

Cardiac Emergency Response Plan (CERP)



Prepared for:

Long Prairie Grey Eagle

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Introduction

Beginning in the 2026-2027 school year, a new requirement for schools goes into place for developing a cardiac emergency response plan (CERP) as detailed in [Minnesota Statutes 2025, section 121A.241](#). The school should ensure that local emergency responders have access to the school's building-specific crisis management plans which should include the school's CERP for responding to a sudden cardiac arrest event (SCA). It is required that each school establish a cardiac emergency response team (CERT) and provide for annual CERP drills for school staff and students, so they are prepared to assist in the event of a cardiac emergency.

The plan outlines key considerations to ensure a timely response that is comprehensive and includes forming a team prepared in leading the response for cardiac emergencies; automated external defibrillator (AED) procurement, maintenance, and registry; recommendations for staff training and certification; annual review and evaluation of the plan; and a protocol for cardiac emergency response.

This CERP is intended to guide the schools in developing and implementing a written and practiced plan that establishes specific steps to reduce death from cardiac arrest in a school setting. Local medical and legal counsel for the schools should review the CERP prior to implementation to ensure the plan as adopted is consistent with local, state, and federal law.

After approval by the school board, an adopted plan will become an addendum to the crisis management policy. Schools should reference any school board policies guiding the handling of medical emergencies on school property within the building's written CERP.

List of Abbreviations

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

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.

Forming a Cardiac Emergency Response Team

Schools are required to designate one or more staff members as the CERP Coordinator(s) to support the overall development, implementation, and evaluation of a written and practiced plan for cardiac emergencies on school grounds.

The school administrator in each building will select a cardiac emergency response team (CERT) that will be trained to respond to emergency medical situations. This team should include members that are available and willing adults, preferably certified in CPR and AED use, who are responsible for developing, implementing, and annually reviewing the school's adopted CERP.

School administrators may consider including school nurses, physical education teachers, activities director, athletic trainers, coaches, staff overseeing recess, and any other staff who are present before, during, or after the school day. While this team leads the emergency medical response, it is important that all school staff are familiar with the CERP and their role in responding to a cardiac emergency. As an example, any staff member who witnesses a person unexpectedly collapse should know how to recognize a cardiac arrest, initiate a building's emergency medical response, call 9-1-1 to activate emergency medical services (EMS), and where the AEDs are located inside and outside of the building.

To ensure a timely response, it is recommended that schools consider building CERTs with enough staff members to account for periodic absences and staff turnover. CERT members will be required to step away from their regular job duties to assist in a cardiac emergency and consideration should be given for classroom coverage in those instances. (Best practice recommendations suggest that at least five people or 10% of overall school staff, 50% of coaches, and 50% of physical educators should hold current CPR/AED certification.)

In addition to establishing team roles and responsibilities, communication is a critical component in the team's efficient emergency response. CERTs should determine a communication plan that includes two-way communication covering all areas of the school's campus, both inside and outside the facility. The communication plan should clearly state how staff members activate the CERT and local EMS. Additional considerations should be given for how all CERT members will be alerted in a consistent manner using overhead page, two-way radio, phone, or other communication device.

Members of this school building's Cardiac Emergency Response Team are listed on Appendix A:

Automated External Defibrillator 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.

It is best practice for schools to have adult and pediatric pads available in each case for use if needed. If pediatric pads are not available, adult AED pads may be used. Considerations should also be given for including additional items like latex-free gloves, razor, scissors, and a CPR barrier mask.

Procurement

When schools look to procure AEDs, several options may be considered to best meet the school's needs and budget. Best practice recommendations include purchasing AEDs and AED accessories that have received premarket approval from the [U.S. Food & Drug Administration\(FDA\)](https://www.fda.gov/).

Placement

AEDs should be stored in an unlocked case and ensure accessibility for people of all abilities with installation in high traffic areas of the school building like cafeterias and gymnasiums. The device's readiness indicator should be facing outward and visible with signage that clearly indicates the location of the device with AED use instructions available in languages relevant to the school community. The American Heart Association recommends, and Minnesota state law requires, that schools place AEDs in accessible locations throughout the campus to allow for retrieval and delivery to the scene ideally within 3 minutes of being notified of a potential cardiac emergency. Minnesota Statutes 2025, section 121A.241, subdivision 2(2).

