

**AGENDA ITEM**

**REPORT TO CABINET**

**3 JUNE 2024**

**REPORT OF SENIOR  
MANAGEMENT TEAM**

**CABINET DECISION**

**Health, Leisure and Culture - Lead Cabinet Member – Councillor Steve Nelson**

**DEFIBRILLATOR POLICY**

**SUMMARY**

The report sets out the need for good access to public access defibrillators in the local population, identifies areas of need for further defibrillators and shares a policy which clarifies the responsibilities of SBC in relation to the purchase, maintenance and installation of defibrillators.

**REASONS FOR RECOMMENDATION(S)/DECISION(S)**

Cabinet is recommended to approve the defibrillator policy to ensure clear and transparent local guidance on the Council's responsibility in relation to new and existing defibrillators.

**RECOMMENDATIONS**

1. To approve the defibrillator policy as set out in this report, for Stockton-on-Tees.

**DETAIL**

Background

1. Access to defibrillators is an issue of interest for local communities and Elected Members. Emergency services in England respond to around 40,000 people requiring resuscitation each year. Most out-of-hospital cardiac arrests (OHCAs) occur in the home (72%) or in the workplace (15%). This equates to approximately 15 people per year in Stockton-on-Tees having a cardiac arrest outside of the home or the workplace. A cardiac arrest can be assumed if someone is not breathing and the heart has stopped beating.
2. The British Heart Foundation finds that immediate initiation of cardiopulmonary resuscitation (CPR) can double or quadruple survival from out of hospital cardiac arrest, and defibrillation within 3–5 minutes of collapse can produce survival rates up to 50-70%.
3. A scrutiny review on defibrillators in 2017 recommended to increase access to defibrillators for the local population. Open access defibrillators are increasingly common, with most areas in Stockton-on-Tees now having good access to a defibrillator close to their home.

4. In the case of a cardiac arrest, it is important to firstly call '999' and start CPR as soon as possible. The operator of the emergency service will advise to start CPR and advise if there is an 'available' defibrillator within a 500m radius. The emergency service will provide the code to open the defibrillator cabinet and ask for someone to retrieve the defibrillator whilst CPR is continued.

#### The system for Community Public Access Defibrillators

5. Community Public Access Defibrillators (cPADs) are defibrillators available to anyone to use in an emergency. cPADs are looked after by 'Guardians'. Guardians are volunteers who are responsible for the maintenance of the cPAD and are often from the community group / organisation the cPAD belongs to, or members of the public who live or work in the area the cPAD is located. Each cPAD has at least one registered Guardian, and the North East Ambulance Service (NEAS) holds a list of these.
6. Securing community guardianship is intended to promote community ownership and understanding of the use of CPADs – importantly, together with promoting the free available training in CPR among the community.
7. The Circuit is the live network of defibrillators accessed by the 999 operator when they receive an emergency call. There are currently 141 Community Public Access (CPADs) defibrillators registered on The Circuit in Stockton-on-Tees. A further 81 defibrillators registered with the Circuit are accessible on a restricted basis i.e. not 24/7. In addition to this many workplaces and other organisations such as care homes or leisure centres also have defibrillators. Please see the map in **Appendix 1**.
8. NEAS suggest areas that would benefit from additional defibrillators based on access to current registered cPADs within 500m in the local community. In Stockton-on-Tees there are two areas identified: TS17 9 (Thornaby) and TS18 2 (Stockton, Grangefield, Portrack). Conversations will be held with ward Councillors to help identify locations for cPADs in these areas.

#### SBC approach to cPADs

9. SBC is contacted by residents, organisations and by Elected Members regarding the installation of, and support for cPADs across the borough. The defibrillator policy (**Appendix 2**) has been developed in response to the requests, to inform a consistent approach in responding to and resolving these queries.
10. The policy has been developed jointly by SBC Public Health, Highways and Estates and details information on cPAD provision, location, cost and funding, installation, maintenance, SBC-owned cPADs, and CPR training and resources.
11. There is no statutory duty for the Council to provide or support cPADs and additional resource to do so is not available. As with hospices and air ambulance services, nationally there is emphasis on community support.
12. The policy sets out that SBC part-funds the purchase of defibrillators in areas of need (as defined by NEAS) and supports the maintenance of 4 defibrillators owned by SBC. Defibrillators in other areas will be fully funded by communities / groups and organisations wanting to install a local defibrillator – payment of electricity costs is agreed between community groups and the building / facility on which the cPAD is located. SBC will charge for the installation, license and energy costs of defibrillators other than in the identified areas of need.

13. SBC public health and planning will provide residents and communities with advice on funding, installation and maintenance of defibrillators as well as installation if mounted on public buildings or amenities.
14. The policy describes that Guardians are identified by the local community / community groups who are looking to install a defibrillator. If a Guardian steps down, the local community / group will source an alternative Guardian. SBC public health can support with identifying a Guardian for the four cPADs which are the Council's responsibility.
15. In line with the wider approach to defibrillators and the approach of partners e.g. NEAS, community ownership alongside CPR training in the community is important in promoting understanding of the machines, how to react in the event of witnessing a cardiac event and supporting community confidence. The role of the Guardian is to check the cPAD fortnightly, record this in the Circuit website (replacing batteries where needed) and report any faults to NEAS. Once a cPAD has been used, the Guardian replaces the pads and resets the device before it can be used again.
16. Only defibrillators that are reported regularly in good running order on the Circuit will show up on the NEAS map and NEAS will only direct people to these machines.
17. Members are asked to support the approach by promoting CPR and cPAD training in their local communities. Public health is exploring sourcing Member training to support this.

