

Community Defibrillator Policy

Tameside Metropolitan Borough Council

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1. Introduction

An Automated External Defibrillator (AED) is an essential part of the chain of survival during the response to sudden cardiac arrest, restoring a normal heart rhythm¹. Having public access to AED's within the community, which are available 24 hours a day in case of an emergency, can be lifesaving. An increase in the number of AED's locally will give members of the community/community groups a safe, effective and prompt tool in the vital delivery of potential lifesaving treatment. Premature deaths from cardiovascular disease in Tameside is significantly higher than the England average¹.

Tameside Metropolitan Borough Council have developed a limited community budget to support successful community groups with up to £500 to help with either the purchase or installation of a fully automatic, AED. The Council is committed to improving health and wellbeing outcomes for its population, and is committed to reducing health inequalities, by supporting equity in health services and programmes. Groups can contact publichealth.enquiries@tameside.gov.uk for further information.

The aims of the community defibrillator policy are:

- To provide evidence based information on helping an individual suspected of having an out of hospital cardiac arrest;
- To promote national guidance regarding automated external defibrillators;
- To detail Tameside Council's programme to support automated external defibrillators in the community.

2. Scope

The policy will apply to Tameside residents and groups within the voluntary and community sector. This applies to new defibrillator installations, not existing defibrillators in the community. The council also has a range of defibrillators which it is already responsible for, which are maintained as required, however they also sit outside of the scope of this policy. Tameside Council is not responsible for other, community-owned defibrillators already installed across the borough and will not retain any responsibility for new defibrillators installed by individuals and groups as part of this policy.

The policy does not cover workplaces in the borough, as these settings are governed by The Health and Safety at Work Act (1974). Further information on relevant health and safety matters in workplaces can be found in Appendix C.

¹ <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/1/gid/1000049/pat/6/ati/401/are/E08000008/iid/90366/age/1/sex/1/cat/-1/ctp/-1/yr/3/cid/4/tbm/1>

3. Automated External Defibrillator

3.1. Purpose of an Automated External Defibrillator

A defibrillator is a device that gives a high-energy electric shock to the heart of individual who is in cardiac arrest, helping to restore the heart's normal rhythm again. In a cardiac arrest, the heart's steady rhythm is often replaced by disorganised electrical activity called ventricular fibrillation (VF). The sooner VF is treated by an electrical shock (defibrillation), the greater the chance of the person's life being saved.

An automated external defibrillator (AED) (sometimes referred to as a public access defibrillator (PAD)) is a portable electronic machine that can automatically detect the abnormal heart rhythms that cause cardiac arrest and can deliver the shock that is needed to save the life of a person with a rhythm such as VF.

AEDs are compact, portable, easy to use, safe and very effective. They can be used by anyone, whether or not they have had formal training.

An AED gives the person audible and visual instructions and will not allow a shock to be given unless needed. AEDs can be stored for long periods without use and need no direct maintenance, it is important to remember that visual inspection is done regularly to ensure they are ready to use in an emergency.

3.2. Automated External Defibrillator - Location

The location of an AED is vital, and when installing an AED in the community, it is important to consider the following questions:

- Will the AED be clearly visible and easily recognisable, including enough light so people can see the device's cabinet in the dark?
- Will the AED be placed in a high quality lockable box?
- Are there any other AED nearby (approximately 500metres radius)?
- Is there an accessible power supply for the AED to remain operational? The Council can support should the AED be installed on the public highway, which is often a preferable option.
- Can the device be accessed 24hours a day, 7 days a week?

3.3. Automated External Defibrillator - Installation and Storage

An AED is normally housed within a temperature controlled secure cabinet. Access to the cabinet is via a mechanical digital lock.

When the AED is required in emergency situations the lock access code is provided by making a '999' telephone call to Emergency Services.

