Cardiac Emergency Response Plan

Rockford Area Schools
Revised August 2026
Adopted by the Rockford Area Schools Board of Education September 2026

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 vi. 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, and direct hit to the chest.

Forming a Cardiac Emergency Response Team
We will establish teams annually at each or our school sites

Members of each building's Cardiac Emergency Response Team:

REAMS

Staff Name	CPR/AED Certification Date
Brenda Nyhus	08/18/26
Heather Simonson	08/18/26 (BLS)
Darren Eliason	08/18/26
Allison Leistico	08/18/26
Katie Reynolds	02/13/26
Michelle Herou	08/18/26
Aaron Rickart	08/18/26
Stephanie Reichert	08/18/26
Grace McCoy	08/18/26

RMS

Staff Name	CPR/AED Certification Date
Paul Warzecha	08/18/26
Lindsey Menard	08/18/26 (BLS)

Christa Larson	08/18/26
Joe Roelofs	08/18/26
Molly Wirth	08/18/26
Ellie Engstrom	
Stacey Robertson	08/18/26
Monica Palmer	08/18/26
Jason Hester	
Howie Brooks	08/18/26

RHS

Staff Name	CPR/AED Certification Date
Paul Menard	08/18/26
Becca Morgan	08/18/26 (BLS)
Angelica Swanson	08/18/26
Joe Kley	08/18/26
Samantha Bloom	08/18/26
Jill Gordee	08/18/26
Denise Engebretson	08/18/26
Aimee Roehl	08/18/26
Jake Roh	
Olivia Koskela	08/18/26

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.

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.

Rockford Area Schools have 13 AEDs. The location of the stationary AEDs at the 3 school buildings are:

REAMS
Elementary commons, outside of middle gymnasium doors
RMS
Outside of the District Office
In the gymnasium
RHS
Outside of the auditorium, by the 3rd hallway entrance
Outside of the gymnasium in the commons area
Across from the athletic trainer's office
In the Rockford Community Center, behind the desk

Outdoor Campus

Middle school ball field area: Placement would be on the Building centrally located to the soccer field and north of the two MS baseball fields

Pinwheel area: covering Softball and Soccer field north of the Stadium.

Baseball Stadium: Location on the back of the Home dugout.

Football/Track Stadium: on Concession stand either on the north side or northeast section of the stand.

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).

AEDs will be checked monthly by the school nurses at each building. A tracking sheet is used to document each check. The District Nurse will also collaborate with HeartSafe of Allina Clinic to assure that expiration dates are being honored and new parts/batteries are being purchased as needed.

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.

The stationary AEDs at Rockford Area Schools are registered through the PulsePoint Foundation. There is also signage at each building to assist in the location of the AEDs to the public.

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.

Information regarding the CERP can be found by QR code found near each AED and by accessing the safety plans in the Rockford Area School's red emergency binders

Integration of Local Emergency Medical Services with the School Plan Training for CPR and AED Use

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

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

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. 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

All CERT/Blue Team members will be CPR/AED/First Aid certified. Training will occur every two years on-site by HeartCert.

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.

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
    d. 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 emergencies, 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. MDE Model Cardiac Emergency Response Plan 11

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 their 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 Model Crisis Management Policy, 2024). Staff may also engage with school-employed mental health professionals to evaluate postevent trauma and identify students who may need additional care and support following the emergency event.