



## Cover Memorandum

### Automated External Defibrillators, JHPD Directive #432

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#### **Purpose of the Directive**

The purpose of this Directive is to establish procedures and responsibilities regarding the use of Automated External Defibrillators (AEDs).

#### **Summary of Directive Requirements**

This Directive provides Johns Hopkins Police Department (JHPD) members with guidelines for using AEDs. The Directive focuses on the following core areas.

#### Training and Certification

All officers are required to be trained and certified in CPR, first aid, and AEDs prior to utilizing AED equipment. Training and certification will be coordinated by the Education & Training Division in accordance with Maryland regulations, including registering and receiving certification as required by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) and Maryland laws and regulations. All officers must undergo regular recertification on the use of the AED and may only use AED equipment that they have been trained to use.

#### Patrol Officer Responsibilities

The Directive sets forth the duties and responsibilities of officers who are assigned AEDs. The Directive guidelines cover AED care and maintenance, how to obtain and document AEDs at the beginning of each shift, where to stow the AEDs in the patrol vehicle, reporting and documentation requirements following the use of AEDs, returning the AED at the end of each shift, and reporting faulty equipment. The Directive also provides officers with guidance on what to do when responding to a possible cardiac arrest incident, including providing the proper notifications to the Communications Center and requesting EMS response, following AED protocols in accordance with the officer's training, when to refrain from using the AED (e.g., if the subject is immersed in water), and continuing to follow the AED protocol until relieved by EMS personnel.

#### Communications Center Responsibilities

The Directive also describes the responsibilities and duties of Johns Hopkins Public Safety (JHPS) Communications Center personnel when receiving a report of an unresponsive person or possible cardiac arrest incident. Personnel must dispatch the nearest available unit equipped with an AED to the scene, notify the Baltimore City Fire Department and request EMS to respond, and document the officer's arrival and AED application into the computer-aided dispatch system.

#### AED Project Coordinator Responsibilities

The Directive describes the designation of an AED Project Coordinator to oversee JHPD's AED program. The AED Project Coordinator's duties include: working with Education & Training to oversee training and

certification; reviewing all AED incident reports to ensure that AED protocol is being properly followed; inspecting AEDs; maintaining records of the maintenance, history, and use of each AED unit; ordering new AED equipment and related supplies as necessary; and submitting certain reports and notifications.

### **Blueprint for the Policy Development Process**

The draft JHPD policies (hereinafter referred to as “directives”) shared for community feedback are based on examples of 21st century best practices in public safety policy, identified through extensive benchmarking of university and municipal law enforcement agencies across the nation. Taken together, they represent a comprehensively progressive approach to policing that prioritizes equity, transparency, accountability, and community-based public safety strategies.

The JHPD’s draft directives embody approaches that community advocates and leading experts have championed locally and in law enforcement reform efforts across the nation. The draft directives have also been developed based on input received through robust community engagement in prior phases of JHPD development, including suggestions received in the legislative process as well as last fall’s Memorandum of Understanding (MOU) public comment period and feedback opportunities.

In addition, the directives were drafted to exceed the minimum requirements of the Constitution and laws of the United States and the State of Maryland, to align with the Community Safety and Strengthening Act (CSSA) and to fulfill the requirements of the MOU between the Johns Hopkins University and the Baltimore Police Department. The Hopkins community and our neighbors throughout Baltimore can help improve and strengthen these directives further through their feedback and input.

Material that was considered in the drafting of the Directive and Procedure Manual, include:

- a. **Publicly available policies from municipal police departments that have undergone substantial reform efforts**, including: the New Orleans Police Department; Seattle Police Department; Portland Police Department; Detroit Police Department; Ferguson Police Department; and Baltimore Police Department;
- b. **National guidance on best practices and model policies from criminal justice reform efforts, social science research centers, and civil rights organizations**, including: the Leadership Conference on Civil and Human Rights; American Civil Liberties Union (ACLU), including the ACLU of Massachusetts’s “Racially Just Policing: Model Policies for Colleges and Universities”; the International Association of Chiefs of Police (IACP); the Police Executive Research Forum (PERF); U.S. Department of Justice Office of Community Oriented Policing Services (COPS Office); The Justice Collaboratory (The JC) at Yale University Law School; and The Center for Innovation in Community Safety (CICS) at Georgetown Law School.
- c. **National and local higher education institutions that are based in comparable environments and make policies publicly available**, including: Carnegie Mellon University; Morgan State University; Towson University; University of Chicago; University of Cincinnati; University of Maryland, Baltimore County; University of Pennsylvania; and Yale University.

