



Frequently Asked Questions

What is a defibrillator or AED? A defibrillator is a computerised medical device delivers an electrical current through the chest which aims to shock the heart back into a normal rhythm allowing it to pump again. Rapid response using automated technology can significantly improve the quality of life of a survivor, as the longer the brain is starved of oxygen, the more damage that can occur. An AED is a portable defibrillator especially designed for people with little or no medical background. When applied to the victim, voice commands and screen messages will guide the user step-by-step through the process and its intelligent technology will only allow it to shock a 'shockable' heart rhythm. AED technology opens a window for the public to take on a key role to support emergency services who would otherwise be hindered by the time it takes to reach the victim. It is argued that AEDs should be as broadly deployed as fire extinguishers and first aid kits.

Is there a need? – Sudden Cardiac Attack happens between 140,000 and 200,000 times a year in the UK, making it one of the UK's largest killers – equivalent to a jumbo jet crashing every day! The potential for saving a life is dependent upon time, the faster medical help can be attained, the better the chance of survival. Clinical studies suggest you have less than 5 minutes from the event to save the life, this decreasing by up to **23%** per minute. In rural areas it takes time to get medical help, so Community Public Access Defibrillators (cPAD) have a very important part to play in helping save lives in rural communities. cPAD schemes are reckoned to be about 10x more effective in saving life post hospital than other community schemes alone. Your community needs to decide if you want one, but as SCA can happen to anyone at any time, and is not age related, better safe than sorry! Try timing yourself from your nearest Ambulance station.

The UK resuscitation Council guidance on having an AED in a community is whether an AED can be at the patient within **5 minutes** of the SCA event happening, regardless of whether it is a cPAD scheme or a community responder scheme. If this cannot be achieved then your community may require a cPAD box and AED in addition to anything else you have available.

Is my community signed up and supportive? Need is driven by local communities who by definition of request for the cPAD project have indicated their support. Around country these projects are driven by local groups like first aid, community responders, parish councils or Lions and Round Table who engage the support of the local communities, and co-ordinate fund raising and placement with the support of organisations like the Community HeartBeat Trust (CHT). Many ambulance services have active programmes too, and most work closely with the CHT.

Is there a minimum number of people needed to have a cPAD scheme? No. So long as there is one person supporting this, then this justifies the effort. There are already local unstructured schemes being established by householders individually in your community, and your village hall may already have a defibrillator hidden in a cupboard, or someone's house. Your local doctor surgery will have one too, but it is only available when the surgery is open. This project is about utilising these resources better to save more lives.

How many people do we need to be trained? The UK RC guidelines suggest AED equipment is available to non trained people as well, and certainly the programme we have designed allows for this. However training of the local community is always desirable. We suggest aiming at 10 a time for each cPAD installation. Actual numbers are in reality unlimited. Annual re-qualifications on AED use are recommended. Training is sometimes done by your local ambulance service but can also be done through CHT with a local training organisation.

Who delivers the training, to what specification and is the training free of charge? Training is provided by a local CHT approved training company, or the local ambulance service. The CHT scheme has a training package designed with the ambulance service to meet the needs of community defibrillation schemes, and we can also arrange an HSE certified training package as part of the scheme (if required) so no additional costs need to be involved (apart from venue costs for the training). If a community opts to take extra training beyond that offered, then the local training



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organisation is always at liberty to charge for that extra service in agreement with their local community project. The CHT training package is nationally set and meets HSE and Royal College of Surgeons, as well as the defibrillator manufacturer's standards. CHT will ensure the trainers to meet their exacting standards before allowing them to undertake the CHT course. Training also allows you to move around the country, and be certified anywhere to undertake a cPAD use, or first aid. CHT recommends that the basic AED and cPAD awareness (2 hrs) training should be provided free.

We have a local BHF Heartstart course. Can this suffice for training? Heartstart is a good awareness training for CPR and heart attacks and we encourage you to undertake this where available. It is not designed for AED training specifically, nor specifically for cPAD schemes. It is good to integrate this programme, however, as part of your local community awareness. The CHT course covers how to recognise an SCA, what to do, how to act, how to undertake CPR and use the Defibrillator and also has a full Emergency First Aid programme. This makes it a full and complete course that gives the attendees a long term useful skill set.