Schools must address how staff will respond to cardiac emergencies at school-sponsored activities, including athletic events on or off school grounds per Minnesota Statutes 2025, section 121A.241, subdivision 2(7). The plan should provide for AED availability at athletic practices and events.

The CERP protocol shall include a site map with AED locations both inside and outside of buildings.
See Appendix B: AED Locations

Maintenance

Schools should consult with their district's health and safety or facilities team to determine best practices for proper installation and maintenance of AEDs, including a process for documenting regular safety checks to verify expiration dates for the device's pads and batteries and to ensure the device is functioning properly. CERT should determine staff roles and responsibilities for the routine monitoring and tracking of proper function and maintenance of the equipment. Minnesota Statutes 2025, section 121A.241, subdivision 2(3). **See Appendix C AED Maintenance Checklist.**

Registry

[Minnesota Statutes 2025, 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. Schools can register their public access AEDs with the National Emergency AED Registry (NEAR) through the PulsePoint Foundation at [PulsePoint AED](#). Questions regarding AED registry can be directed to the PulsePoint Support Team at support@pulsepoint.org.

Schools are advised to consult with their district legal counsel to assess the applicability of Minnesota Statutes 2025, section 403.51, subdivision 1, paragraph (e), in relation to the placement and visibility of AEDs within their facilities.

Communication of the Cardiac Emergency Response Plan

The adopted CERP should be distributed broadly as a part of the building's overall crisis management plan to all staff and relevant local emergency responders at the start of each school year. Minnesota Statutes 2025, section 121A.241, subdivision 2(4). The designated person is responsible for distribution of the CERP.

The American Heart Association recommends that the CERP protocol be posted near the AEDs and in classrooms, cafeterias, gymnasiums, restrooms, health offices, breakroom spaces, and in main offices.

Integration of Local Emergency Medical Services with the School Plan

School administrators and CERT members will work in cooperation with relevant local emergency responders, school health and safety officials, school nurses, athletic staff, and other members of the school or community medical team. Minnesota Statutes 2025, section 121A.241, subdivision 2(4).

Training for CPR and AED Use

To effectively respond to cardiac emergencies, schools should include clear procedures for CPR and AED training and certification within the response plan. As a best practice, all school staff and coaches should review the school's CERP annually and be encouraged to learn Hands-Only CPR and AED use. These efforts ensure a coordinated and rapid response to cardiac emergencies within the school setting. **See Appendix D: CERP Training and Certification Logs.**

CPR and AED Instruction for Secondary Students

Schools 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. Training and instruction under this section need not result in cardiopulmonary resuscitation certification. Minnesota Statutes 2025, section 120B.236a.

CPR training

Training is the educational process of learning how to recognize sudden cardiac arrest, perform chest compressions (Hands-Only CPR), and use an AED. School staff and coaches are encouraged to participate in annual CPR and AED education to strengthen school-wide readiness and ensure a timely response that meets CERT roles of CPR initiation, AED retrieval, and 911 notification. Annual training should include review of the CERP, recognizing the signs of cardiac arrest, understanding how to initiate the emergency response team, and knowledge of where AEDs are located inside and outside the building.

CPR certification

Certification formally recognizes a person's proficiency in performing CPR and AED use. Certification is obtained through a nationally recognized organization, such as the American Heart Association, the American Red Cross, among others, and includes written and in-person hands-on testing. Schools should strongly consider CPR and AED certification for CERT members and renew certification at least every two years to maintain competency. Certification is also recommended for coaches and others who regularly supervise student physical activity.

Nationally recognized cardiovascular care organizations offer certification courses in traditional classroom settings and blended formats that combine online learning with in-person practice and testing.

Practice Drill for Cardiac Emergency Response

For schools to be fully prepared to respond to a cardiac emergency, annual drills for school staff and students should be incorporated into the CERP. Minnesota Statutes 2025, section 121A.241, subdivision 2(5). The American Heart Association describes a successful cardiac emergency response drill as full completion of the CERP protocol in 5 minutes or less. Schools must perform at least one drill annually, while two or more are recommended by the AHA, noting that one of the drills may include a tabletop exercise with participation of CERT members and school staff^{vi}. The drills allow the response team time to practice key elements of the plan including effective communication, availability of CPR/AED certified responders, identification of roles and responsibilities, access to AEDs, and coordination with onsite and community medical responders.

