

Report of Director of Adults and Health,

Report to Executive Board

Date: 25 November 2019

Subject: Enhancing Access to Community Public Access Defibrillators in Leeds

Are specific electoral wards affected? If yes, name(s) of ward(s): Please see appendix A for list of affected wards	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has consultation been carried out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Will the decision be open for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary

1. Main issues

- Heart and circulatory disease, also known as cardiovascular disease (CVD), causes a quarter of all deaths in the UK and is the largest cause of premature mortality in deprived areas.
- Fewer than 1 in 10 people in the UK survive an out-of-hospital cardiac arrest mainly due to the low numbers of public access defibrillators in the community.
- The chance of survival from a cardiac arrest that occurs out of hospital doubles if someone receives immediate resuscitation (CPR) or a high energy electric shock to the heart (defibrillation).

2. Best Council Plan Implications (click [here](#) for the latest version of the Best Council Plan)

- This document supports the ambition of the Leeds Health and Wellbeing Strategy that ‘Leeds will be the best city for health and wellbeing’, with a vision that ‘Leeds will be a healthy and caring city for all ages, where people who are poorest improve their health the fastest’.

3. Resource Implications

- On the 27th February 2019 the Leader of the Council announced funding for 50 Community Public Access defibrillators (CPADs) in her budget speech.

- Funding has been allocated from within the Adults and Health Directorate budget for the defibrillators and for a project worker to work with ward members and the Communities and Environment Directorate to agree where they will be sited. The project worker will support the allocation of CPADs, undertake community awareness raising and organise free training on basic life support and use of the CPADs for the community through Yorkshire Ambulance Service (YAS).

Recommendations

The Executive Board is recommended to note the contents of this report and:

- Agree the proposed allocation of 54 CPADs to ensure that every ward has a minimum of 4, with additional allocation to wards with highest cardiac arrest and low bystander cardiopulmonary resuscitation rates and highest early deaths from circulatory disease.
- Agree the approach to allocate a short term project support worker, working with the Communities and Environment Directorate to support the allocation of CPADs, community awareness raising and training through YAS.
- Communities and Environment Directorate to lead the implementation of the programme working closely with ward members and with advice and guidance from Public Health, Adults and Health directorate.

1. Purpose of this report

- 1.1 To outline the benefits associated with CPADS in the community and provide detail of the current provision of them across the city.
- 1.2 To seek approval for the suggested allocation of 54 CPADs.
- 1.3 To seek approval for the preferred CPAD model based on 10 year cost and functionality.
- 1.4 To seek approval on the proposed approach to the allocation, community awareness raising and training communities on Basic Life Support and use of the CPAD.

2. Background information

- 2.1 Sudden Cardiac Arrest is the leading cause of early death and occurs when the normal rhythm of the heart malfunctions and leads to a life-threatening rhythm causing the heart to stop pumping.
- 2.2 Ambulance services aim to respond to sudden cardiac arrest within eight minutes. The emergency response coded as a 9 or 10 response signifies a response to an individual suffering chest pain, cardiac arrest or respiratory arrest. Despite the quick response for many individuals experiencing sudden cardiac arrest it is still too late.
- 2.3 The automated external defibrillator has been described as the single most important development in the treatment of sudden cardiac arrest. These devices are now widely available and increasingly used by people, often with little or no training, to re-start the heart of a person who has had a cardiac arrest.

- 2.4 The determinant of survival is the time between collapse and the use of the CPAD to deliver a shock. It is therefore crucial to ensure CPADs are installed at places where they may be needed so that they can be accessed quickly and used before the arrival of professional help.
- 2.5 CPADS are defibrillators that are held in cabinets and located on the outside wall of a building so that they are easily accessible 24/7 to anyone in the vicinity who requires it. The cabinets have a key code lock and the code is accessed by calling 999 therefore the device remains secure.
- 2.6 Both members and officers have examples of the use of life saving benefits of CPADs in Leeds.

3. Main issues

- 3.1 There is significant variation across the city on the number of CPADs located in different wards ranging from zero in some wards to over 20 in others. Many of the current CPADs have been funded through local communities and ward members MICE funding (Appendix A - Map of location of CPADS in Leeds Sept 2019).
- 3.2 There are six wards (Burmantofts & Richmond Hill, Kirkstall, Bramley & Stanningley, Beeston & Holbeck, Chapel Allerton and Headingley & Hyde Park) that have the highest cardiac arrest rates and low bystander cardiopulmonary resuscitation rates in Leeds as well as the highest rates of early deaths from circulatory disease. The current provision of CPAD's in these wards ranges from zero to a maximum of three.
- 3.3 The suggested allocation of the CPADs (detailed in Appendix B) would be based on ensuring there are a minimum of 4 defibrillators in each ward, with the remaining ones allocated to the six wards with highest cardiac arrest but low bystander Cardiopulmonary resuscitation rates and highest early deaths from circulatory disease. This will bring the total to 54 extra CPADs in areas of high need.
- 3.4 To maximise impact YAS has offered to provide free training on basic life support and the use of the CPAD for members of the community and ward members, once the siting of the CPADs has been agreed.
- 3.5 The Community Public Access Defibrillator model to be purchased is the IPAD SP1 which is based on functionality and overall 10 year costs
- 3.6 It is recommended that support be given to each ward in terms of siting the allocated CPADs.

