

Implementing an AED Program in the Faith Community Setting

Background

An automated external defibrillator (AED) is a computerized medical device that analyzes a person's heart rhythm to determine if it is abnormal or life-threatening and requires an electric shock. Through voice prompts, lights, and text messages, the AED can advise rescuers when a shock is needed and what steps to take.

The American Heart Association (AHA) strongly encourages companies/organizations to implement AED programs to increase the chances of survival for people who have heart-related emergencies. Unfortunately, around ninety percent of persons with cardiac arrest that occurs outside of a hospital setting will not survive (Rea, 2024). The goal of every AED program is to deliver defibrillation to a sudden cardiac arrest (SCA) victim within three to five minutes after collapse as this can be the single most important intervention.

Key Steps to Implementing an AED Program (AHA, 2023)

Step 1: Check local requirements.

- **Liability:** Laws vary by state, county, or city, but the [Cardiac Survival Act of 2000](#) provides federal liability protection for those who use an AED to save a life. All 50 states and the District of Columbia now include using an AED as part of their Good Samaritan Laws. Check your state's Good Samaritan Act for specific information, and ensure your legal counsel conducts a review of your program. A safety team or risk management team can also review the AED plan.
- **Medical oversight:** Your state may require a physician to review and oversee your AED program.
 - The role of the physician varies depending on the size of the program. Responsibilities of the physician may include:
 - Signing off on or making recommendations on training plans, policies and procedures
 - Evaluating data recorded on an AED during a medical emergency
 - Assessing each use of an AED to recommend any improvements
 - A designated program coordinator should be responsible for day-to-day program implementation.
- **State registration:** An application to the state may be required to start an AED program, followed by registration with a state or local emergency medical services (EMS) organization.
 - AED programs may be required to send follow-up data to EMS after each use.
 - The physician or program coordinator should complete the registration process.

Step 2: Assess your organization's needs.

- **Quantity of AEDs needed:** it shouldn't take more than 1.5-2.5 minutes to reach an AED and 1.5-2.5 minutes to return to the unconscious individual. Map your facility and determine how many AEDs are required for the space.
- **Additional considerations:**
 - Durability – will the AEDs be used indoors, outdoors, or transported in a vehicle?
 - Size, portability, and storage should be considered.
 - Features that are required will help determine which AED is most appropriate:
 - Wi-Fi capability
 - Child compatibility (child pads and voltage appropriate for children)
 - Bilingual AEDs (English and Spanish)
 - Real-time feedback on CPR quality
 - Tracking software to maintain the AED

Step 3: Research, select, and purchase AEDs.

- Several AEDs on the market are suitable for faith community AED programs; choose one that is simple and easy to use. Also, make a note of any maintenance requirements of the FDA-approved AED. It may be helpful to consult with your local EMS for recommendations on AED models.
- The [American Red Cross](#) (2024) partners with manufacturers to assist organizations in obtaining an AED and also can assist in providing training courses for organizations such as a faith community.
- The AED should be approved by the Food and Drug Administration (FDA) ([see list of FDA approved AEDs](#)). Problems with AEDs and their accessories should be reported to the FDA.
- AEDs range in price between \$1200 to \$3000 each. Remember to buy extra pads (two sets for each AED) and replace expired AED pads as needed. Always have backup batteries available.

Step 4: Register your AEDs with the following:

- State or local EMS, if required
- Manufacturer of the AED, to receive updates and recall information

Step 5: Contact technical support.

- Research the history of the manufacturer you are considering for the purchase of an AED.
- Contact the manufacturer's technical support number to assess response time and availability.
- Arrange for technical support when your AED device requires it.

Step 6: Check for program support from the AED manufacturer.

- Some AED manufacturers provide help with program implementation and ongoing support, and can assist with placement, medical authorization, registration, training, and supplies
- The Faith Community should determine if available services would help with the implementation the AED program.

Step 6: Place your AED(s) in a visible and accessible location.