Practice drills should be included in a building level crisis management plan under crisis-specific procedures for cardiac emergencies. **See Appendix E: Annual Drill Log**

Annual Review of the Plan

School Boards are required to conduct an annual review and evaluation of the CERP, focusing on ways to improve the effectiveness of the plan. Minnesota Statutes 2025, section 121A.241, subdivision 2(6). This evaluation may include post-event feedback from after-action reviews. Annually, the District's CERP Coordinator(s) and building CERT members should review and update the CERP based on current evidence-based best practices for responding to a cardiac emergency.

Protocol for Cardiac Emergency Response

Although most school staff do not have a background in the medical field, it is possible that a situation will arise that requires quick action from staff to successfully respond to a medical emergency. The following protocol provides step-by-step guidance that all staff can follow in an event of a cardiac emergency. Immediate action is critical when responding to a sudden cardiac arrest event. Schools should identify the closest medical facility that is equipped in advanced cardiac care and considerations may be given to obtaining on-site ambulance coverage for higher-risk athletic events.

Protocol for Cardiac Emergency Response

1. Recognize signs of SCA (may include one or more of the following).
 - a. Not moving, unresponsive, or unconscious
 - b. Not breathing normally (e.g., may have irregular breathing patterns, gasping or gurgling, or may not be breathing at all)
 - c. Seizure or convulsion-like movements
2. The first school staff to observe the unresponsive person calls 9-1-1 or designates another adult to call 9-1-1.
 - a. Provide school building address
 - b. Explain person's condition/symptoms
 - c. Listen carefully to the dispatcher for additional guidance Stay on the line and answer dispatcher questions
3. Once 911 has been called, activate the cardiac emergency response team (CERT) immediately using the communication plan outlined in the CERP. Use a calm, clear voice to call the office and state, ***"There is a cardiac emergency in [name specific location within the building] and 911 has been called."***
4. The school staff that finds the unresponsive person should also designate someone to retrieve and deliver an AED from the nearest location to the emergency. Often a team member enroute to the scene can retrieve the AED the fastest.
5. The first staff member at the scene of the emergency should start CPR (Hands-Only CPR if not CPR certified is an effective response and increases chance of survival until a CERT member or EMS arrive on scene)
 - a. Place the person on their back on a firm flat surface.
 - b. Using 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 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. 100-120 compressions per minute, allowing the chest to rise fully between compressions.
 - d. If you are able and willing to provide rescue breaths, use a CPR barrier mask and provide 2 breaths after 30 compressions.
 - e. Continue compressions until help arrives.
6. School administrators or office staff should follow communication procedures within the crisis management plan for placing the school in a **"hold"** for medical emergency, and alert CERT using a two-way communication system to the location of the medical emergency.
7. CERT members should report to the emergency location and respond based on roles and responsibilities assigned, ensuring CPR certified staff remain on scene and additional staff are securing the location and available at entry points to quickly direct EMS personnel to the scene.
8. When the AED arrives, turn the device on immediately.
9. 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. Continue CPR, rotating staff doing chest compressions as needed, until the person becomes responsive, or EMS takes over.
10. Transfer care to EMS upon arrival reporting the time the unresponsive person was found and when CPR began.
11. A CERT member should be designated to document the emergency, noting the time the event began, when CPR was initiated, when and if the AED delivered a shock, the time EMS arrived on scene and assumed control of the emergency response, and the person's condition when care was transferred to EMS.
12. Following the communication procedures outlined in the building's crisis management plan, a school administrator or office staff should notify emergency contacts for the unresponsive person.
13. Medical providers evaluating the person following the emergency response may request information about what the person was doing at the time of the event as well as retrieval of data from the AED to determine proper treatment. EMS personnel may request that the school send the AED with the person to the hospital. Schools should have a plan for returning the AED back to campus.
14. CERT members should allow for time following the event to debrief the outcome of the cardiac emergency and complete an after-action review to identify successes and areas for improving future emergency medical response, updating plans and protocols accordingly. School boards are required to annually review and evaluate the effectiveness of the plan.
15. Develop a plan for supporting staff and/or student mental health needs following their participation in or observation of a medical emergency response on campus. The plan may include staff support through the Employee Assistance Program (EAP) or the Regional Crisis Response Team ([MDE Crisis Management Policy, 2024](#)). Staff may also engage with school-employed mental health professionals to evaluate post-event trauma and identify students who may need additional care and support following the emergency event.

