

# **PE1989/H: Increase defibrillators in public spaces and workplaces**

## **Minister for Public Health and Women's Health written submission, 2 December 2024**

Thank you for your letter of 6 November 2024, regarding the issues raised during the Committee's consideration of *PE1989: Increase defibrillators in public spaces and workplaces*. I wish to acknowledge the Committee's concerns that there appears to be growing evidence of a lack of urgency from the Scottish Government to make progress on this issue, and reassure you that this is not the case.

The Scottish Government is committed to improving survival from out of hospital cardiac arrest (OHCA) in Scotland and continues to work actively to do so. We are a key member of the Save a Life for Scotland (SALFS) partnership and work closely with our partners to ensure improvements across the whole chain of survival, including improving defibrillator access and usage.

I recognise that the Committee's view is that increased access to defibrillators should be progressed with greater urgency. Before I directly address your specific questions, I would like to take this opportunity to outline the various factors which need to be considered, as increasing the number of defibrillators is just one factor relevant to increasing their usage.

In fact, although the number of public access defibrillators (PAD) registered on the Circuit has more than doubled in Scotland since 2019, this has not coincided with a similar increase in defibrillator usage in the event of an OHCA<sup>i</sup>. International evidence shows that the optimal placement, availability and accessibility of the equipment, and bystander confidence to use these devices are other vital factors which must also be addressed to increase usage.

The availability of PAD requires that there is an accessible PAD within a relevant distance to the OHCA, and that the location of the device is known to a bystander or to the emergency call handler. In an incident of OHCA, Scottish Ambulance Service call handlers use the Circuit to locate nearby PAD and direct bystanders to it. SALFS partners continue to promote the Circuit and to increase the number of PAD registered in Scotland.

However, despite the increase in registered PAD in Scotland from August 2019 to March 2022, the proportion of OHCA occurring within the optimal 100m range of a PAD showed only a modest increase<sup>ii</sup>. The data also suggests that PAD are more likely to be used if they are located within 100m or 200m of OHCA. This is consistent with international evidence suggesting that closer PAD proximity to OHCA results in higher rates of PAD usage. This indicates that a more data-driven approach to PAD placement is required to ensure that they are in optimal locations.

To achieve this, the Scottish Government and St John Scotland funded the Resuscitation Research Group to develop a tool, PADmap, which will support organisations and communities with evidence on the best location to place their PAD to maximise its impact. PADmap is in the final stages of development and will be free for anyone in Scotland to use.

The accessibility of PAD is also an important factor in increasing usage. Again, although the number of registered PAD has increased, the proportion which are not accessible 24/7 has also increased<sup>iii</sup>. We are working with our SALFS partners to address this. To maximise

defibrillator accessibility, they are usually best mounted on the outside of buildings and placed in unlocked cabinets.

Lack of bystander confidence can also create barriers to defibrillator usage. Therefore, SALFS partners include PAD familiarity in their CPR training and awareness raising efforts.

It is important to note that early defibrillation can be a lifesaving intervention in many OHCA, but that PAD are not the only way this can be achieved. Whilst retrieving a defibrillator from a fixed, publicly accessible location is an effective solution in a high footfall environment, it is likely that other approaches, such as community responders carrying defibrillators, should be considered to increase the opportunity for early defibrillation across the range of settings where OHCA occur in Scotland.

We are therefore working with our SALFS partners to support innovation in this area. This includes encouraging the use of [GoodSAM](#), an app to crowdsource volunteer responders to help in instances of OHCA, and learning from the successful [Sandpiper Wildcat](#) project which supports on-call first responder volunteers, travelling with a defibrillator to the scene of an OHCA.

## Funding

You have asked whether I am confident that relying on community fundraising, businesses and organisational resources to purchase defibrillators will ensure that the Scottish Government meets the targets in the Out of Hospital Cardiac Arrest Strategy (2021 – 2026) which are:

- 20% of all cardiac arrests will have a defibrillator applied before the ambulance service arrives.
- Increase survival from out-of-hospital cardiac arrest to 15%.

Firstly, I would like to note my gratitude to all defibrillator guardians and those who fundraise or identify resources to place a defibrillator. They are making a vital contribution to efforts to increase survival from OHCA in Scotland.