3.4. Responsibility

It is important that an AED is installed safely and maintained to enable the best chance of survival. An organisation or community group installing an AED has the overall responsibility for the AED. This includes:

- Before installing the AED, checking the location desired. Check if consent from the premises owner or landlord is needed.
- Registration with the NHS via the national defibrillator network, [The Circuit](#).
- Check the AED regularly, to establish that it is in good working order and that the defibrillator pads are in date. AED sites should have at least one guardian but preferably two. The guardian(s) where possible should check the site, and make a log of their checks on [The Circuit](#). A simple checklist template to help with maintenance checks can be found in Appendix A.
- It is advised that insurance for each AED is sought in case of damage including vandalism.
- Maintenance costs of the AED are covered, including new pads when they go out of date or they have been used. Maintenance should be in accordance with the recommended guidelines and any manufacturer's instructions.
- Align to current [UK's Resuscitation Guidelines](#).

4. Background Information

4.1. Cardiac Arrest & Chain of Survival

The heart is controlled by an electrical impulse which helps it to maintain the correct rhythm. During a cardiac arrest, the normal rhythm of the heart is disrupted. The heart stops beating properly, and normal breathing is disturbed.

In response to a suspected cardiac arrest, the Resuscitation Council promotes the 'chain of survival'² – which overall increases the chances of a person surviving a cardiac arrest. The chain of survival is:

1. Early recognition and call for help - to prevent a cardiac arrest and receive instructions on how to perform cardio pulmonary resuscitation (*ring 999*);
2. Start early cardiopulmonary resuscitation (CPR) - to buy time (*especially chest compressions*);

²<https://www.resus.org.uk/sites/default/files/2020-05/Resuscitation%20To%20Recovery.pdf>

3. Early defibrillation - to restart the heart (*if located nearby and other bystanders are nearby to help, use an automated external defibrillator*);
4. Post resuscitation care - to restore quality of life (*let the emergency services/ NHS/ Public Services take over*).

The annual incidence of out-of-hospital cardiac arrest (OHCA) in the UK is approximately 55 per 100,000, with most cardiac arrests (72%) occurring in the home. Evidence suggests that where bystanders start defibrillation, survival rate is higher. This is because bystanders are likely to arrive at the scene and start the chain of survival and defibrillation faster³.

4.2. Prevention

Whilst the 'chain of survival' is vital in preventing poor outcomes associated with a cardiac arrest, such as death, it is important to promote healthy behavioural factors to support a healthy heart. These include maintaining a healthy weight through a balanced nutritional diet, and regular physical activity. As well as avoiding tobacco use and substance misuse, including harmful use of alcohol.

Other determinants of cardiovascular diseases, a risk factor associated with cardiac arrests, include poverty, stress and hereditary factors, some of which are more preventable than others.

Emphasising the need locally and importance of prevention, Tameside (and Glossop) in 2020/21 had a significantly higher rate of cardiovascular diseases admissions to hospital at 588.4 per 100,000, compared the England at 367.6 per 100,000⁴.

5. Legal Considerations

Organisations and Community Groups are advised to keep up to date with guidance:
[Publication: CPR, AEDs and the law | Resuscitation Council UK](#)

This publication sets out the legal position in relation to potential liability around the provision and use of an AED. Organisations are encouraged to review this publication and in particular to note the need to correctly maintain the equipment to avoid any potential liability occurring.

³ <https://evidence.nihr.ac.uk/alert/use-of-public-defibrillators-linked-to-out-of-hospital-cardiac-arrest-survival/>

⁴ <https://fingertips.phe.org.uk/profile-group/cardiovascular-disease-diabetes-kidney-disease/profile/cardiovascular/data#page/4/gid/1938133108/pat/15/par/E92000001/ati/166/are/E38000182/iid/90988/age/1/sex/4/cat/-1/ctp/-1/yr/1/nn/nn-9-E38000182/cid/4/tbm/1/page-options/car-do-0>

6. Training

The crucial factor in the resuscitation of an individual from VF is to provide a shock from a defibrillator with the minimum of delay. Time should not be wasted if a trained person is not available immediately. Untrained people have used AEDs successfully to save lives and lack of training (or of recent training) should not be a barrier. If someone is willing to use the AED they should do so, and by calling 999 and requesting the ambulance service, information and advice will be given to initiate emergency life support.

AEDs can be used safely and successfully by people with no specific training. Untrained members of the public have saved lives in this way, so lack of training should not deter people from using an AED.

Familiarisation with AEDs is included in first aid and CPR training, as it gives people confidence to send someone to fetch an AED and to use it without delay.