Legal References

Minnesota Statutes 2025, section 121A.241 [Cardiac Emergency Response Plan](#)
Minnesota Statutes 2025, section 120B.236 [Cardiopulmonary Resuscitation and Automatic External Defibrillator Instruction](#)
Minnesota Statutes 2025, section 121A.035 [Crisis Management Policy](#)
Minnesota Statutes 2025, section 403.51 [Automatic External Defibrillation; Registration](#)
Minnesota Statutes 2025, section 604A.01 [Good Samaritan Law](#)

Acknowledgements

Minnesota Department of Education
Equity, Diversity, and Inclusion Center Healthy and Supportive Schools Team School Health Services

Minnesota Department of Education
Equity, Diversity, and Inclusion Center Healthy and Supportive Schools Team Crisis Management Team

Minnesota Department of Health
Maternal and Child Health Section Adolescent and School Health Unit School Health Services

American Heart Association - Minnesota
Eagan, MN

Project ADAM Minnesota
The Children's Heart Clinic / Children's Minnesota

i American Heart Association. (2023). Cardiac emergency response planning for schools: A policy statement 2023. <https://www.heart.org/-/media/Files/About-Us/Policy-Research/Policy-Positions/CPR-and-AED/Cardiac-Emergency-Planning-for-Schools.pdf>

ii Harmon, K. G., Asif, I. M., Maleszewski, J. J., Owens, D. S., Prutkin, J. M., Salerno, J. C., Zigman, M. L., Ellenbogen, R., Rao, A. L., Ackerman, M. J., & Drezner, J. A. (2015). Incidence, cause, and comparative frequency of sudden cardiac death in National Collegiate Athletic Association athletes: A decade in review. *Circulation*, 132(1), 10-19. <https://doi.org/10.1161/CIRCULATIONAHA.115.015431>

iii Parent Heart Watch. (2023). Out-of-hospital cardiac arrest in youth. Estimated from various sources. <https://parentheartwatch.org/resources/incidence-of-sca-in-youth/>

iv Sasson, C., Rogers, M. A., Dahl, J., Kellermann, A. L. (2010). Predictors of survival from out-of-hospital cardiac arrest: A systematic review and meta-analysis. *Circ Cardiovasc Qual Outcomes*, 3(1):63-81. <https://doi.org/10.1161/circoutcomes.109.889576>

v Weisfeldt, M. L., Sitlani, C. M., Ornato, J. P., Rea, T., Aufderheide, T. P., Davis, D., Dreyer, J., Hess, E. P., Jui, J., Maloney, J., Sopko, G., Powell, J., Nichol, G., Morrison, L. J., & ROC Investigators (2010). Survival after application of automatic external defibrillators before arrival of the emergency medical system: Evaluation in the resuscitation outcomes consortium population of 21 million. *Journal of the American College of Cardiology*, 55(16), 1713–1720. <https://doi.org/10.1016/j.jacc.2009.11.077>

vi American Heart Association. (2025). Cardiac emergency response plan and protocol. https://cpr.heart.org/en/-/media/CPR-Files/Training-Programs/2025-CERP/Cardiac-Emergency-Response-Plan-and-Protocol042025.pdf?sc_lang=en

vii Evans S, Legg M. (2024). Cardiac emergency response plan: Is your school prepared? *NASN School Nurse*, 39(4):175-180. <https://doi.org/10.1177/1942602X231201087>

