

HM Senior Coroner
Birmingham and Solihull Areas
Coroner's Court
50 Newton Street
Birmingham
B4 6NE

By email and by post

16th December 2016

Dear Mrs Hunt,

Your ref: 114060 – JANE LOUISE REASON (LH/RP)

Response to the Regulation 28 Report to Prevent Further Deaths issued by the Senior Coroner's Office for the Birmingham and Solihull Areas dated 25 October 2016

Thank you for your letter dated 25th October 2016 enclosing your Report to Prevent Further Deaths in this very unfortunate matter. As Director of the Prevention, Survival and Support Directorate for the British Heart Foundation (BHF) I have been asked by our Chief Executive, Simon Gillespie, to respond on behalf of the BHF to the Matters of Concern raised in your report.

We acknowledge and fully support that improved awareness and accessibility of public access defibrillators would be of significant benefit in preventing similar unnecessary deaths. The importance of the general public having the confidence to deliver cardiopulmonary resuscitation (CPR) and use a defibrillator in an emergency is core to the work of the BHF. We are grateful for the opportunity to respond on this matter as part of your investigation into this issue.

The BHF is a company limited by guarantee, incorporated in England on 28 July 1961, and with a registered office at Greater London House, 180 Hampstead Road, London NW1 7AW. It is a registered charity in England and Wales (charity number 225971) and in Scotland (charity number SC039426).

The purposes for which the BHF is established (i.e. its charitable objectives), as set out in its Articles of Association, are:

".....to attack and defeat diseases and conditions of the heart and circulation and other diseases, illness or conditions, by undertaking and promoting research for the public benefit into their cause, diagnosis, treatment and prevention, promoting their diagnosis, treatment and prevention, educating the public and alleviating suffering and promoting the welfare of persons afflicted and those who care for such persons."



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The BHF can only carry out activities that fall within its charitable objectives, but it is not under a legal duty to carry out any particular activity that may fall within these objectives either by statute or otherwise, unless it contractually agrees to do so. Like all charities, its overall purposes must be to the benefit of the public.

Since it was established in 1961, the BHF has powered critical advances in heart health, from pacemakers to statins. Cardiovascular disease kills more people in the UK than all cancers put together and the BHF funds over half of all cardiovascular research in the UK.

With regards to the Matters of Concern we recognise that immediate access to a defibrillator is a key part of the chain of survival in ensuring more people survive from out-of-hospital cardiac arrest. There are more than 30,000 out-of-hospital cardiac arrests in the UK each year and currently less than 1 in 10 people survive. This is partly because many people don't have the skills, confidence and ability to step in and help. Around 80% of out-of-hospital cardiac arrests happen in the home which is why CPR skills and defibrillation awareness are so important. In instances of an out-of-hospital cardiac arrest, calling 999, immediate CPR and access to a public access defibrillator (PAD) are essential to maximise the chances of survival indeed, all are essential parts of the chain of survival which are the internationally recognised set of steps to increase the chances of survival for someone who's had a cardiac arrest. Effective CPR means that the casualty is more likely to be kept in a shockable heart rhythm and this coupled with the placement of PADs in public places helps to reduce the time delay between cardiac arrest and shock from the defibrillator and time is an important factor. PADs are specifically designed to be used by members of the public as well as first responders in the event of a cardiac arrest and no training is required as they have spoken instructions and won't deliver a shock unless necessary.

The BHF is committed to tackling the low out-of-hospital cardiac arrest survival rates in the UK by:

- increasing the rate of bystander CPR by providing free CPR training kits to schools and the general public; and
- increasing the rate of bystander PAD use by increasing awareness, availability and visibility of PADs.

The BHF has a clear five year strategy to 2021 and we are currently investing time, money and resources in a number of projects to improve survival rates from out-of-hospital cardiac arrest.

Training resources

Making CPR training more accessible, the BHF has a programme called Call Push Rescue which is a unique self-directed learning kit that is free to eligible secondary schools and community groups. There are currently over 2300 secondary schools and over 1800 adult and youth community groups who are part of this programme. We are also working with partners including Scotland and Greater Manchester fire and rescue services to support CPR training in schools and local communities. Furthermore the BHF works with a number of corporate partners, BHF retail shops and workplaces to offer CPR training to employees. We are continuing to support our 2000 existing Heartstart schemes who teach a more in depth first aid course covering choking, bleeding and CPR skills and this has meant the BHF has helped to train over 1.6 million people since 2014.