The Resuscitation Council UK and British Heart Foundation recommend that the poster shown in Figure 1 is displayed beside or on an AED cabinet, to inform and encourage members of the public to use the AED when it is needed, regardless of whether or not they have received any familiarisation or training. [AED Poster.pdf \(resus.org.uk\)](#)

Figure 1: Location Defibrillator Training Poster



However, there are advantages of having a core number of appropriately trained personnel in the vicinity of any AED. Training people to use an AED can be achieved quickly with minimal cost and gives these people the confidence to act quickly and use the AED to try to save a life. Nevertheless, use of the AED by others should never be discouraged or prohibited. People should not wait for a trained responder to arrive before calling 999, starting CPR, sending someone to retrieve an AED, and using an AED.

The Resuscitation Council UK has produced 'Lifesaver' (www.resus.org.uk/apps/lifesaver) and 'Lifesaver VR' (www.resus.org.uk/apps/lifesaver-vr), interactive video educational apps, which teach people how and when to give CPR and use an AED. These resources are free of charge and are very useful educational resources for this type of training. Lifesaver can be used easily on any computer, and on most smartphones and tablets.

The following links are available that give a short presentation and demonstration on how to deliver basic life support and the use of an automated external defibrillator, from the North West Ambulance Service NHS Trust:

Adult Emergency Life Support video:

[Learn how to restart a heart - YouTube](#)

[Learn how to restart a heart \(with British Sign Language\) - YouTube](#)

Child and Infant Emergency life support video:

[Learn how to restart a heart \(children and infants\) - YouTube](#)

7. Tameside Council's Defibrillator Grant Support Programme

Tameside Council has developed a community budget to support community groups, with £500 of funding towards the purchase, installation, or ongoing maintenance of an AED. This community budget is limited to £3,500 per year meaning that up to six AED schemes can be supported each year.

Tameside Council will consider applications for grants up to the value of £500. Whilst the Council would like to consider applications of a higher value, the limited nature of the funding means that this has been capped at £500 which should cover most AED installation costs, should groups choose to use the funding for this purpose. The funding can be used as a contribution towards the purchase of AED, its installation or other forms of maintenance as groups see fit.

Please note if a community group is requiring Tameside MBC to install the AED, for example on the public highway/TMBC owned building, the installation will not be provided free of charge, and in this instance, the £500 support funding could be used for costs associated with this installation.

We are aware that many individuals wanting to raise funds for and install an AED may not be associated with an existing community group. Tameside Council is not able to pay any of the grant funding into an individual's bank account, however we would still encourage any individuals who are interested in this to apply for the support and in this situation, the £500 grant can remain within the council, and via an internal transfer, this will fund council engineers to carry out the installation effectively free of charge. Please indicate in your application if you are an individual and if you would like to pursue this option. If you are an individual looking

into this but would like some additional support via existing community groups, or to find out more about the groups in your area, please contact Action Together for support and guidance: by telephone - 0161 339 2345, email - info@actiontogether.org.uk or visiting their website - <https://www.actiontogether.org.uk/>

To ensure the limited funding allocation is awarded as equitably as possible, a decision panel will meet every other month to review any applications received. This will be a multidisciplinary panel of officers of the council as well as colleagues from emergency services. The panel will review each application on its own merit, taking into account local need such as, distance from existing AED's, footfall in the vicinity, and local health outcomes, such as cardiovascular disease prevalence rates. These factors will be used in prioritising and determining which applications will be supported, in the event that the support fund is oversubscribed.

Decision panels will meet in April, June, August, October, December and February. The decision panel will not review applications during the pre-election period known as 'Purdah'⁵. The Council will ensure that the decision panel follow the application process and criteria that apply when awarding grants.

The decision panel will:

- Take into account only those considerations which are relevant to the decision being made (the criteria that apply to the specific policy)
- Follow the procedural requirements (the processes and procedures set out in the grant scheme)
- Base decisions on logic and rationale

Community groups submitting an application will receive an outline of the decision making process and rationale in writing. Tameside Council will maintain a record of all grants awarded.

Following a successful application, a grant agreement letter will be sent to the community group from Tameside Council. Community groups are asked to maintain records relating to the grant and submit an update on the project within a set time scale.