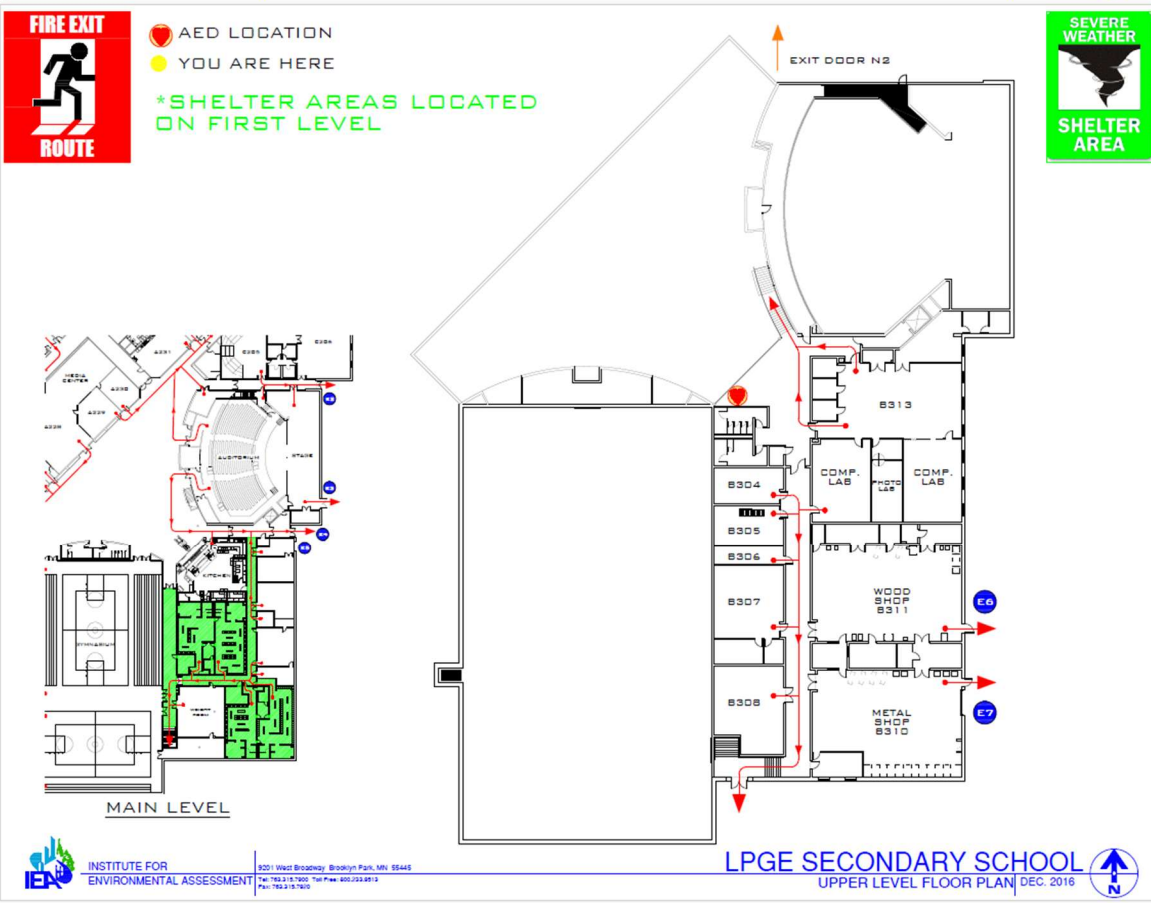
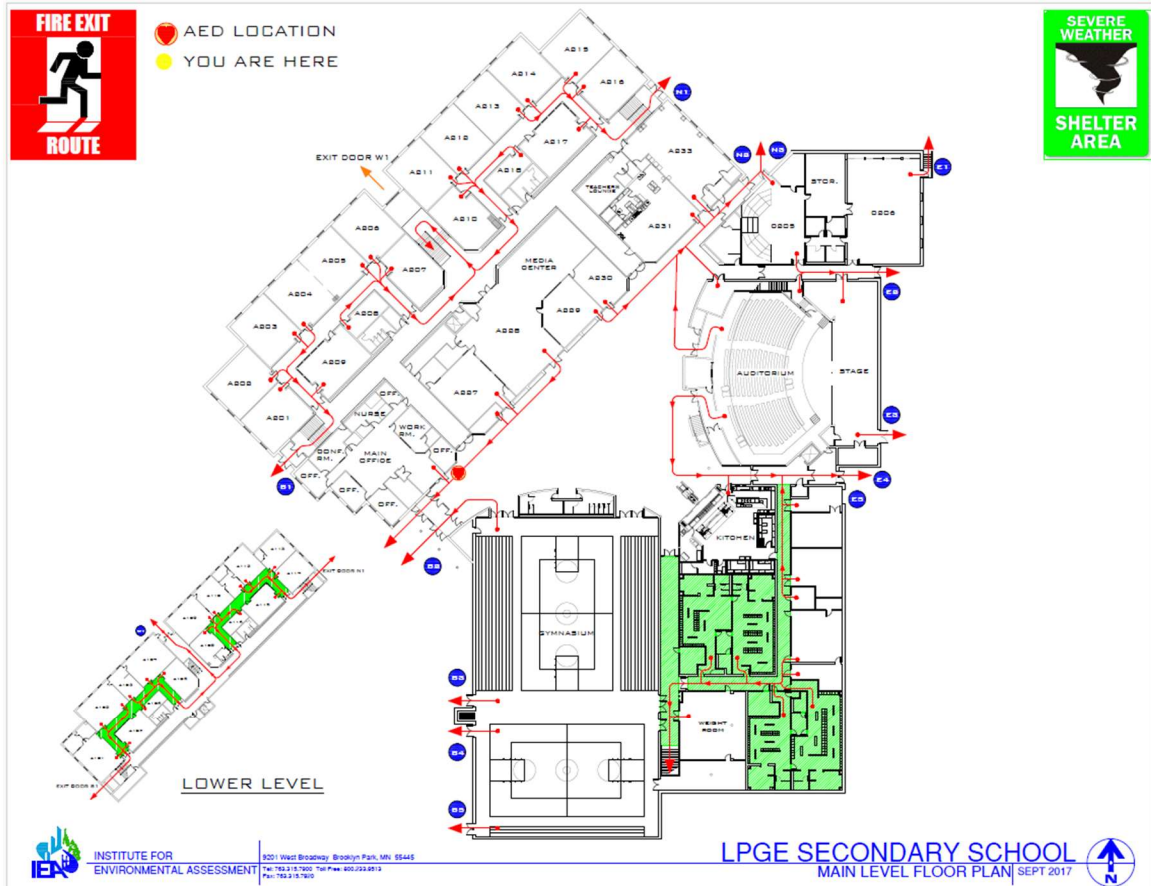
Appendix A - Cardiac Emergency Response Team

