

<b>REPORT TO:</b>		Cabinet	
<b>DATE:</b>		09 June 2021	
<b>REPORT OF:</b>		Communities and Wellbeing Scrutiny Panel	
<b>REPORT AUTHOR:</b>		Ben Caulfield, Scrutiny and Policy Officer	
<b>TITLE OF REPORT:</b>		Scrutiny Panel Report – Council Automated External Defibrillators (AED)	
<b>EXEMPT REPORT (Local Government Act 1972, Schedule 12A)</b>	<b>No</b>	Not applicable	
<b>KEY DECISION:</b>	<b>No</b>	If yes, date of publication:	

## 1. Purpose of Report

- 1.1 To report the findings of the Automated External Defibrillator (AED) Scrutiny Panel, established by the Communities and Wellbeing Overview and Scrutiny Committee on 25<sup>th</sup> November 2020 to Cabinet.

## 2. Recommendations

That Cabinet

- 2.1 **Delegates responsibility to the Chief Executive to make suitable arrangements for the ongoing management of Council AEDs having regard to the recommendations in the attached Scrutiny report.**
- 2.2 **Agrees that the required budget of up to £12,000 annually be found from the remaining underspends budget for 2021/22 to be followed by a growth bid for budget provision for subsequent years.**
- 2.3 **Agrees that, having public AEDs which are not available for use is worse than having no AED at all. Therefore, officers in consultation with the North West Ambulance Service (NWS) should write to the building owners/occupiers and seek agreement that they will carry out weekly checks, reporting to NWS and maintenance or return the AED to the Council.**
- 2.4 **Agrees that, should any AEDs be returned, officers in consultation with NWS consider whether it would be appropriate to relocate any of the AEDs or**

**decommission them, having regard to the recommendations in the attached Scrutiny report.**

- 2.5 Agrees that Officers give consideration to what action should be taken at the end of each AED units shelf life.**
- 2.6 Agrees that weekly checks, reporting and maintenance of the AED be included in any new lease agreement for the Arthur Wilson Centre.**
- 2.7 Agrees that the above recommendations should be carried out as soon as practicable in order to get the AEDs back online quickly.**
- 2.8 Agrees that officers liaise with NWS to ensure they are fully aware of any changes to arrangements for AEDs.**
- 2.9 Agrees that officers be asked to report back to the Communities and Wellbeing Overview and Scrutiny Committee in approximately 6 months time to provide an update.**

### **3. Reasons for Recommendations and Background**

- 3.1 At its meeting on 25th November 2020, the Communities and Wellbeing Overview & Scrutiny Committee resolved to establish a Scrutiny Panel to look at current issues associated with AEDs (Automated External Defibrillators) in Hyndburn. The Scrutiny Panel would be called “The Hyndburn AED Review.”**
- 3.2 It was determined at that meeting that there were several issues causing problems with AEDs in Hyndburn, and the panel wished to make recommendations to resolve these issues urgently. The Committee had received detailed reports regarding AEDs in Hyndburn but felt the need to carry out a more detailed review, with a particular focus on resolving the issues identified in the report.**
- 3.3 An automated external defibrillator (AED) is commonly referred to as a defibrillator or ‘defib’. It is a device that gives an electric shock to the heart through the chest wall to someone in cardiac arrest. Without defibrillation a person in cardiac arrest will die. There are defibrillators in many public places such as shopping centres, airports, train stations, schools and businesses which anyone can use - even those without awareness training - in the event of a cardiac arrest.**
- 3.4 In the UK, around 60,000 people have an out-of-hospital cardiac arrest every year and less than one in 10 people survive. One of the main reasons for this is the lack of action from bystanders before ambulance crews arrive. Defibrillation within five minutes can result in survival rates as high as 70%. For this to be happen, we need bystanders to take action by using defibrillators in the community. For that to happen, we need defibrillators to be made as readily available as fire extinguishers. For each minute without defibrillation, a person’s survival chances decrease by 10%.**