Do we have to be Community Responders? No. CFR schemes are independent of cPAD schemes, but clearly trained responders can also use the cPAD equipment in an emergency, particularly if they are off duty and don't have access to their own equipment. If you wish to establish a CFR scheme, this a matter for you and the local ambulance service and not the Community HeartBeat Trust, although the CHT does, and will, support the establishment of CFR schemes. It is hoped that by having a cPAD scheme locally then this will encourage local communities to join first aid and CFR schemes. Many cPAD schemes are being established by CFR groups or ambulance services. Very few CFR schemes offer a 24/7/365 cover for a community whereas a cPAD scheme is readily available. The two are completely complimentary and not competitive.

What are the procedures for using the defibrillator? UK Resuscitation Council (UKRC) are the definitive guide to using cPAD equipment in the UK. CHT will only support recognised UKRC protocols.

How is the cPAD activated? In all cases dial 999 first. It is really important the professionals are on their way. Your local ambulance service will notify you if there is a cPAD box near to you and if it is easily accessible, and give you the access code to the box. If you are willing they will ask you to get this and commence the relevant actions. Under the CHT scheme the trained volunteers also have the access code and also the location where the box is sited. However this will vary from one ambulance region to another to meet their requirements. Always dial 999 ambulance.

What governance processes are in place? UKRC no longer require members of the public to be trained to use AEDs. This is because it is so easy to use one and very safe. However CHT feel good high quality training is required to get maximum benefit. Our Trustees scrutinise all CHT activity and link into local ambulance trusts in a co-operative manner, and also have members of the ambulance service as part of our advisory team. Training is certified and scrutinised to make sure it conforms to UKRC guidelines, and additional training to HSE standards. Equipment is governed by the manufacturer who takes responsibility for maintenance and functional operation of the AED. In some cases the manufacturer will also indemnify any user of their equipment. This replicates, and exceeds, existing PAD schemes. All cPAD locations and codes are notified to the local ambulance service (fire and police too), who record on their control systems. A copy of the notification form can be supplied. All CHT supplied cPAD boxes give instructions to call 999. Daily and weekly checks are done on the cPAD equipment by the local scheme co-ordinator (who will be recognised by the ambulance service), and in some cases by the local ambulance service themselves undertake this too, to ensure fully operational equipment. CHT is not responsible for the maintenance of the cPAD installations, only to assist in their provision. CHT can advise on local insurance policies if required through the appropriate insurance broker. All equipment is guaranteed by the manufacturers, and monitoring and control systems have been agreed with most ambulance services to meet their local needs.



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What long term support is there in place? The defibrillator manufacturer will support the service for 7 years, this being the nominal life of the defibrillator and guarantees on the equipment. CHT have also negotiated an optional replacement service for supplies with the manufacturers.

Who will be the responsible person to carry out regular serviceability checks on the machine replace batteries, pads etc and replace items following the use of the machine, downloading of information etc.? CHT have agreed with some manufacturers to fully support all consumables for the seven year period, including post use replacement of consumables, where a service agreement is in place. This will be enacted by the local scheme. Local regular checking is undertaken by the supporting group through a checklist supplied, or by the local ambulance service. This is the same system as used for similar cPAD schemes, and the British Heart Foundation (BHF) national PAD schemes. The CHT scheme is unique in that it offers a local group support free where a service agreement is in place. Your local ambulance service may wish to download the data from your AED and will have their own procedures for this.

How are these schemes funded? Usually through public donations and fundraising, sometimes with local commercial and parish council support. As the Community HeartBeat Trust is a registered charity, local groups can donate monies to CHT, or other charities, in return they will donate a defibrillator. CHT aims to be able to provide grants for the establishment of cPAD schemes and works in co-operation with other funding charities. It also negotiates the best possible prices for equipment. CHT makes no monies from equipment provision, and relies on public donations and gift aid for funding the charity. CHT staff work as volunteers and take no salaries, so all monies are used for the benefit of the communities being served.

If the defibrillators and equipment are to be purchased by communities should they have a choice of a range of defibrillators? CHT supports the use of specific AED equipment where possible for very good reasons, which can be provided on request. These include ease of training, support, ease of use, price, reliability and these are the same equipment as used in the national defibrillation project funded by the government and the national lottery, ie. the same equipment you see on stations, shopping centres and sports centres. We also work with your local ambulance service to make sure it is equipment they are happy with. *We do not recommend non-standard equipment.* Standardisation means you are trained to use one **wherever you are** and are not faced with new challenges when an emergency arises. All makes of defibrillator are available if desired but if a community chooses to use another manufacturer, or has one already, then this will clearly alter the costs involved to that community. There are of course, no restrictions on a local community choosing any manufacturer or AED, but this defeats the objects of standardisation, and may lead to delays in servicing a cardiac arrest. To date, all communities and ambulance services have stated a preference for the Cardiac Science or Laerdal equipment, but the decision is by your local community.