- Effective AED programs are designed to deliver a shock to the victim within three to five minutes of ventricular fibrillation or pulseless ventricular tachycardia (cardiac arrest); use a three-minute response time as a guideline to help you determine the best locations. It is also important that the AED is visible and easily accessible.
- Be sure to insert batteries and follow the manufacturer’s instructions to activate and test each unit.
- Placement should meet [Americans With Disabilities Act](#) guidelines. AEDs shouldn’t be locked in a cabinet or office.
- Label each unit clearly as an AED and post signs that can be seen from at least 200 meters away indicating the direction and distance to an AED. Maintain and inspect signs once a year.
- Each AED storage box should include:
 - Two sets of unexpired adult pads
 - Child pads (if AED has a child shock feature)
 - Pocket masks and 1-way valves
 - Scissors for cutting and removing clothing
 - First aid kit as space allows

Step 7: Develop a training plan and manage your program.

- AED users should be trained in Basic Life Support/cardiopulmonary resuscitation (CPR) and use of the AED. At a minimum, members of the community should know how and when to call for help.
- Multiple responders in the faith community should be trained in CPR and the use of the AED, and ongoing training can help increase the comfort and confidence level of responders.
- The [American Heart Association](#) and [American Red Cross](#) offer CPR AED training in a classroom setting and through an eLearning format.
- Perform monthly AED checks.
- Maintain all AED records (warranties, maintenance schedules, and recalls).

Step 8: Raise awareness of the AED program.

- After initial implementation of the AED program, provide information to all congregants about the AED program.
- Use internal newsletters, posters, magnets, signage, or other means to promote the AED program and identify where the devices are located.
- Continually raising awareness of the program reinforces to congregants that the faith community is committed to their safety.

Step 9: Implement an ongoing AED maintenance routine.

- Conduct a weekly or monthly visual inspection of the AEDs to ensure the devices are in working order.
 - The program coordinator or another designated person can perform the AED inspections.
 - This person develops a written checklist to assess the readiness of the AED and supplies. A written checklist provided by the AED manufacturer can be utilized. Alternatively, if one is not available, then the community team member can create their own.
 - An important detail of the checklist should include evaluating the pads for expiration date and sealed packaging.
 - This checklist supplements regularly scheduled, more detailed inspections, as recommended by the manufacturer.
- Communicate with your manufacturer regularly to get the latest information about software updates or upgrades.

Special Considerations for the Faith Community Nurse

- When initiating an AED program, work in collaboration with faith community leadership to follow the protocols recommended by the American Heart Association.
- Identify key persons within the faith community to become CPR-certified and trained to use the specific AED device selected for the faith community. Ongoing training should be offered to maximize the number of people trained.
- Work with key leadership to:
 - determine the appropriate resources for the oversight and management of the AED program.
 - ensure appropriate oversight, implementation, maintenance, education, training, and notification of local EMS are in place for the AED program.
 - develop appropriate policies and procedures specific to the established AED program within the faith community setting.

Steps for Successful AED Programs in Faith Communities (Gilchrist, 2012)
Explore interest and feasibility for developing an AED program; form a Task Force to explore the idea of installing an AED.
Contact local EMS for oversight of the program.
Establish a budget and research vendors.
Identify leaders who will provide training and those who will be trained.
Follow the steps recommended by the AHA.
Commit to ongoing education and recertification.

References:

- American Heart Association. (2023). Your On-site AED Program: An Implementation Guide <https://cpr.heart.org/-/media/CPR-Files/Training-Programs/AED-Implementation/2023-updates/KJ1683-AED-Guide.pdf>
- American Red Cross. (2024). AEDs for the workplace. <https://www.redcross.org/take-a-class/aed-offers>
- Gilchrist, J. (2012). Public Access to Defibrillation (PAD): Implementing a church program. *Journal of Christian Nursing*, 29(2), 110-112. <https://www.doi.org/10.1097/CNJ.0b013e318246e2d3>
- Rea, T. D. (2024, March 5). Automatic External Defibrillators. *UptoDate*. <https://www.uptodate.com/contents/automated-external-defibrillator>