SREMS COUNCIL
Susquehanna Regional EMS Council, Inc.
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Public Access Defibrillation (PAD) Program for Corporations and Organizations

Instituting a New PAD Program

This packet is a basic guide to starting your PAD program. If you have questions after reading the materials, contact the SREMS Program Agency at 607-699-1367.

Getting Started Checklist

1. ___Determine the feasibility of the program
   a. Do you have sufficient resources to purchase an AED and train providers? An AED can cost from $1500 to over $3000. Check current prices online. Some organizations offer free training, but others charge for training.
   b. Do you have management support of the program?
   c. Do you have personnel or volunteers willing to be trained to use the AED?
2. ___Read through this packet.
3. ___Select equipment. Check to ensure your AED is approved by the FDA at https://www.fda.gov/medical-devices/cardiovascular-devices/automated-external-defibrillators-aeds#approved
4. ___Find a training (list of local training is attached).
5. ___Find an Emergency Health Care Provider (EHCP). Call the Program Agency if you need assistance.
6. ___Develop a policy and procedures document for the program.
7. ___Complete the PAD form and the collaborative agreement with your EHCP.
8. ___Purchase equipment and complete training.
9. ___Send a copy of the PAD form and collaborative agreement to the Program Agency by mail or email to director@srems.com.

Information and forms are also available at https://www.srems.com/resources/public-access-defibrillation-pad/.

New York State
Department of Health
Bureau of Emergency Medical Services

POLICY STATEMENT

Supercedes/Updates: 98-10, 06-03, 07-04

No. 09-03

Date: March 6, 2009

Re: Public Access Defibrillation

The purpose of this policy is to assist a person, firm, organization or other entity in understanding the notification process for operating an automated external defibrillator pursuant to a collaborative agreement under the provisions of Chapter 552 of the Laws of 1998 authorizing Public Access Defibrillation. A Public Access Defibrillation (PAD) program is designed to encourage greater acquisition, deployment and use of automatic external defibrillators (AED) in communities around the state in an effort to reduce the numbers of deaths associated with sudden cardiac arrest. Since the enabling legislation's inception, there have been 4,889 PAD programs established, with over 156,167 people trained and 21,692 AED machines in public sites across the state. This program has been successful in saving many lives all across New York State.

At present, the following facilities or organizations must have trained providers and an AED on site:

- Public schools (§ 1 of the Education Law);
- State owned public buildings (Title 9 of Executive Law Subtitle G§ 303.1);
- Health clubs with a membership of greater than 500 people (General Business Law § 627-A);
- Public gathering locations (PHL § 225–5(b)), and
- Public surf beaches with lifeguards (PHL § 225–5(c)).

To be authorized to use an AED under this statute an individual or organization needs to make specific notification of intent to establish a PAD program to the appropriate Regional Emergency Medical Services Council (REMSCO) and the New York State Department of Health (DOH).

There are no approvals or certifications required.

Public Access Defibrillation Program Requirements

Original Notification Process

To be authorized to have a PAD program and utilize an AED, the following steps must be completed:

- Identify a New York State licensed physician or New York State based hospital knowledgeable and experienced in emergency cardiac care to serve as Emergency Health Care Provider (EHCP) to participate in a collaborative agreement;

- Select an AED that is in compliance with the Article 30, section 3000-B (1)(A). The AED must be programmed to the current Emergency Cardiovascular Care (ECC) Guidelines, capable of defibrillating both adult and pediatric patients. Please check the shaded box on the Notice of Intent to Provide PAD (DOH-4135) if the machine is approved for pediatric use;

- Select and use a SEMAC/DOH approved PAD training course for AED users. At present, the 12 approved programs are as follows:

American Heart Association
American Red Cross
American Safety & Health Institute
Emergency Care and Safety Institute
Emergency First Response
Emergency Services Institute
EMS Safety Service, Inc
Emergency University
Medic First Aid International
National Safety Council
REMSCO of NYC, Inc
State University of NY
Wilderness Medical Associates

- Develop with the EHCP, a written collaborative agreement which shall include, but not be limited to the following items:

    - Written practice protocols for the use of the AED;
    - Written policies and procedures which include;
        - Training requirements for AED users;
        - A process for the immediate notification of EMS by calling of 911;
        - A process for identification of the location of the AED units;
        - A process for routine inspection of the AED unit(s) as well as regular maintenance and which meet or exceed manufacturers recommendations;
        - Incident documentation requirements, and
        - Participation in a regionally approved quality improvement program.

