Out-of-hospital Cardiac Arrest (OHCA – an often fatal condition where the heart stops beating and needs CPR +/- defibrillation) affects 80,000 patients per year in the UK. Of those a resuscitation attempt is carried out by the emergency services on approximately 30,000 people but less than 10% survive. Most (around 80%) out-of-hospital cardiac arrests (OHCAs) occur in the home, and around half are witnessed by another person. Early CPR and defibrillation significantly improves the chance of survival.

Resuscitation Council UK, St John Ambulance, and British Heart Foundation are committed to giving people, across the UK, the skills they need to save a life – and having access to a defibrillator is essential in achieving this. Please read our joint briefing, explaining why public-access to defibrillators shortens the time ‘from collapse to first shock’ in community settings across the UK:

**Key Recommendations:**

- ✔️ Public-access defibrillators should be located in high-risk areas first
- ✔️ Defibrillator guardians should register their device with The Circuit: the national defibrillator network which allows all ambulance services to see the data
- ✔️ Government and local authorities should invest in community first aid education
- ✔️ Every secondary school should offer, where possible, at least one public-access defibrillator
- ✔️ Insurance cover should be provided for unlocked defibrillator cabinets

**Background**

Across the UK, survival from an out-of-hospital cardiac arrest remains low. One major reason so few people survive is that defibrillation is not provided quickly enough. The victim’s chance of survival from a cardiac arrest falls by about 10% with every minute that defibrillation is delayed. However, the chance of survival from an out-of-hospital cardiac arrest can be increased two-to-threefold by the immediate provision of bystander CPR and defibrillation.

- ✔️ Public-access defibrillators should be located in high-risk areas first

Public-access defibrillation is most needed in areas of high out-hospital cardiac arrest incidence. Yet, research indicates that across the UK, there is a mismatch between Automated External Defibrillator (AED) density and OHCA incidence. At present, AEDs are disproportionately placed in more affluent areas, with a lower residential population density. This contrasts with poorer parts of the country where incidence of cardiac arrest is higher. International evidence also confirms that out-of-hospital cardiac arrests disproportionately affect deprived communities and ethnic minorities. Targeting public-access devices in areas of poor health and high OHCA incidence, could significantly increase the chances of survival in these communities.
Defibrillator guardians should register their device with The Circuit: the national defibrillator network which allows all ambulance services to see the data

We believe it is crucial to take a data-led approach to understand where exactly defibrillators should be placed to be most effective. That is why we are working with key partners to support The Circuit: the national defibrillator network, to locate and register the UK’s estimated between 100,000 and 200,000 defibrillators. The Circuit’s aim is to map all AEDs, so that when someone has a cardiac arrest, 999 call handlers can direct bystanders to the nearest registered defibrillator while they wait for the ambulance to arrive.

It is estimated that tens of thousands of defibrillators remain unknown to ambulance services, meaning emergency services cannot direct bystanders to them in the event of a cardiac arrest, an ultimately help save a life. 70,000 AEDs are now registered on the Circuit with the aim to increase to 100,000 by end of 2023, with support from The Daily Express’ “Complete The Circuit” crusade.

MPs must urge those that have not registered to do so immediately so many more lives can be saved. If the device is registered on the Circuit, the call-handler can direct bystanders to fetch it when they call for help. This will help to decrease the time to defibrillation.

Government and local authorities should invest in community first aid education

We believe the government and local authorities must prioritise expanding public access to first aid training in community settings. Research has found defibrillators are being used in just 1 in 10 cardiac arrests where the lifesaving devices are available and only 15% of the public would feel confident using a defibrillator. This underlines the urgent need for better awareness and education in local communities.

Empowering local communities to learn first aid is vital to improving survival rates from cardiac arrest. It is estimated that 1,000 lives could be saved every year in England if members of the public receive and feel confident in their CPR and defibrillation training, helping to reduce NHS pressures. St John Ambulance is working in partnership with NHS England to develop a national CPR network of Community advocates to champion the importance of community first aid. This aims to save up to 4,000 lives each year and increase OHCA survival rates to 25% by 2028 as part of the NHS Long-Term Plan.

Every secondary school should offer, where possible, at least one public-access defibrillator

As part of the Department for Education’s planned defibrillator rollout, RCUK requested that the Government, where possible, make available at least one public-access device per school. Evidence shows that accessing a device within 3-5 minutes of a cardiac arrest increases the chance of survival by over 40%. A recent study found that schools with public-access devices could be effective in treating over two thirds of OHCAs within five minutes.

Restricted access to defibrillators critically diminishes chances of survival from cardiac arrest. There have been tragic cases reported where locked devices in schools have prevented early defibrillation. Research suggests improving public-access of AEDs within a school setting can significantly increase their overall use.

Insurance cover should be provided for unlocked defibrillator cabinets

Evidence confirms that, in spite of the widespread use of unlocked ‘Emergency Ready’ cabinets, instances of theft and vandalism of such defibrillators are rare. And yet, at present, there is an alarming inconsistency in the industry’s approach when offering cover for ‘Emergency Ready’ cabinets in community settings. This is threatening many lives across the United Kingdom. We recognise the priority to get a defibrillator and apply it to the person in cardiac arrest with an absolute minimum of delay. Unlocked cabinets allow immediate access to a defibrillator in a situation where seconds count.