A number of organisations already provide advice, support and funding opportunities for the purchasing and maintenance of defibrillators. This includes:

- The British Heart Foundation: [Defibrillators - BHF](#)
- St Johns Scotland [Public Access Community Defibrillators | St John Scotland](#)

As I have outlined earlier, we must consider several drivers of defibrillator usage to achieve our targets. I am confident that our partnership approach with SALFS is making progress towards these. For example;

- The rate of defibrillator deployment by the public continues to increase and in 2022-23, 9.8% of worked arrests had a PAD in place on arrival<sup>iv</sup> of the ambulance service compared to 2.5% prior to the first OHCA strategy in 2015<sup>v</sup>.
- In 2022-23 overall, 30-day survival was 9.1% compared with a mean survival in the five years (2010 – 2015) before the launch of the first OHCA strategy of 6.2%<sup>vi</sup>.

Prompt defibrillation is just one aspect of improving survival, and we continue to work with our partners to support improvements across the whole chain of survival. For example, the early delivery of CPR is also vital and since 2015 SALFS partners have equipped over 725,000 people in Scotland with the skills to perform CPR. As a result, bystander CPR rates have increased from 43% before the strategy to 66% in 2022/23<sup>vii</sup>.

## **Health and Safety at Work etc. Act 1974**

The Committee has also asked what the rationale is for not engaging with the UK Government on the issue of defibrillator provision through the Health and Safety at Work etc Act 1974.

I noted in my previous response that any legislative action would have to be based on strong evidence that it would achieve the aim of improving OHCA survival, and that, as the Health and Safety at Work etc. Act 1974 is a reserved policy, it is for the UK Government to fully assess the evidence and make a decision on this matter.

Our rationale for not engaging with the UK Government on this, is that there is currently a lack of strong evidence for the effectiveness of enacting legislation to mandate deployment of PAD in designated places. As it is unclear whether such legislation would be an effective way to improve OHCA outcomes, and as it is not a devolved policy area, we have focused our efforts on our demonstrably effective approach, working as part of the SALFS partnership, to address the issues I have outlined earlier in this response.

In case further context is helpful to the Committee, the health and safety system in Scotland is led by the Health and Safety Executive (HSE) and the [Health and Safety \(First-Aid\) Regulations 1981](#) require employers to provide adequate and appropriate first aid equipment and facilities to employees who are injured or become ill at work.

The regulations do not prescribe the personnel or equipment each business should have. Instead, employers must undertake a [first aid needs assessment](#) to determine this. If the needs assessment determines an employer should have a defibrillator on site, they will be expected to provide one. Although the regulations only cover employees, accompanying guidance strongly recommends that employers take account of others who might be affected by their business, such as members of the public, in their needs assessment. Additional information is on HSE's website: [Frequently asked questions on first aid - First aid at work](#).

I hope this further information is helpful.

Yours sincerely,

**Jenni Minto MSP**

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<sup>i</sup> Scottish Ambulance Service, Scotland's Out-of-Hospital Cardiac Arrest Report 2019 – 22, 2023, Accessible via URL: [cardiacreportv5.pdf \(scottishambulance.com\) \(p.45\)](#).

<sup>ii</sup> Scottish Ambulance Service, Scotland's Out-of-Hospital Cardiac Arrest Report 2019 – 22, 2023, Accessible via URL: [cardiacreportv5.pdf \(scottishambulance.com\) \(p.45\)](#).

<sup>iii</sup> Scottish Ambulance Service, Scotland's Out-of-Hospital Cardiac Arrest Report 2019 – 22, 2023, Accessible via URL: [cardiacreportv5.pdf \(scottishambulance.com\) \(p40\)](#).

<sup>iv</sup> Scottish Ambulance Service, Out-of-Hospital Cardiac Arrest Report 2022-23, Accessible via URL: [OHCA report 2022-23 \(scottishambulance.com\) \(p.26\)](#).

<sup>v</sup> Scottish Ambulance Service, Scotland's Out-of-Hospital Cardiac Arrest Report 2019 – 22, 2023, Accessible via URL: [cardiacreportv5.pdf \(scottishambulance.com\) \(p4\)](#).

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<sup>vi</sup> Scottish Government, Scottish Out-of-Hospital Cardiac Arrest data linkage project: 2015/16 – 2016/17 results, 2018, Accessible via URL: [Scottish Out-of-Hospital Cardiac Arrest data linkage project: 2015/16 – 2016/17 results - gov.scot \(www.gov.scot\) \(p.5\)](https://www.gov.scot/publications/scottish-out-of-hospital-cardiac-arrest-data-linkage-project-2015-16-2016-17-results/pages/5.aspx).

<sup>vii</sup> Scottish Ambulance Service, Out-of-Hospital Cardiac Arrest Report 2022-23, Accessible via URL: [OHCA report 2022-23 \(scottishambulance.com\)](https://www.scottishambulance.com/reports-and-publications/ohca-report-2022-23) (p.25).