- Provide written notice to the 911 and/or the community equivalent ambulance dispatch entity of the availability of AED service at the organization's location;

- File the Notice of Intent (NOI) to Provide PAD (DOH 4135) and a signed Collaborative Agreement with the appropriate Regional Emergency Medical Services Council (REMSCO), and

- File a new NOI and Collaborative Agreement with the REMSCO if the EHCP changes.

Reporting a PAD AED Use

In the event that the PAD program uses the AED to defibrillate a person, the program must report the incident to the appropriate REMSCO. The REMSCO may request additional information regarding the incident, but the PAD must report, at a minimum, the following information:

- Provide written notification of AED usage to the REMSCO within 48 hours of the incident;
- The name of the PAD program;
- Location of the incident;
- The date and time of the incident;
- The age and gender of the patient;
- Estimated time from arrest to CPR and the 1st AED shock;
- The number of shocks administered to the patient:
- The name of the EMS agency that responded, and
- The hospital to which the patient was transported.

A copy of the usage report should also be provided to the EHCP.

Regional EMS Council Responsibility in Public Access Defibrillation

Each REMSCO is responsible for receiving and maintaining notification and utilization documentation. The REMSCOs must develop and implement the following policies and procedures:

- Insure that a copy of each new or updated Notice of Intent (DOH 4135) is forwarded to the Bureau of EMS;
- Maintain a copy of the Notice of Intent and the Collaborative Agreement;
- Collect utilization documentation and information;
- Provide detailed quarterly reports to the DOH on PAD programs in the region, and
- Develop Quality Assurance participation, data submission and documentation requirements for participating organizations.

Data Collection Requirements

REMSCO quality improvement programs are encouraged to use the data elements from the Utstein Guidelines for Prehospital Cardiac Arrest Research (Cumming RO, Chamberlain DA, Abramson NS, et al, Circulation 1991; 84:960-975).

The following minimum data set is to be developed and collected as a part of the regional PAD QI process. A copy of the data set is to be provided by each region to the DOH Bureau of EMS quarterly:

- Name of organization providing PAD;
- Date of incident;
- Time of Incident;
- Patient age;
- Patient gender;
- Estimated time from arrest to 1st AED shock;
- Estimated Time from arrest to CPR;
- Number of shocks administered to the patient;
- Transport ambulance service, and
- Patient outcome at incident site (remained unresponsive, became responsive, etc).

Ambulance and ALS First Response Services

Ambulance or ALSFR services may not participate in PAD programs for emergency response. Certified EMS agencies must apply for authority to equip and utilize AEDs through their local Regional Emergency Medical Advisory Committee (REMAC).

Please note that the Prehospital Care Report (PCR) has a check box for EMS providers to indicate that a patient has been defibrillated prior to EMS arrival by a community or by-stander PAD provider. Documenting this information is required so that the DOH may monitor the effectiveness of these community based programs

Attachments

1. Notice of Intent to Provide Public Access Defibrillation
2. Regional EMS Council Listing

[Page 4 has been replaced with the updated PAD form. Page 5 is an out-of-date listing of regional councils and has been deleted.]

NEW YORK STATE DEPARTMENT OF HEALTH
Bureau of Emergency Medical Services and Trauma Services

Notice of Intent to Provide Public Access Defibrillation

Original Notification ☐ Update ☐

Entity Providing PAD

Name of Organization	Agency Code	( ) Telephone Number
Name of Primary Contact Person		E-Mail Address
Address City State Zip		( ) Fax Number

Type of Entity (please check the appropriate boxes)

☐	Ambulance	☐	Restaurant	☐	Private School
☐	Business	☐	Fire Department/District	☐	College/University
☐	Construction Company	☐	Police Department	☐	Physician's Office
☐	Health Club/Gym	☐	Local Municipal Government	☐	Dental Office or Clinic
☐	Recreational Facility	☐	County Government	☐	Adult Care Facility
☐	Industrial Setting	☐	State Government	☐	Mental Health Office or Clinic
☐	Retail Setting	☐	Public Utilities	☐	Other Medical Facility (specify)
☐	Transportation Hub	☐	Public School K – 12	☐	Other (specify)

PAD Training Program CPR AED training program must meet or exceed current ECC Standards.

Automated External Defibrillator

Manufacturer of AED Unit		Is the AED Pediatric Capable? ☐ Yes ☐ No	Number of Trained PAD Providers	Number of AEDs

Emergency Health Care Provider

Name of Emergency Health Care Provider (Hospital or Physician)	Physician NYS License Number	( ) Telephone Number
Address City State Zip		( ) Fax Number

Name of Ambulance Service and 911 Dispatch Center

Name of Ambulance Service and Contact Person	( ) Telephone Number
Name of 911 Dispatch Center and Contact Person	County

Authorization Names and Signatures

CEO or Designee (Please print)	Signature	Date
Physician or Hospital Representative (Please print)	Signature	Date

 Send completed form and Collaborative Agreement to the REMSCO in your area.