To ensure that the proposed directives captured national best practices in community-focused public safety services, the development team collaborated with independent experts from two organizations: National Policing Institute (the Institute), a non-profit dedicated to advancing excellence in policing through research and innovation, and 21CP Solutions, an expert consulting team of former law

enforcement personnel, academics, civil rights lawyers, and community leaders dedicated to advancing safe, fair, equitable, and inclusive public safety solutions. Each directive was reviewed by experts selected by both organizations, who provided feedback, suggestions, and edits that were fully incorporated into the current draft.

Finally, individuals and organizations representing the diversity of the Johns Hopkins University community provided feedback to ensure the policies and procedures reflect and respond to the values of our institution and to our community's public safety service needs.

Now they are available for your review. Johns Hopkins is committed to adopting, incorporating, or otherwise reflecting recommended changes and feedback in the final version of policies so long as feedback is aligned with our values and commitments, permissible within legal parameters, and supported by national best practices for community policing and public safety.



**POLICE DEPARTMENT**

**AUTOMATED  
EXTERNAL  
DEFIBRILLATORS**

**OPERATIONAL  
PROCEDURE #432**

Responsible Executive:  
Chief of Police  
Responsible Office:  
Vice President for Public Safety  
Approved by:  
Dr. Branville G. Bard, Jr.  
Issued: [full date]  
Revised: [full date]

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**Policy Statement**

Sudden cardiac arrest is a major cause of death in the United States. Abnormal heart rhythms cause most sudden cardiac arrests. A critical step in treating persons suffering from heart arrhythmia is the delivery of an electric shock (defibrillation) to the heart with the use of an Automated External Defibrillator (AED). It is the policy of the Johns Hopkins Police Department (JHPD) to respond quickly and safely to all reports of unresponsive persons and possible cardiac emergencies and to use the AED equipment as trained on all persons suffering from cardiac arrest, with the goal of reducing the mortality rate within the Johns Hopkins (JH) community due to sudden cardiac arrest.

**Who is Governed by this Policy**

This Directive governs all bureaus, sections and their members, including sworn, non-sworn and contractual or voluntary persons in service with JHPD.

**Purpose**

The purpose of this Directive is to establish procedures and responsibilities regarding the use of AEDs.

## Definitions

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<b>Automated External Defibrillator (AED)</b>	A medical heart monitor and defibrillator device that: <ul style="list-style-type: none"><li>• Has been cleared for market by the federal Food and Drug Administration,</li><li>• Can recognize the presence or absence of ventricular fibrillation or rapid ventricular tachycardia,</li><li>• Can determine, without intervention by an operator, whether defibrillation should be performed, and</li><li>• On determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart and: (1) requires operator intervention to deliver the electrical impulse; or (2) automatically continues with delivery of electrical impulse.</li></ul>
	(Code of Maryland Regulations, COMAR § 30.01.01.02)
<b>Cardiopulmonary Resuscitation (CPR)</b>	An emergency lifesaving procedure performed when the heart stops beating.
<b>Emergency Medical Services (EMS)</b>	Medical responders to emergencies, such as emergency medical technicians (EMTs) or paramedics.
<b>Member:</b>	All members of the JHPD, including employees, officers, and volunteers, unless the term is otherwise qualified (e.g., member of the public, member of the Baltimore Police Department, etc.).
<b>Officer:</b>	All sworn police officers, at any rank, as defined by MD Code, Public Safety, § 3-201, in service with the JHPD.

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## Policy

A critical step in treating persons suffering from a cardiac emergency is the use of an AED. JHPD officers will respond promptly to all reports of unresponsive persons and possible cardiac emergencies that occur within JHPD's jurisdiction and use AEDs with the goal of reducing the mortality rate within JHPD's jurisdictional area due to sudden cardiac arrest. Upon determining that a medical emergency necessitates the use of an AED, officers shall use the AED in accordance with their training and the provisions of this Directive.

## Procedures

### I. Training & Certification

All officers are required to successfully complete initial AED training before using an AED. The program will be implemented and administered in accordance with Maryland regulations, including registering and receiving certification as required by the Maryland

Institute for Emergency Medical Services Systems (MIEMSS) and Maryland laws and regulations.