Building Name: LPGE Elementary School
Building Address: 205 2nd Street S., Long Prairie, MN
Closest Medical Facility: CentraCare Health, Long Prairie, MN

Staff Name	Staff Title	Role
Melissa Meagher	BAN, RN, LSN	Licensed School Nurse- Site Champion Wheelchair & Emergency Bag
Heather Luebesmier	LPN	First Responder Wheelchair & Emergency Bag
Christy Kuhl	Health Assistant	First Responder Wheelchair & Emergency Bag
Jessica Richter	Paraprofessional	First Responder AED/Narcan/EpiPen
Dustin Bless	Paraprofessional	First Responder AED/Narcan/EpiPen
Tara Wojtowicz	Paraprofessional	First Responder Recorder/Caller
Nora Carrillo	SLPA	First Responder Recorder/Caller

Coaches and activity supervisors are advised to consider the nearest medical facility while attending events and activities away from school grounds.

Appendix B Map of Secondary AED Locations



Appendix C

AED Maintenance Checklist

Automated External Defibrillator (AED) maintenance, compliance, and documentation for the district are managed through LifeLine, an external oversight provider. LifeLine ensures that all required elements of the AED program are current and compliant, including physician prescriptions and standing orders, battery and pad tracking and replacement, maintenance logs, software updates, and documentation of trained personnel.

In alignment with federal, state, and local regulations, LifeLine provides centralized oversight and organization of all AED-related records. Documentation is maintained in a secure, web-based portal accessible 24 hours a day, 7 days a week, ensuring records are current and readily available.

The Licensed School Nurse (LSN) and Licensed Practical Nurse (LPN) receive automated monthly reminders to conduct AED inspections. During these inspections, each AED is checked and its status verified in the LifeLine system. If an AED is identified as not in proper working order, this is documented in the system, triggering follow-up by LifeLine. LifeLine coordinates corrective actions, including repair or replacement of pads, batteries, or units, as needed and with district approval.