PUBLIC ACCESS DEFIBRILLATION AGENCY COLLABORATIVE AGREEMENT

(Pursuant to § 3000-B, New York State Public Health Law, As Amended by Chapter 552 of the Laws of 1998)

AGREEMENT made as of the ____ day of _____, _____ by and between _____ (hereinafter referred to as the "AGENCY"), and _____ (hereinafter referred to as the “EMERGENCY HEALTHCARE PROVIDER”).

WITNESSETH:

WHEREAS, the American Heart Association, in collaboration with other national authorities, has developed the “Chain of Survival” model of optimal response to an out-of-hospital cardiac arrest emergency, which includes as its four components: Early Access, Early Cardiopulmonary Resuscitation, Early Defibrillation, and Early Advanced Life Support; and

WHEREAS, the AGENCY is desirous of strengthening the Chain of Survival within its community/facility through the provision of Early Defibrillation under the Public Access Defibrillation provision of the New York State Public Health Law; and

WHEREAS, the EMERGENCY HEALTHCARE PROVIDER, as a medical professional, is desirous of extending the benefits of Early Defibrillation to as many persons as feasible, through the participation of as many qualified agencies as practical in Public Access Defibrillation programs;

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

1. The undersigned EMERGENCY HEALTHCARE PROVIDER agrees to serve, subject to the AGENCY’S continued compliance with all provisions of this agreement, as the Emergency Health Care Provider for the AGENCY’S Public Access Defibrillation program, as defined in § 3000-B 1. (B) of the New York State Public Health Law.
2. The AGENCY will, at its own expense or through its own resources, purchase and maintain in full accordance with its manufacturer’s recommendations, one or more automated external defibrillators (AEDs), as defined in § 3000-B 1. (A) of the New York State Public Health Law.
3. The AGENCY will maintain its AED(s) in use-ready condition, at all times, at a location or locations which is (are) known to all members, employees, or affiliates who are to be involved in the provision of early defibrillation under this agreement. The AGENCY will also maintain, at a minimum, with each AED, the necessary equipment for body substance isolation during the provision of cardiopulmonary resuscitation (disposable medical examination gloves in appropriate sizes, and a “pocket” resuscitation mask or bag-valve-mask device for the respiratory ventilation of adult victims).
4. The AGENCY will provide or procure for all of its members, employees, or affiliates who are to be involved in the provision of early defibrillation under this agreement, formal training in automated external defibrillation pursuant to a curriculum approved by the New York State Emergency Medical Services Council for this purpose. The curriculum selected for use under this agreement will be the Automated External Defibrillation course of the _____.
   (nationally-recognized training organization)
5. The AGENCY will use, as its sole treatment protocol with respect to the Public Access Defibrillation program governed by this agreement, the Automated External Defibrillation Protocol presented in the training materials of the above-referenced national training organization.
6. The AGENCY will assure that only those members, employees, or affiliates who have successfully completed training as specified in Item 3, above, are permitted to operate an AED within the scope of the Public Access Defibrillation program governed by this agreement.
7. The AGENCY will assure that the community’s Emergency Medical Services (EMS) System is immediately activated for response to any person on whom the AGENCY’s members, employees, or affiliates use or attempt to use its AED. This will be accomplished by dialing 9-1-1, and requesting EMS response, at the earliest possible moment after the discovery of a medical emergency.