- A. All officers are required to be trained and certified in cardiopulmonary resuscitation (CPR) and first aid prior to receiving AED training or using an AED.
- B. The Education & Training Division will be responsible for coordinating AED training and certification for all JHPD officers.
- C. All officers are required to successfully complete initial AED training and certification before using an AED. Initial training and certification will include the following, at a minimum:
  - Officers who have taken the Law Enforcement Emergency Medical Care Course (LEEMCC) will be trained and certified in the usage of AEDs during the initial LEEMCC certification course that includes the proper performance, application, and integration of CPR and the AED.
  - Non-LEEMCC trained personnel will be required to complete an initial training program in the proper performance, application, and integration of CPR and the AED, as approved by the Public Safety Training Section.
  - Initial certification programs will consist of both lectures and practical scenarios.
  - A written examination will be utilized to verify knowledge retention. Officers must achieve a passing score as established by the American Safety and Health Institute (ASHI).
  - A practical evaluation will be utilized to verify competency. Each officer must demonstrate competency by meeting established skills identified by the ASHI.
- D. All officers must undergo regular recertification on the use of the AED.
  - LEEMCC-certified officers are required to maintain current certification as LEEMCC providers. The four (4) hour LEEMCC/American Health and Safety Institute CPR/AED recertification course will be completed within **two (2) years** of initial certification and every two (2) years thereafter.
  - Non-LEEMCC trained personnel will be required to complete an **annual** training program in the performance, application, and integration of CPR and the AED.
- E. Officers may only use AED equipment that they have been trained to use.

## II. Patrol Officer Responsibilities

Patrol Officers who are trained in the use of AEDs shall:

- A. Be responsible for the care and maintenance of the AED unit and related equipment assigned to them.
- B. At the beginning of each shift, visually inspect the AED unit assigned to the patrol vehicle to verify it is in operating order and is equipped with a set of defibrillator pads.
  - Officers shall immediately report any observed damages or deficiencies to the unit to the Shift Supervisor.
  - If the assigned unit is inoperative, officers shall return it to the Quartermaster in exchange for an operational AED unit.
- C. Notify the Johns Hopkins Public Safety (JHPS) Communications Center at the beginning of each shift that they are carrying the AED unit. This will help Communications Center personnel know which officers to dispatch to incidents that may require an AED.
- D. Stow AED units in the passenger compartment or cargo area of the officer's assigned vehicle and secure the unit by a seatbelt or other appropriate manner.
  - AED units shall not be stowed in the trunk or on the floors of vehicles due to the unit's sensitivities to impact, moisture, and temperature.
- E. Respond to all medical emergencies, including reports of unresponsive persons and possible cardiac arrest incidents, in a safe and expeditious manner. Upon arriving at the scene, officers shall:
  - Remove the AED unit and related equipment from the police vehicle before their initial approach to the patient.
  - Notify the JHPS Communications Center of the officer's initial arrival at the scene, and request EMS to respond.
  - Follow the AED protocol in accordance with the officer's training if the individual is experiencing any of the following situations:
    - Cardiopulmonary arrest
    - Unconscious subject

- Subject stopped breathing
  - Drowning
  - Electrocutation
  - Unknown medical emergency or trouble
  - Other situations at the direction of a supervisor
  - Refrain from using the AED in the following situations:
    - In any situation precluding safe use, such as on a subject immersed in water or near a metal surface.
    - On a subject who has spontaneous movement.
  - Continue following the AED protocol until relieved by EMS personnel.
  - Provide the following information to EMS personnel upon transferring the patient to their care:
    - Patient's age, if known
    - Whether the officer witnessed the cardiac arrest
    - Approximate time from collapse to EMS arrival
    - CPR performed by the officer or any bystander
    - Number of defibrillations provided
    - Patient's response to treatment
    - Any known medical conditions or medications
    - Circumstances prior to medical intervention
  - Advise the JHPS Communications Center when an AED is applied to the patient for accurate time records.
- F.** Complete the following forms and reports any time that the officer attaches electrodes to a patient, regardless of whether defibrillations were or were not attempted:
- AED Incident Report
  - MIEMSS report
  - Any other incident report that may be required.
- G.** Obtain a new set of defibrillator pads from the Quartermaster at the conclusion of an AED incident. The officer will then connect the new set of pads to the AED unit.
- The Quartermaster will indicate on maintenance log that the AED was utilized and that a new set of defibrillator pads was issued to that unit.
  - Whenever possible, the AED utilized in a cardiac incident will be taken out of service until the data in the unit can be downloaded by the AED Project Coordinator or their designee.



