Administrative Procedure 318

RESPONDING TO UNEXPECTED HEALTH EMERGENCIES IN SCHOOLS

Purpose

This administrative procedure establishes procedures for the accessibility and maintenance of automated external defibrillators and naloxone kits in each school in a barrier-free, equitable and responsive manner that addresses the health and safety needs of the VSB school community. Establishing capacity for timely and effective responses to unexpected health emergencies is a key component to ensuring a safe school environment. Unexpected health emergency incidents require immediate action and 911 needs to be called. To improve survival outcomes, critical interventions should be initiated before emergency services arrive.

Definitions

Automated external defibrillators (AED): A medical device designed to analyze the heart rhythm and deliver an electric shock to restore the heartbeat to normal sinus rhythm.

Emergency Response Supplies and Equipment: Equipment and supplies that can be used in response to unexpected health emergencies. Emergency response equipment includes but is not limited to automated external defibrillators (AEDs) and naloxone.

First Aid Attendants: Staff members trained and certified to provide first aid services, above and beyond their normal daily duties, to support injuries and unexpected health emergencies. First aid attendants are in all schools.

Good Samaritan Act: British Columbian legislation that provides legal protection to individuals who render emergency medical services or aid to an ill, injured or unconscious persons at the immediate scene of an accident or emergency.

Naloxone Kit: An emergency kit containing a fast-acting antidote designed to quickly reverse the effects of an opioid overdose. Naloxone is safe for all ages and only works if there are opioids in the person's system. Naloxone cannot be improperly administered, nor does it create dependence. Naloxone works by blocking opioids from binding to brain receptors, thereby restoring normal breathing and consciousness.

Opioid Overdose: A situation where consumed opioids overwhelm the part of the brain that controls breathing, resulting in slowed or stopped breathing, and possible death, if not treated.

Unexpected Health Emergency: A sudden, life-threatening medical event requiring immediate intervention. Includes but is not limited to sudden cardiac arrest and opioid overdose.

Procedures

1. **Locations and Accessibility of Emergency Response Equipment**
   1.1. All VSB schools shall be equipped with emergency response equipment.
   1.2. AED units must be accessible, barrier-free, and positioned for rapid access to diverse users during unexpected health emergencies.
   1.3. Signage for AEDs must be standardized and visible to staff, students, and visitors.
   1.4. Naloxone kits must be accessible to site based First Aid Attendants.
   1.5. Where emergency response supplies and equipment are used by, or for, members of the public, the use is governed by the Good Samaritan Act.

2. **Maintenance**
   2.1 Each day that school is in session, the administrator or designate will verify that the AED unit(s) and naloxone kits are in place and available for use. The administrator or designate will, at the beginning of each school year, verify the expiration date of the naloxone kit. Any irregularities shall be reported to District Health and Safety.
   2.2 District Health and Safety will ensure periodic service of AEDs is completed by a qualified person.
   2.3 Expired, used, or damaged equipment must be reported to District Health and Safety and replaced promptly.

3. Training and Preparedness
   3.1 Information and instructions on the use of the AED and the administration of naloxone will be made available to First Aid Attendants.
   3.2 Staff must address unexpected health emergencies in a way that is non-stigmatizing and respects the privacy of individuals involved.

4. Reporting
   4.1 All unexpected health emergencies must be reported immediately to the school administrator and documented according to the applicable district incident reporting procedures.
   4.2 Post-incident reviews will be conducted by the administrator with support from the District Health and Safety team to identify any improvements in response and preparedness.

Reference:	Ministerial Order 149/89 (M149/89) Effective September 1, 1989 as amended by M198/25 Effective June 30, 2025.
Adopted:	February 5, 2020
Revised	December 15, 2021; December 17, 2025