#### **COMMUNITY IMPACT IMPLICATIONS**

18. Access to open access community defibrillators improves the chances of survival after cardiac arrest. Community ownership of cPADs and community training in CPR are important in supporting this. Communities / community groups are responsible for identifying a Guardian and for installation, maintenance and (in negotiation with landlords) energy costs for cPADs. Support is available to help with funding with SBC can point communities towards.
19. NEAS has identified two areas which do not have sufficient access to open access defibrillators in Thornaby (TS17 9) and Portrack (TS18 9) and suggest that community groups in these areas to be supported in the purchase and installation of new defibrillators.

#### **CORPORATE PARENTING IMPLICATIONS**

20. The defibrillator policy does not contain corporate parenting implications.

#### **FINANCIAL IMPLICATIONS**

21. The financial implications for the Council of the defibrillator policy are limited to the part funding of defibrillators in the identified areas of need and possible waiver of installation costs and fees for new defibrillators in these areas. Public health holds a small budget to support with the above.

#### **LEGAL IMPLICATIONS**

22. There are no legal implications of the policy. All newly purchased and installed defibrillators are owned and maintained by community groups/ guardians.

### **RISK ASSESSMENT**

23. This (subject matter of report) is categorised as low to medium risk. Existing management systems and daily routine activities are sufficient to control and reduce risk.

### **WARDS AFFECTED AND CONSULTATION WITH WARD/COUNCILLORS**

24. The policy applies to all wards in Stockton-on-Tees. The policy states that community groups would be supported only in identified areas of need. Conversations with ward Councillors will be held in these areas as part of the process of identifying communities / groups who will take responsibility for the cPADs.

### **BACKGROUND PAPERS**

25. Please see **Appendix 1** for a map of defibrillators registered in Stockton-on-Tees on the Circuit.

**Name of Contact Officer: Sarah Bowman - Abouna**

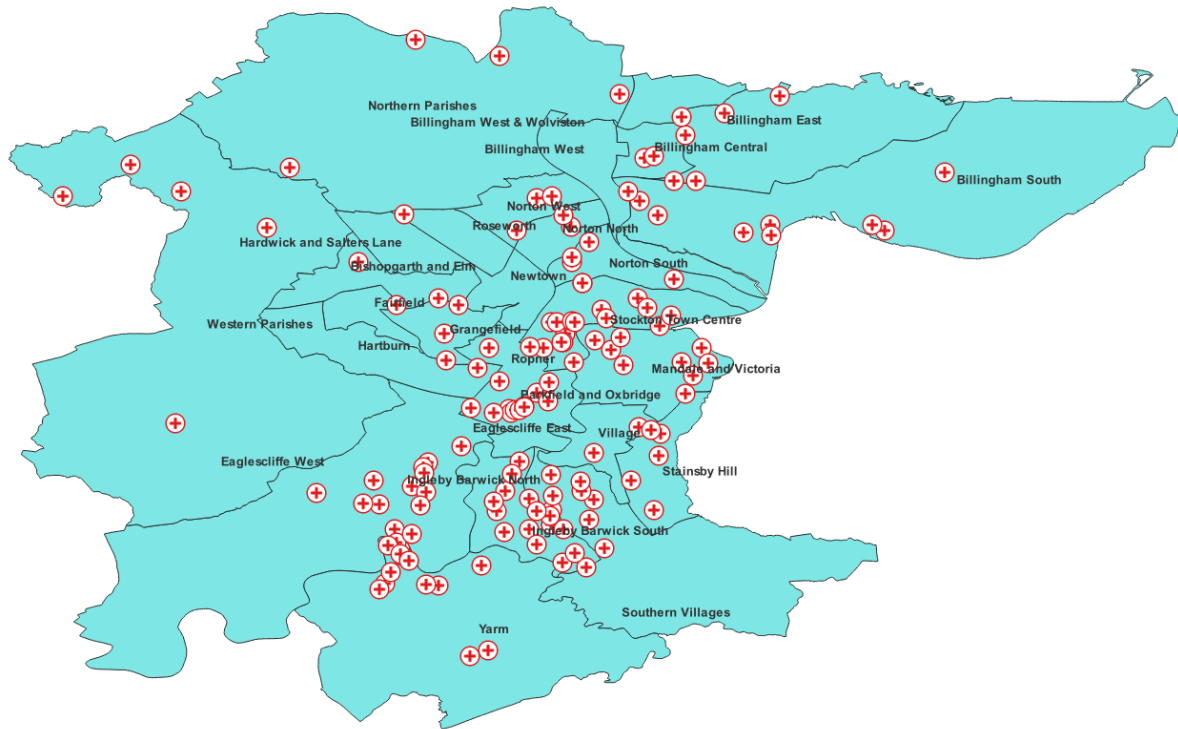
**Post Title: Director of Public Health**

**Telephone No. 01642 527054**

**Email Address: [sarah.bowman-abouna@stockton.gov.uk](mailto:sarah.bowman-abouna@stockton.gov.uk)**

## Appendix 1

Map of defibrillators in Stockton-on-Tees registered on The Circuit, and areas of identified need



## Appendix 2

SBC Defibrillator Policy



Acrobat Document