

Written Ministerial Statement

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Health, Social Services and Public Safety

Community Resuscitation Strategy

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Mr Poots (The Minister of Health, Social Services and Public Safety): I wish to make a statement to the Assembly advising Members of my intention to develop a Community Resuscitation Strategy for Northern Ireland.

In February 2012 the Assembly debated a motion on the provision of Emergency Life Support (ELS) skills training to every school, community and workplace in Northern Ireland.

ELS skills are the key set of actions needed to keep someone alive until professional help arrives. It includes performing cardiopulmonary resuscitation (CPR); dealing with choking and serious bleeding; how to put someone in the recovery position, and helping someone who may be having a heart attack.

The evidence indicates that in places where there is a high proportion of the population trained in ELS skills the survival rate for those who suffer an out-of-hospital cardiac arrest is higher than in areas where the proportion of the population trained in ELS skills is low.

While I welcomed the Assembly motion last February, I also acknowledged the valuable work that is already taking place across Northern Ireland, by the Health and Social Care service and a number of voluntary organisations such as the British Heart Foundation, ABC for Life, the Red Cross and St John Ambulance. As Minister, however, I am conscious that resources both within the health service and in the voluntary and community sector are finite. We need to make the best possible use of the resources

that are available to ensure that we maximise the number of people trained in ELS skills.

I have asked the Chief Medical Officer to establish a working group to develop a community resuscitation strategy for Northern Ireland, aimed at coordinating available resources to maximise the number of individuals trained in ELS skills. The working group will be chaired by the Northern Ireland Ambulance Service and will include representatives from my Department, Health and Social Care bodies, community and voluntary bodies involved in resuscitation training as well as representation from other Northern Ireland Departments such as the Department of Education, the Department of Culture, Arts and Leisure and the Department of Social Development.

Each year in Northern Ireland approximately 1,300 cardiac arrests occur outside a hospital environment. Tragically, fewer than 10% of people who suffer an out-of-hospital cardiac arrest will survive to be discharged from hospital. In the Programme for Government 2011-2015 my Department has made a commitment to improve access to thrombolysis and to expand cardiac catheterisation capacity to improve access to diagnostic intervention and treatment and the development of a new primary percutaneous coronary intervention (primary PCI) service model for NI by 2014/15. Key to maximising the benefit to the population of this PfG commitment and investment is survival to thrombolysis or in due course primary PCI service. The earlier patients are treated with thrombolysis or coronary interventions the better their chances are of recovery. By extending ELS training and keeping people alive to allow them to avail of thrombolysis or primary PCI we can maximise the chances of survival or improved recovery from heart attack. With 1,300 cardiac arrests occurring outside a hospital environment each year in NI and less than 130 of these surviving to discharge I recognise we have

some considerable way to go, however I believe ELS training can help us ensure more timely responses and better outcomes for patients. I have therefore no doubt about the need to extend ELS training in order to save more lives.

We need to, and we can, achieve greater coverage in communities, schools and workplaces throughout Northern Ireland. We can achieve this if Ministers, their Departments, District Councils, other public bodies and voluntary and community sector organisations continue to work in partnership and develop new approaches to ELS training.

I believe a Northern Ireland community resuscitation strategy will help to focus a drive to increase the number of people, of all ages, trained in ELS skills and to coordinate the use of available resources to achieve this. The working group will be asked to have the ready strategy for consultation by October 2013.
