the CERP.

Know how to perform hands-on CPR and use an AED.

New staff should get the CERP when they are hired.

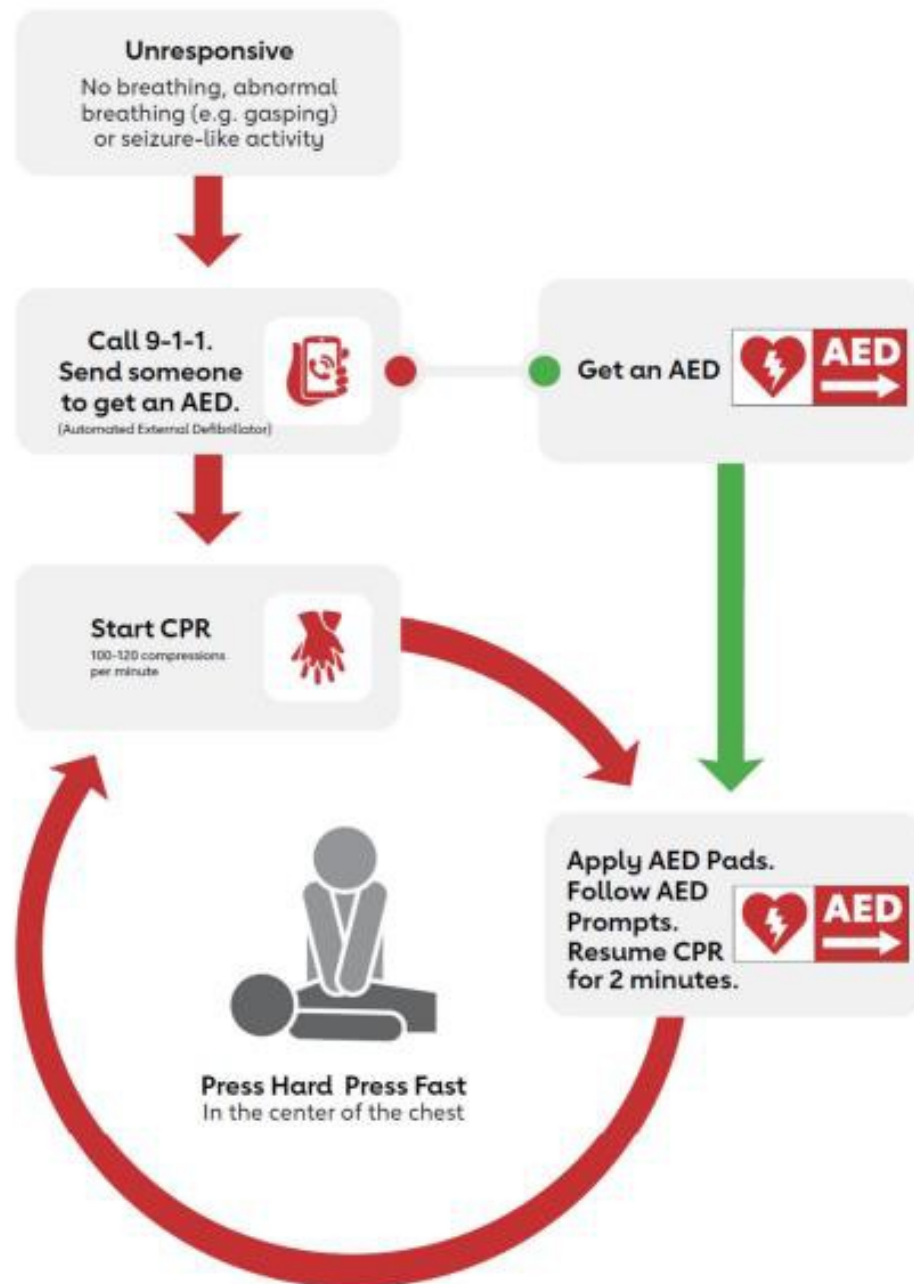


Share the CERP with people and groups who regularly use the school and its outdoor areas.

Graphics on Key Cardiac Emergency Response Actions

Act Now. Save a Life.

Follow these steps to take action.



© 2024 American Heart Association



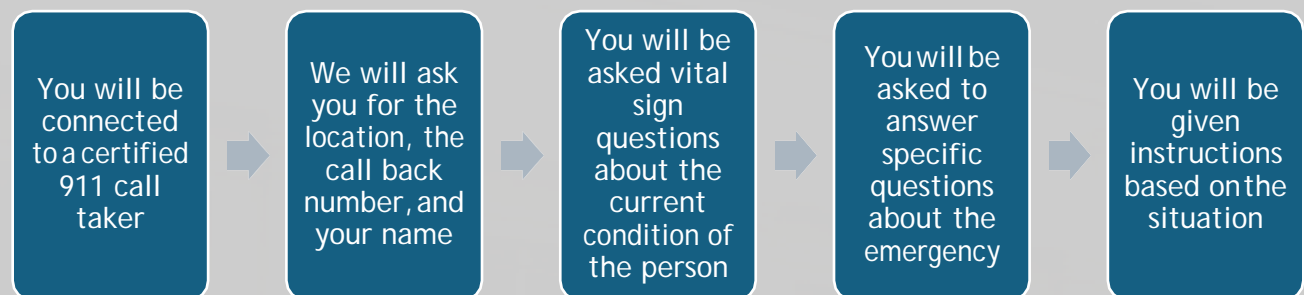
How Does RAVE Panic Button Work?

[Rave Panic Button Emergency Safety App for Schools and Organizations - Education - Motorola Solutions Video Library Update \(Catalogue\)](#)

Who should have RAVE Panic Button on their device?

Everyone at the School

What happens when I call 911?



What questions will you ask?

- What is the emergency?
- What is the patient's age, or approximate age?
- What is the patient's gender?
- Is the patient conscious?
- Is the patient breathing normally?

What should I do when I call 911?