8. The AGENCY will abide by all standards of continuing and in-service education and practice required by the EMERGENCY HEALTHCARE PROVIDER, and will require its members, employees, or affiliates to complete any and all classes or training sessions which may be required by the EMERGENCY HEALTHCARE PROVIDER. This will include, at a minimum, biennial re-qualification on the AED through an approved program. Complete records of such re-qualification will be kept and maintained for a period determined by law and good practices by the AGENCY. At the time of biennial re-qualifications, the AGENCY will complete an updated Notice of Intent (DOH 4135) and submit a copy to Susquehanna Regional EMS Council at 311 Exchange Avenue, 2nd Floor Unit 2, Endicott, NY 13760.
9. The AGENCY will assure that the operator of the AED in any instance in which the AED has been connected to a person completes the Case Report Form (available at SREMS.com), with respect to that instance, and records thereon, at a minimum, the following information:
    - The name of the AGENCY.
    - The date of the incident.
    - The time of the incident.
    - The age of the victim.
    - The sex of the victim.
    - The estimated time from the onset of cardiac arrest until the first shock from the AED was given.
    - The estimated time from the onset of cardiac arrest until cardiopulmonary resuscitation was begun.
    - The total number of shocks administered to the patient via the AGENCY's AED.
    - The name of the ambulance service transporting the patient from the incident scene.
    - The status of the patient when he/she was transported from the scene (continued cardiac arrest, spontaneous pulse present, unresponsive, responsive, etc.)
10. The AGENCY will assure that the completed Case Report Form is sent in a timely manner to the EMERGENCY HEALTHCARE PROVIDER. Case Report Forms shall be maintained by the AGENCY.
11. The AGENCY shall participate in all Quality Assurance/Quality Improvement activities required by the EMERGENCY HEALTHCARE PROVIDER. This shall consist, at a minimum, of review by the EMERGENCY HEALTHCARE PROVIDER or his/her agent of the Case Report Form. The EMERGENCY HEALTHCARE PROVIDER or his/her agent, after completion of such review, shall issue a written or verbal communication to the AGENCY outlining the results or findings of the review if he/she deems it necessary.
12. At the request of the EMERGENCY HEALTHCARE PROVIDER or his/her agent, the AGENCY shall make available in a timely manner for a review meeting any and all of its members, employees, or affiliates who were involved in the use or attempted use of the AED on a person.

IN WITNESS HEREOF, the parties hereto have duly executed this AGREEMENT as of the day and year first written above.

For the AGENCY:

By:_____
Chief Executive Officer of the AGENCY

_____
Printed Name

_____
Title of CEO of the AGENCY

EMERGENCY HEALTHCARE PROVIDER:

By: _____
EMERGENCY HEALTHCARE PROVIDER

_____
Printed Name

_____
Title of Signer

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PUBLIC ACCESS DEFIBRILLATION CASE REPORT

Complete this form or enter online at https://forms.gle/YKGgT7hohNuG75Mg8

Name of PAD Agency: _____

Date of Incident: _____ Time of Incident: _____ ☐ AM ☐ PM

Location (Address) of Incident: _____

_____

Location within Building/Facility: _____

Victim Information: Age: _____ Sex:_____

AED Operator: ☐Member/Employee ☐Licensed/Certified Healthcare Provider ☐Layperson

Name of Ambulance Service Transporting Victim: _____

Patient Response to AED Treatment:
☐Unknown ☐Continued cardiac arrest ☐Victim became responsive ☐Victim Deceased
☐Spontaneous return of pulse ☐Spontaneous return of pulse and respirations

Hospital Patient was Transported to: _____

Minutes from Collapse to CPR _____ Minutes to Shock_____ # of Shocks _____

Brief Description of Incident: _____

_____

_____

_____

_____

_____

_____

_____ _____
Report Completed By (Name) Title Date/Time

Fax completed report to (607) 397-2728, or mail to address above.

Finding AED Training

American Red Cross

https://www.redcross.org/take-a-class/aed/aed-training/aed-certification

YMCA (using American Safety and Health Institute)

https://ymcabroome.org/main/cpr-first-aid-training/

Abell Safety Training (using American Safety and Health Institute) https://

www.abellsafety.com/index.html

Or contact your local EMS Agency. There is a list here:

https://www.srems.com/agencies-in-the-susquehanna-region/

Updated 02-13-24

New York State Law Chapter 45 Public Health

SECTION 3000-A

Emergency medical treatment

Public Health (PBH) CHAPTER 45, ARTICLE 30

§ 3000-a. Emergency medical treatment. 1. Except as provided in subdivision six of section six thousand six hundred eleven, subdivision two of section six thousand five hundred twenty-seven, subdivision one of section six thousand nine hundred nine and sections six thousand five hundred forty-seven and six thousand seven hundred thirty-seven of the education law, any person who voluntarily and without expectation of monetary compensation renders first aid or emergency treatment at the scene of an accident or other emergency outside a hospital, doctor's office or any other place having proper and necessary medical equipment, to a person who is unconscious, ill, or injured, shall not be liable for damages for injuries alleged to have been sustained by such person or for damages for the death of such person alleged to have occurred by reason of an act or omission in the rendering of such emergency treatment unless it is established that such injuries were or such death was caused by gross negligence on the part of such person. Nothing in this section shall be deemed or construed to relieve a licensed physician, dentist, nurse, physical therapist or registered physician's assistant from liability for damages for injuries or death caused by an act or omission on the part of such person while rendering professional services in the normal and ordinary course of his or her practice.