- H. Upon experiencing a problem with an AED unit, immediately place the unit out of service and notify the officer's immediate supervisor.
- The unit shall either be turned over to the AED Project Coordinator or secured in the officer's immediate supervisor's office.
  - A memo detailing the problem shall be directed to the AED Project Coordinator.
- I. Respond to AED tamper alarms and, in addition to taking any other required actions, notify AED Project Coordinator if alarms resulted from malfunctions, tampering with instruments, or actual instrument use.
- J. Return the AED unit and any related equipment to the Quartermaster prior to reporting off duty.
- K. Promptly notify the area Watch Commander or Division Commander if the AED is used on:
- A subject under arrest or in JHPD custody, or
  - Any member of JHPD
- L. Patrol Supervisors shall ensure that officers fulfill the responsibilities described in this section.

### **III. JHPS Communications Center Responsibilities**

JHPS Communications Center personnel shall:

- A. Upon receiving a report of an unresponsive person or possible cardiac arrest incident, dispatch the nearest available patrol unit equipped with an AED to the scene. This may be in addition to other units already assigned.
- B. Notify the Baltimore City Fire Department and request they dispatch emergency medical services to the scene.
- C. Immediately enter the officer's arrival and AED application times into the computer aided dispatch (CAD) system when notified by the officer at the scene.

### **IV. AED Project Coordinator Responsibilities**

A designated Commander will assign a member of JHPD to serve in the ancillary position of AED Project Coordinator. The AED Project Coordinator must meet the training and certification requirements specified by Johns Hopkins University (JHU) and JHPD, including being trained in CPR and using AEDs. The AED Project Coordinator shall:

- A. Work with Education & Training to ensure that all sworn personnel are initially trained and recertified in the use of the AED within the yearly time period.
- B. Act as JHPD's liaison to JHU for the AED program.
- C. Review all AED incident reports to verify that AED protocol is being properly followed.
- D. File all AED reports.
- E. Inspect all AEDs on a monthly basis. The results of the inspection will be recorded on the AED Inspection Form. The inspections shall include:
  - AED location
  - AED serial number
  - Electrode expiration date(s), adult and child
  - Battery expiration date
  - Date of inspection
  - Inspector signature and ID number
  - Carrying case intact with no signs of damage
  - Battery charged and ready for use
  - Maintenance issues
  - All equipment available in the carrying case
- F. Maintain the record keeping of the maintenance, history, and use of each individual AED unit. This includes:
  - Ensuring current copies of inspection records are kept in an AED Inspection binder in the squad room,
  - Submitting completed inspection records to JHU, and
  - Maintaining original inspection records consistent with JHPD's records retention and destruction schedule.
- G. Ensure timely completion of reports and notifications to JHU for any instrument malfunctions.

- H. Order new AED equipment and related supplies as necessary.
- I. On February 1<sup>st</sup>, prepare a summary report to the Chief of Police detailing the use and outcome of all incidents involving the AED during the preceding calendar year.

## Policy Enforcement

<b>Enforcement</b>	Police Department managers and supervisors are responsible for enforcing this Directive.
<b>Reporting Violations</b>	Suspected violations of this Directive should be reported to the Office of Public Safety Accountability Unit (PSAU).

## Related Resources

<b>University Policies and Documents</b>
<b>External Documentation</b>
<p><a href="#">Maryland Institute for Emergency Medical Services Systems (MIEMSS), AED Program</a></p> <p><a href="#">Code of Maryland Regulations, COMAR Title 30, Maryland Institute for Emergency Medical Services Systems (MIEMSS)</a></p> <p><a href="#">MD Code, Education § 13-517, Public Access Automated External Defibrillator Program</a></p> <p><a href="#">Memorandum of Understanding Between the Johns Hopkins Police Department &amp; City of Baltimore Police Department, dated December 2, 2022</a></p>
<b>Police Department Forms and Systems</b>

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## Contacts

<b>Subject Matter</b>	<b>Office Name</b>	<b>Telephone Number</b>	<b>E-mail/Web Address</b>
Policy Clarification and Interpretation			

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