The BHF has been a key partner in running national awareness campaigns about the importance of bystander CPR skills on "European Restart a Heart Day" for 3 years and have recently worked with a number of partners including the UK Resuscitation Council, British Red Cross, St John Ambulance and the 14 UK ambulance services to provide resources and support training of 150,000 young people in one day at a number of events across the UK on 18th October 2016.

Improving accessibility and availability of PADs

The BHF provide part funding to community groups to enable them to purchase a PAD for their local area and have awarded 435 PADs already in 2016 and we are currently managing and distributing the £1,000,000 PAD funding project awarded to the Department of Health from the treasury budget in 2016 which will provide more PADs to local communities in England. The BHF are working closely with the UK Resuscitation Council to redesign the signs for PADs in order to improve visibility and increase bystander use in public access areas.

There are currently an unknown number of PADs across the UK (the figure is estimated to be 100,000) and importantly there is no central database which captures information regarding the location of these PADs for the UK ambulance services. If emergency call responders at the ambulance service were able to locate the closest defibrillator via a national database then they could direct a bystander to the PAD and this may impact on improving survival rates. The BHF are investing funds to review options to develop a National PAD database, which would be accessible to all ambulance services and make locating the PADs much easier.

Research

The BHF provides grant funding for a UK wide out-of-hospital cardiac arrest registry at Warwick University which will support audit of service improvement. The BHF and its partners have developed a series of initiatives to try to improve bystander CPR and PAD use, but how effective these projects are is not known. The Out of Hospital Cardiac Arrest Outcomes project at Warwick will collect information to work out the best ways of improving the bystander response to cardiac arrest. We also have links with other countries in Europe and with hospital specialists to further develop our understanding of the best ways to improve survival from cardiac arrest.

Key collaborations

The BHF are convening expert advisory groups with representation from the four nations to improve out-of-hospital cardiac arrest survival rates through a system wide approach and we are part of a number of key collaborations. The BHF are working with the NHS & Welsh Government to develop an out-of-hospital cardiac arrest strategy in Wales. We have been supporting the Community Resuscitation steering group in England chaired by [REDACTED] to develop a national framework document "resuscitation to recovery" to improve care of people with out-of-hospital cardiac arrest in England. BHF are a member of the Scottish Government Out of Hospital Cardiac Arrest strategy delivery group which aims to improve survival rates in Scotland.

In conjunction with the Resuscitation Council we have recently developed "A guide to Automated External Defibrillators" which provides information about PADs and how they can be deployed in the community to help resuscitate victims of sudden cardiac arrest.

Genetic Information Service

In addition to significant funding in medical research into inherited heart conditions that can cause sudden death, we have also invested in implementing the research finding in clinical practice so that families affected by an inherited heart condition can receive the appropriate care quickly. We also provide a Genetic Information Service for families affected by inherited heart conditions and support families where a diagnosis of an inherited heart condition has been made in a living or a deceased family member. Coroners are also encouraged to call the Genetic Information Service for advice if they suspect an individual has died due to an inherited heart condition and need advice on how to refer the surviving family members for treatment. To date we have had two meetings with the Chief Coroner for England to raise awareness of the service amongst coroners and coroners' officers.

In summary we are actively engaged in providing access to training resources to teach CPR skills and PAD familiarisation on a range of programmes and provide access to funding for PADs but we have no authority to carry out these programmes as a matter of public policy as we are not a government institution or public authority. However, the BHF recommends that all young people are given access to CPR training and defibrillator awareness while at secondary school and would ask that you support this recommendation by communicating this to the Department for Education.

We hope that the information provided above sufficiently clarifies the BHF's position with regards to the Matters of Concern raised. Should your office require further explanation the BHF is more than happy to offer its assistance in any way.

Yours Sincerely,



Director – Prevention, Survival and Support
On behalf of the British Heart Foundation