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 Stakeholder consultation formed a significant part of the project including Community Committee Chairs meeting and briefing the Executive Member for Health, Wellbeing and Adults.
- 4.1.2 The project includes partnership working with Yorkshire Ambulance Service, Communities and Environment Directorate, and Public Health Intelligence.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 There are no adverse implications for equality, diversity, cohesion and integration resulting from this decision. The proposed allocation of CPADs would address the current lack of provision in those wards with the highest cardiac arrest rates and the highest rates of death from circulatory disease.

4.3 Council policies and the Best Council Plan

- 4.3.1 This document supports the ambition of the Leeds Health and Wellbeing Strategy that 'Leeds will be the best city for health and wellbeing', with a vision that 'Leeds will be a healthy and caring city for all ages, where people who are poorest improve their health the fastest'.

Climate Emergency

- 4.3.2 Whilst this report does not specifically reference environmental considerations the availability of CPADs within local communities with the associated support and training offered locally reduces the amount of travel that is required to access provision. This contributes to the reduction in carbon emissions and environmental pollution which contributes to city actions to better manage air quality.

4.4 Resources, procurement and value for money

- 4.4.1 Adults and Health Directorate have provided £74,927 to purchase 54 CPADs; £14,000 towards the cost of an officer in Communities and Environment Directorate to lead the implementation and allocation in the agreed wards; and up to £21,600 to Leeds Building Services, Resources and Housing Directorate for the electrical work involved in fitting the units.
- 4.4.2 The chosen CPAD model provides long term value for money when compared to some other models on the market.
- 4.4.3 The provision of CPADs in wards with high need provides value for money as the earlier that a shock is given by a defibrillator the better the person's chance of survival. Studies have shown that a shock given within 3 minutes of cardiac arrest provides the best chance of survival and that even one minute of further delay reduces that chance substantially. Further studies have shown that early use of a CPAD by members of the public gives a person in cardiac arrest the best chance of surviving.
- 4.4.4 A person's chance of survival falls by around 7 - 10% with every minute that defibrillation is delayed. The best way of ensuring prompt defibrillation is for someone nearby to have access and use a CPAD to deliver the shock that can often save a life.

4.5 Legal implications, access to information, and call-in

- 4.5.1 The introduction of legislation in 2015 (the Social Action , Responsibility and Heroism Act 2015) is intended to provide a degree of reassurance to those who might otherwise be worried about litigation if they step in to assist. Where individuals have adopted a responsible approach the Act requires a court to take full account of the context of their actions.

4.6 Risk management

- 4.6.1 If approval is not gained to provide automated external defibrillators to the suggested wards it reduces the chance of survival following a cardiac arrest in a public place.
- 4.6.2 To ensure the provision of the CPADs has maximum impact and used effectively YAS will provide training on Basic Life Support and use of the CPADs in the community.
- 4.6.3 The allocation of the CPADs will be in line with the criteria set out by Yorkshire Ambulance Service ensuring guardians of the equipment understand their roles responsibilities.

5. Conclusions

- 5.1.1 Sudden cardiac arrest is the leading cause of early death however prompt defibrillation is the single most important development in saving lives as a result of a cardiac arrest.
- 5.1.2 There is significant variation across the city on the number of CPADs located in different wards and to ensure they are accessible across all wards there needs to be a minimum of four in each ward.
- 5.1.3 Further allocation to the six wards with highest cardiac arrest but low bystander cardiopulmonary resuscitation rates and highest early deaths from circulatory disease is required.

6. Recommendations

The Executive Board is recommended to note the contents of this report and:

- Agree the proposed allocation of 54 Community Public Access defibrillators to ensure that every ward has a minimum of 4, with additional allocation to wards with highest cardiac arrest and low bystander cardiopulmonary resuscitation rates and highest early deaths from circulatory disease.
- Agree the approach to allocate a short term project support worker, working with the Communities and Environment Directorate to support the allocation of Community Public Access defibrillators, community awareness raising and training through YAS.
- Communities and Environment Directorate to lead the implementation of the programme working closely with ward members and with advice and guidance from Public Health, Adults and Health directorate.

7. Background documents¹

None.

8. Appendices

Appendix A - Map of location of CPADS in Leeds

Appendix B - Suggested location of the CPAD's

Appendix C – Equality Impact Assessment

¹ The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.