Will CHT support our local Community Responder scheme as well? Does this replace the need for Community Responders? The CHT objects are to support cPAD schemes as well as support for CFR schemes - In fact any situation that supports the placement of AEDs into communities. Many cPAD schemes are run by the local CFR scheme to support their CFR activity and we would be happy to put you in contact with some CFR schemes that have done this. We will therefore support CFR schemes as well as cPAD schemes, and also local training and awareness schemes.

What is the specification of the cabinet? The high visibility yellow CHT cabinet is a secure, vandal resistant IP65 certified and contains a thermostatically controlled heater, lighting and indicator lamps. It is manufactured to all relevant BS EU standards, and is the only cabinet available that meets all these standards. Three versions are available, a standard steel box and a special design for mountain and coastal regions, and also an indoor version. CHT is not responsible for which electricity supplier is chosen by a local community, but will require it to be fitted by a certified electrician. Cost of running is estimated to be about £3-£30 per year. Normally shops, pubs and village halls house the units and supply the electricity. Permission of the owner of the building will be required.



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Why is the box yellow? There is no international or UK requirements for AED boxes to be a specific colour. CHT worked with the ambulance service and members of the public, as well as seeking the advice of the DH, UK RC and ERC, to ensure the boxes provided are highly visible and therefore easy to find in poor light conditions. It was felt by the reviewers that 'medical green' and other dark colours made the boxes harder to find, and as this is about time to patient, then the easier it is to find a cPAD box the quicker the AED is to the patient. The choice of 'Traffic Yellow' is as a result of this consultation process, and the same colour as used by local councils and highways for easy recognition. Most ambulances are also yellow now for the same reason. In reality if you wish another colour, we can provide at a cost, but most ambulance organisations and PCTs spoken to and who have seen the CHT box agree and endorse the yellow colour.

"The RCUK do not make any recommendation about cabinet size or colour" – UKRC 2009

"Neither ILCOR or ERC impose a regulation about the color of the boxes" – ERC 2010

Do we need planning permission for a cPAD box? Not normally. Planning permission is not normally required as this is emergency medical equipment, and is classed as 'diminimus' in planning terms. CHT is not responsible for gaining local planning consent if required. This is the responsibility of the local group. To date all local authorities contacted have agreed planning permission will not be needed but listed building consent may be if applicable to the location. If in doubt ask your local authority for advice and build the cost into your fundraising.

If the local ambulance service directed a person to a cPAD site and when they arrived the box had no defibrillator in the cabinet or when it was attempted to be used for some reason it failed to work, would we be at serious risk of prosecution? Unlikely. It is rare for thefts to occur. All due process is taken to reduce the risk to the equipment malfunctioning or not being available, and your community will undertake weekly check to ensure the equipment is functioning, and report this to CHT and to the local ambulance trust. The cPAD box is vandal resistant, and checked weekly by the local scheme co-ordinator/ambulance organisation. There are procedures in place for consumables replacement. This is a scheme that exceeds that currently in place in shopping centres and stations, where the same issues could arise with unlocked cabinets. Some AED manufacturers will warrant the AED equipment. The Community HeartBeat Trust scheme is supported by other major charities and almost all Ambulance organisations. By dialling 999 you are also covered by the Ambulance Trust insurances, and protected from liabilities.

Do I need indemnity insurance for using one? No. The patient is to all intensive purposes 'dead' when you arrive. Using CPR with a PAD will hopefully bring them back to life. No one will complain about that! However, calling 999 and taking instructions from the ambulance service will automatically cover you anyway under their insurances. *Remember that you must call 999!* A very good guide to this area is published on the website of the UKRC. However, CHT has agreed 'Good Samaritan' insurance for local communities that have cPAD schemes, if a community feels this is required.

How closely does CHT work with the ambulance service? Very! The CHT is a registered charity with its own board of Trustees, most of these are medically qualified in some form. In addition, some ambulance services have a representative on our management. Whilst it is easy to assume that all ambulance services have the same policies, this is not the case and there are variations across the country. By having the ambulance service integrated into our management we are better able to reflect the needs and requirements of your local service. This was typified by the design of our cPAD box, for example.

How do we go about getting a cPAD scheme running? Simply send us an e-mail through the website and we will send you the relevant information and forms. We will also notify the local ambulance service of all enquiries we receive and if these become formal, we will send them copies of the registration forms. It may be that the local ambulance service already has a strategy for your local community and thus it is important this is reflected. Cost is approximately £1 per day per cPAD location. The actual upfront costs depend upon the exact requirements of your location.