See appendix D for further details on grant conditions.

Community groups are kindly asked to adhere to the points made in section 3 of this policy when completing the application form. The application form for the Defibrillator Grant Support Programme can be found in Appendix B. Application forms are to be submitted to publichealth.enquiries@tameside.gov.uk.

⁵ <https://www.parliament.uk/site-information/glossary/purdah/>

8. Review

The policy will be reviewed annually to ensure it aligns to national guidance. The next review point will be April 2024.

9. Appendices

Appendix A - Defibrillator Maintenance Checklist Template

Location:

AED Type:

Serial Number:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Check battery status												
Check cabinet light												
Check spare adult/child electrode pads are sealed and in date												
Check disposal gloves are present												
Check scissors are present												
Check razor is present												
Check towel is present												
Check location sign above AED												
Remarks / Issues:												
Corrective Actions:												
Inspected by:												

Appendix B - Tameside Council's Defibrillator Grant Support Programme - Application Form

Name of Applicant:	
Contact Details of Applicant: Address Email Address Telephone Number	
Are you applying on behalf of a Community Group?	YES/NO
If yes, what is the name of the Community Group? <i>Include any details as to registered Charity number and address if applicable</i>	
Do you have the permission of the Community Group to submit this application?	YES/NO
Please outline where you like the automated external defibrillator to be installed, and why? Please outline, if relevant, the name of the building (including any permissions granted), address etc. Top tips to consider: <ul style="list-style-type: none"> • An AED should be clearly visible, so can it be placed where light is available. • Check if there are any other AED nearby. • Have the AED in a lockable unit. 	
What is the value of the grant application? Maximum £500.	
What do you intend to use the grant monies for? For example, funding towards the purchase of an AED or towards the installation, or maintenance.	

<p>What other funding sources do you have?</p>	
<p>What date do you intend to have the AED installed by?</p> <p><i>Don't worry if you don't have an exact, please just give such as approx. time period (e.g. Spring 2023, or as soon as possible).</i></p>	
<p>Who will be the named guardian of the AED?</p> <p>Please provide their contact details.</p>	
<p>Please can you confirm that you will:</p> <ul style="list-style-type: none"> • Register the AED with the NHS via the national defibrillator network, The Circuit. • Ensure that it is checked regularly, to establish that it is in good working order and that the defibrillator pads are in date. AED sites should have at least one guardian but preferably two, who are responsible for checking the site, and logging their checks on The Circuit. • Maintenance costs of the AED are covered, include new pads when they go out of date or they have been used. Maintenance should be in accordance with the recommended guidelines and any manufacturer's instructions. <p>1</p> <ul style="list-style-type: none"> • Adhere to the UK's Resuscitation Guidelines. 	

Appendix C – Health & Safety in Workplaces (further information)

While there are no legal requirements to provide automated external defibrillators in the workplace and no specific regulations which cover the provision or use of automated external defibrillator at work. The Health and Safety (First-Aid) Regulations 1981 requires employers to provide equipment and facilities which are adequate and appropriate in the circumstances for enabling first-aid to be rendered to their employees if they are injured or become ill at work. According to the Health and Safety Executive (HSE), where the needs assessment identifies the need for automated external defibrillators in the workplace, the Provision and Use of Work Equipment Regulations 1998 will apply. This requires the employer to provide information and written instructions on how to use the automated external defibrillator, and keep records of the device being regularly checked.

Appendix D - Grant Conditions

Tameside Council will audit all grants rewarded, and will maintain a record.

Following a successful application and in order to ensure that monies are used in an appropriate manner an appropriate form of grant agreement including submission of a monitoring report following completion of the project or activity that was grant funded, will be required.

The Council reserves the right to monitor the use of the grant and ask for evidence to support an application. The funded organisation must allow reasonable access to premises/accounts upon request from the Council.

Organisations must retain records relating to the grant for an appropriate period. If organisations do not supply satisfactory monitoring reports and supporting information in full and within the set time scale, they may be asked to repay the grant funding to the Council.

Failure to comply with the conditions of the grant may be taken into account when considering any further applications for grant funding made by the same organisation in the future.