- 3.5 In 2016, Huncoat and Central/Springhill Area Councils authorised capital expenditure on 9 Defibrillators which were installed at publically accessible sites across these areas. These were installed on a mixture of Council, private and third sector buildings in strategic places in line with guidance from NWAS. As part of the installation process, the Council, with support from NWAS, produced an agreement which laid out the responsibilities of each party (Council, NWAS and building owner) with regards to the ongoing maintenance of each AED. Building owners agreed to supply electricity to the cabinet and to carry out regular visual inspections to ensure the AED was functional, and report any issues to NWAS.
- 3.6 Since then, additional AEDs have been installed, including directly on Council buildings, via further Area Council expenditure and through Area Council grants. There are currently 19 AEDs which the Council have had some involvement with. There are numerous other AEDs across Hyndburn owned by other organisations, charities and private businesses across the Borough.
- 3.7 There is currently no single Council department with responsibility for our AEDs. At the time of writing, 8 of the AEDs are currently offline on the NWAS system, meaning they are not available for public use. There are no issues with AEDs on Council buildings, the problems mainly lie with those AEDs purchased by the Council and located on non-Council buildings or with those AEDs purchased by third parties using an Area Council Grant.
- 3.8 A budget requirement of £12,000 is required annually in order for the Council to maintain the AEDs and for the officer time to carry out the required weekly checks. The budget requirement is viewed as a maximum and can be reduced significantly in subsequent years by implementing measures discussed in the appendix, such as seeking agreement from the current building owners/occupiers to carry out checks and basic maintenance or relocating AEDs to Council buildings where weekly visual checks can be carried out more efficiently by Council staff.
- 3.8 The AED Scrutiny Panel investigated the issues and produced the report attached in Appendix 1.

#### **4. Alternative Options considered and Reasons for Rejection**

- 4.1 Remain as is – This is not recommended as the current system is not working, 8 AEDs are currently offline and therefore not available should someone go into cardiac arrest in the vicinity of one of these. During the course of this review the Facilities Team have worked to ensure all the AEDs on Council buildings are back online but the problem still persists with those not on Council buildings.
- 4.2 Decommission the AEDs – This is not recommended as although it is recognised that the provision of public AEDs is not a statutory duty of the Council, they are an important tool which have been proven to save lives in the community. Decommissioning should only be considered for those AEDs which are returned to the Council and where no suitable place for relocation can be found, or where the AED unit is no longer viable.

## 5. Consultations

5.1 The Scrutiny Panel consulted with the following to produce its report:

- NWAS
- HBC Regeneration Team
- HBC Policy Team
- Cllr Jenny Molineux, Portfolio Holder for Health (2020-21)
- HBC Corporate Management Team
- Cllr Miles Parkinson, Leader of the Council

## 6. Implications

<b>Financial implications (including any future financial commitments for the Council)</b>	There will be a financial implication of up to £12,000 per year to be found from the remaining underspends budget for 2021/ 22 to be followed by a growth bid for budget provision for subsequent years. The budget requirement for subsequent years may be lower.
<b>Legal and human rights implications</b>	Legal Services will be asked to assist with any agreements that may be needed with building owners to facilitate the relocation of the AED's
<b>Assessment of risk</b>	NA
<b>Equality and diversity implications</b> <i>A <a href="#">Customer First Analysis</a> should be completed in relation to policy decisions and should be attached as an appendix to the report.</i>	Attached.

## 7. Local Government (Access to Information) Act 1985: List of Background Papers

7.1 *Agenda, reports and minutes of the Communities and Wellbeing Overview and Scrutiny Committee on 25<sup>th</sup> November 2020*  
<https://democracy.hyndburnbc.gov.uk/ieListDocuments.aspx?CId=129&MId=2530&Ver=4>

***If the report is public, insert the following paragraph. If the report is exempt, contact Member Services for advice.***

**8. Freedom of Information**

- 8.1 The report does not contain exempt information under the Local Government Act 1972, Schedule 12A and all information can be disclosed under the Freedom of Information Act 2000.