AED Monthly Maintenance Log

REFER TO YOUR AED MANUFACTURER'S MAINTENANCE RECOMMENDATIONS

Defibrillator Unit Make/Model: _____ School/Location: _____ Unit Serial Number: _____

*AED Unit Batteries are replaced every (X) years depending on your AED manufacturer's recommendations

INSTRUCTION	RECOMMENDED/ CORRECTIVE ACTION													
		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
1. Check readiness display for: <ul style="list-style-type: none"> • Insert specific characteristics of school AED unit • Example: Green check mark indicator 														
2. Check and note expiration date on electrode pads: <ul style="list-style-type: none"> • Adult: • Peds (if applicable): 														
3. Check additional supplies: <ul style="list-style-type: none"> • Extra Adult Pads (if applicable) • CPR Rescue Kit present and intact: scissors, airway barrier, razor, gloves, antiseptic 														
4. Examine the AED, case, cables and connectors for: <ul style="list-style-type: none"> • Damage or Cracks • Foreign Substances 														
5. Wall cabinet: <ul style="list-style-type: none"> • Case is intact, no tampering has been noted • Alarm battery (if applicable) 														

AED Maintenance Inspectors Initials/Signature: _____ AED Maintenance Inspectors Initials/Signature: _____

Project ADAM National, Updated 05.2024

For an up-to-date version, please visit www.projectadam.com/heartsafeschools

Appendix D

CERP Training and Certification Logs

Staff Name, Position, and Date: Training Logs or Certificates are located
in the following pages, or they are located at:

<https://docs.google.com/spreadsheets/d/100tflQg595OsBaiChCeD6NYruuCd-cA8cJLWFRHs0/edit?usp=sharing>

Appendix E Annual Drill Logs

LPGE Red Team and Drill Information-

https://docs.google.com/document/d/1vcanKlcj92ziJHa_uNaLQh013MzkEH4p7A7I3qhBzdY/edit?usp=sharing

Latest Form Available from:

https://projectadam.com/ProjectADAM/Drill-Checklist_0324_FINAL.pdf

Drill Checklist

Directions: Utilize this checklist to ensure your team implements the core elements of a drill.

Goal: The AED is applied and used within 3 minutes.

Date/Time: _____ **School:** _____ **Drill Location:** _____

The drill starts when the finder discovers the victim. The recorder starts the timer once this happens. Document times for each of these response actions:

	TIME
> DISCOVERY OF THE VICTIM TO OVERHEAD DRILL ANNOUNCEMENT	
> CPR STARTED	
> AED ARRIVED AT THE SCENE	
> AED SHOCK DELIVERED	

RESPONSE ACTION	YES	NO
Victim unresponsiveness was determined		
Office was notified		
Cardiac Emergency Response Team was notified		
EMS/911 was called		
Cardiac Emergency Response Team arrived		
Possible SCA identified and CPR was started immediately		
AED arrived at the scene		
AED pads were placed appropriately and immediately on the victim's bare chest		
Team followed all prompts from the AED		
Team used proper CPR body mechanics throughout response		
Use of school's chosen CPR barrier device		
Someone met and directed EMS		
Crowd control took place		
Office obtained necessary information for EMS call		
Drill was completed in our goal time of under 3 minutes "Completed" meaning AED was applied and used within 3 minutes. Drill can continue through cycles of AED use & compressions to practice switching roles.		
If drill was not completed within the goal time of under 3 minutes, please document completion time.		

Appendix F: Resources for Schools

Table 1: Additional resources for school’s cardiac emergency response planning.

Organization	Provided Resource	Web Address
American Heart Association	Implementation guide to assist with developing action plans, practice drills, and evaluation materials including a school checklist	https://cpr.heart.org/en/training-programs/cardiac-emergency-response-plan-cerp
Project ADAM Minnesota	Free assistance in creation and implementation of a practiced CERP	https://www.childrensmn.org/services/care-specialties-departments/cardiovascular-program/conditions-and-services/project-adam/
Parent Heart Watch	Toolkit templates and trainings for school and athletic staff, and programs providing AEDs to schools	https://parentheartwatch.org/resources/sca-prevention/cardiac-emergency-response-plan/ https://parentheartwatch.org/programs/get-charged-up/
Sudden Cardiac Arrest Foundation	National funding resources for AEDs and school-based CPR/AED education programs	https://www.sca-aware.org/campus/funding-sources-for-schools

Planning and Evaluation of the CERP Program

Project ADAM resources. Adapted from Project ADAM National resources; for additional resources please visit www.projectadam.com/Heartsafeschools.