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HEART ALIVE PROGRAM UPDATE

The Community and Health Services Committee recommends the adoption of the recommendation contained in the following report dated February 17, 2011, from the Commissioner of Community and Health Services.

1. RECOMMENDATION

It is recommended that Council receive this report for information.

2. PURPOSE

This report provides a summary of the successes of the Heart Alive program, the Region's Public Access Defibrillator program. In addition, this report will outline future initiatives to support the placement of Automated External Defibrillator (AED) devices within the region and provide Cardio Pulmonary Resuscitation (CPR) and First Aid training to Regional and local municipal staff.

3. BACKGROUND

Heart Alive began in 2003 with the placement of 65 AEDs at Regional facilities

Regional Council approved the creation of the Heart Alive program in 2003. Since that time, Heart Alive has placed over 65 AEDs throughout Regional buildings and work yards. In addition, over 500 staff members have been trained in the operation of the AED devices.

122 additional AEDs have been placed in the Region since the inception of Heart Alive through 100% funding from the Ontario Heart and Stroke Foundation

In 2008 the Ontario Heart and Stroke Foundation funded 100% of the costs to place 96 additional AEDs in local municipalities and trained over 400 targeted responders through Heart Alive. In 2010 the Ontario Heart and Stroke Foundation funded further AEDs through Heart Alive allowing AEDs to be placed with York Region Transit Inspectors, Supervisors and Enforcement Officers. AEDs were also installed and staff members were trained in Blue Door Shelters. There were also enhancements to the AED installations in local municipalities. This combined initiative placed an additional 26 AEDs in the Region.

All priority areas within Regional and local municipal facilities are protected with AEDs. Priority areas include places of public gathering or locations that have high daily attendance of staff and visitors. Should new funding become available from the Ontario Heart and Stroke Foundation, it will offer opportunities for placements of further AEDs with partner community agencies.

EMS responds an average of 72 times per year to AED-equipped Regional facilities

Each year, EMS responds to medical emergencies occurring at Regional facilities. A response review of the past two years shows that an average of 291 EMS responses occur each year at various Regional facilities. Typically, trained Heart Alive responders or security personnel, deploy AEDs and first aid kits to provide assistance to patients prior to EMS arrival. The rapid deployment of AEDs in these facilities ensures that these patients have timely access to potentially life-saving care within two to three minutes of an incident.

Automated External Defibrillators saved two people in the Region

It is difficult to quantify the number of lives saved since the inception of the Heart Alive program as a large number of people have been trained in first aid and CPR techniques that may have used the acquired skills outside of the Heart Alive program. However, there have been two instances where lives have been saved because of public access AEDs in the Region since the program inception. In the last half of 2009, two people were saved from sudden cardiac arrest as a result of an AED being immediately available. One victim was a resident who collapsed while travelling on a GO train and the second was a resident who collapsed while attending a Town of Georgina Council meeting.

4. ANALYSIS AND OPTIONS

The Heart and Stroke Foundation of Canada recommends wide-spread access to AEDs and training in CPR

In its position statement on Public Access to Automated Defibrillators, the Heart and Stroke Foundation of Canada states that Canadians should have widespread access to Automated External Defibrillators, particularly in locations which are at high risk for incidents of sudden cardiac arrest (one can expect one sudden cardiac arrest per 1,000 persons over the age of 35). In addition, Canadians should be trained and encouraged to apply CPR and AED skills when needed.

Starting in 2012, AED-equipped members of the public will stop the EMS response-time clock

In 2012, a new response time approach will provide for emergency ambulance response that is focused on making a difference to the health outcome of patients who are the most in need of receiving rapid pre-hospital care. To this end, the Ambulance Act will recognize that the response time clock is "stopped" when any person who is equipped to provide defibrillation, attends to a sudden cardiac arrest patient. The amendments made to the Ambulance Act acknowledge the investments made in public access defibrillators as enhancements to EMS performance.

Heart Alive CPR and First Aid training may be expanded to Regional and local municipal staff realizing reduced training costs

The Ontario Workplace Safety and Insurance Board (WSIB) regulation 1101 requires all employers to ensure that first aid boxes and stations are in the charge of workers who hold valid first aid certificates issued by a training agency recognized by the WSIB.

The Heart Alive program is well developed and established; however, at present it is not recognized by WSIB. In 2011, York Region EMS will be submitting the Heart Alive First Aid and CPR program to WSIB for recognition. There is no cost to EMS to complete the WSIB recognition process.

Once recognized by WSIB, the Heart Alive program may be used to train Regional and local municipal staff wishing to obtain valid CPR and First Aid certificates. It is estimated that training costs to municipal departments for CPR and First Aid training would be 40% to 50% less through Heart Alive compared to external providers.

5. FINANCIAL IMPLICATIONS

Costs for maintaining Regional AEDs are carried in the EMS operating budget

AEDs have a 10-year life cycle. Each AED costs approximately $1,500 to purchase and $295 in annual maintenance. Costs to maintain the existing Regional AEDs are carried in the EMS operating budget. Currently, 76 AEDs are directly maintained by Heart Alive with an annual maintenance cost of $22,420. AEDs that have been placed in local municipalities are maintained and replaced at the cost of the respective local municipality.

Cost savings in First Aid and CPR training

As CPR and First Aid training delivered by EMS would be provided on a charge back basis to the receiving municipal departments, there is no net impact to the EMS operating budget, while Regional and local municipality training budgets will realize cost savings.

6. LOCAL MUNICIPAL IMPACT

By increasing the number of staff that are trained in First Aid and CPR, there is an increased chance that individuals requiring medical assistance will be provided appropriate, potentially life-saving interventions prior to the arrival of paramedics.

7. CONCLUSION

Since its inception in 2003 the Heart Alive program has been very successful in implementing a community-based program prepared to attend to victims of out-of-hospital cardiac arrest with an AED and able responders. Moving forward, there are further opportunities to reach larger staff numbers who require First Aid and CPR training. In doing so, associated training costs will be reduced, while broader staff participation will contribute to the vision of a safer community through education and awareness.

For more information on this report, please contact Norm Barrette Chief/General Manager, Emergency Medical Services at Ext. 4704.

The Senior Management Group has reviewed this report.