2. (i) Any person or entity that purchases, operates, facilitates implementation or makes available resuscitation equipment that facilitates first aid, an automated external defibrillator or an epinephrine auto-injector device as required by or pursuant to law or local law, or that conducts training under section three thousand-c of this article, or (ii) an emergency health care provider under a collaborative agreement pursuant to section three thousand-b of this article with respect to an automated external defibrillator, or (iii) a health care practitioner that prescribes, dispenses or provides an epinephrine auto-injector device under section three thousand-c of this article, shall not be liable for damages arising either from the use of that equipment by a person who voluntarily and without expectation of monetary compensation renders first aid or emergency treatment at the scene of an accident or medical emergency, or from the use of defectively manufactured equipment; provided that this subdivision shall not limit the person's or entity's, the emergency health care provider's, or other health care practitioner's liability for his, her or its own negligence, gross negligence or intentional misconduct.

New York State Law Chapter 45 Public Health

SECTION 3000-B

Automated external defibrillators: Public access providers

Public Health (PBH) CHAPTER 45, ARTICLE 30

§ 3000-b. Automated external defibrillators: Public access providers.
1. Definitions. As used in this section, unless the context clearly requires otherwise, the following terms shall have the following meanings:

(a) "Automated external defibrillator" means a medical device, approved by the United States food and drug administration, that: (i) is capable of recognizing the presence or absence, in a patient, of ventricular fibrillation and rapid ventricular tachycardia; (ii) is capable of determining, without intervention by an operator, whether defibrillation should be performed on the patient; (iii) upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to the patient's heart; and (iv) then, upon action by an operator, delivers an appropriate electrical impulse to the patient's heart to perform defibrillation.

(b) "Emergency health care provider" means (i) a physician with knowledge and experience in the delivery of emergency cardiac care; (ii) a physician assistant or nurse practitioner with knowledge and experience in the delivery of emergency cardiac care, and who is acting within his or her scope of practice; or (iii) a hospital licensed under article twenty-eight of this chapter that provides emergency cardiac care.

(c) "Public access defibrillation provider" means a person, firm, organization or other entity possessing or operating an automated external defibrillator pursuant to a collaborative agreement under this section.

(d) "Nationally-recognized organization" means a national organization approved by the department for the purpose of training people in use of an automated external defibrillator.

2. Collaborative agreement. A person, firm, organization or other entity may purchase, acquire, possess and operate an automated external defibrillator pursuant to a collaborative agreement with an emergency health care provider. The collaborative agreement shall include a written agreement and written practice protocols, and policies and procedures that shall assure compliance with this section. The public access defibrillation provider shall file a copy of the collaborative agreement with the department and with the appropriate regional council prior to operating the automated external defibrillator.

3. Possession and operation of automated external defibrillator. Possession and operation of an automated external defibrillator by a public access defibrillation provider shall comply with the

following:

(a) No person may operate an automated external defibrillator unless the person has successfully completed a training course in the operation of an automated external defibrillator approved by a nationally-recognized organization or the state emergency medical services council. However, this section shall not prohibit operation of an automated external defibrillator, (i) by a health care practitioner licensed or certified under title VIII of the education law or a person certified under this article acting within his or her lawful scope of practice; (ii) by a person acting pursuant to a lawful prescription; or (iii) by a person who operates the automated external defibrillator other than as part of or incidental to his or her employment or regular duties, who is acting in good faith, with reasonable care, and without expectation of monetary compensation, to provide first aid that includes operation of an automated external defibrillator; nor shall this section limit any good Samaritan protections provided in section three thousand-a of this article.

(b) The public access defibrillation provider shall cause the automated external defibrillator to be maintained and tested according to applicable standards of the manufacturer and any appropriate government agency.

(c) The public access defibrillation provider shall notify the regional council of the existence, location and type of any automated external defibrillator it possesses.

(d) Every use of an automated external defibrillator on a patient shall be immediately reported to the appropriate local emergency medical services system, emergency communications center or emergency vehicle dispatch center as appropriate and promptly reported to the emergency health care provider.

(e) The emergency health care provider shall participate in the regional quality improvement program pursuant to subdivision one of section three thousand four-a of this article.

(f) The public access defibrillation provider shall post a sign or notice at the main entrance to the facility or building in which the automated external defibrillator is stored, indicating the location where any such automated external defibrillator is stored or maintained in such building or facility on a regular basis.

4. Application of other laws.

(a) Operation of an automated external defibrillator pursuant to this section shall be considered first aid or emergency treatment for the purpose of any statute relating to
liability.

(b) Operation of an automated external defibrillator pursuant to this section shall not constitute the unlawful practice of a profession under title VIII of the education law.