Cardiac Safe Communities

CPR Makes you Undead

Advocacy Campaign

City of London, January 21, 2013

Presented by Christine Hurtado Health Promotion Specialist



Presentation Overview



- ☐ The Issue
- Purpose of the Campaign
- Overview
- Policy asks
- Follow Up



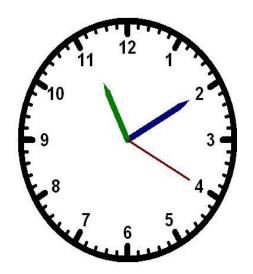
https://resuscitation.heartandstroke.ca/

http://www.youtube.com/watch?feature=player_embedded&v=8I3yk 7T8W34#

The Issue



- Every year 7,000 cardiac arrests occur in Ontario
- Ontario has a survival rate of 5-6%
- ☐ The odds of surviving a cardiac arrest greatly improve if CPR is performed right away
- With each passing minute, the probability of survival declines by 7-10%



Chain of Survival





- □ Early Access (to Emergency Medical Services by calling 911)
- Early CPR (cardiopulmonary resuscitation)
- □ Early **Defibrillation** (access to an automated external defibrillator)
- Early Advanced Cardiac Life Support (by medically trained paramedics or hospital staff)

Objectives of the Campaign



- 1) Raise awareness of the benefits of increasing bystander CPR
- 2) Increase the number of people trained in CPR
- 3) Develop a strong relationship with municipalities

CPR Makes you Undead: Campaign overview



1. Guinness World Record CPR Event

(www.cprundead.ca)



2. Local CPR Training Events



3. Online CPR Video

(www.theundeading.ca)



4. Presentations to Municipal Council



Levels of Government



Federal Government





Provincial Government





Municipal Government











Background Information



Background

- Over 80% of cardiac arrests happen at home or a public place and only
 5-6% of these victims survive
- Bystander CPR rates rarely exceed 5-6% in communities across
 Ontario
- The use of CPR along with an AED can increase the odds of survival of an out-of-hospital cardiac arrest to up to 75%
- Seattle-King County is the "gold standard" as a cardiac safe municipality; the following three asks are developed out of their best practices

County of Middlesex Background Information



- There have been 56 AEDs deployed since 2006
- These AEDs have been placed in public places such as Community Centres, Ice Arenas, Public and Catholic Elementary Schools and in the Secondary Schools across the County of Middlesex
- Several have also been placed in Municipal Buildings and Nursing Homes/Homes for the Aged
- □ To date, there has been two (2) lives saved through bystander CPR and use of an AED (London and Mt-Brydges)

Policy Asks



Cardiac Safe Communities

RECOMMENDATIONS FOR MUNICIPALITIES

- Commit to implement a broad public education campaign raising awareness around issues such as the ease of CPR training and use of an AED.
- Work with the Heart and Stroke Foundation through the Ontario Defibrillator Access Initiative(ODAI) to ensure AEDs are placed in all sport and recreation facilities and schools.
- 3. That municipalities write the Minister of Health and Long-Term Care in support of the Heart and Stroke Foundation's request that the script for emergency medical dispatchers be revised to provide the most compelling, clear and mandatory CPR direction in all cases of cardiac arrest.

Policy Ask #1: Public Education



 Commit to implement a broad public education campaign raising awareness around issues such as the ease of CPR training and use of an AED.

FACTS:

- Up to 80% of cardiac arrests happen out of hospital
- 35-55% of out-of-hospital arrests are witnessed by a bystander but very few victims receive CPR



Policy Ask #1: Public Education



Ipsos Reid Polling for Heart and Stroke:

- People have not gotten trained in CPR because:
 - 52% Haven't gotten around to it
 - 16% Afraid of hurting the victim
 - 14% Not comfortable
- AED Awareness:
 - 50% Not familiar or have never heard of an AED
 - 55% Do not remember seeing any AEDs in their community
- CPR used with an AED can increase the chance of surviving a
 cardiac arrest to up to 75%

Policy Ask #2: ODAI



2. Work with the Heart and Stroke Foundation through the Ontario Defibrillator Access Initiative (ODAI) to ensure AEDs are placed in all sport and recreation facilities and schools.

ODAI (Grant Process)

- □ The Ontario government has given over \$11M to support the placement of AEDs through our Public Access Defibrillator (PAD) program since 2006
- Funding supports the capital (equipment) and training costs per unit
- PADs apply for grant funding to place units in public access settings
- A grant committee approves placement and funding to each PAD program

Policy Ask #2: ODAI



ODAI continued

- □ To date over 3500 units have been placed
- 43 lives have been saved
- Partnerships with 60Upper TierMunicipalities(PADs)



Policy Ask #2: ODAI



Policy Ask:

Continue to work with the Heart and Stroke Foundation to ensure that AEDs are placed in all public access settings through uptake in the ODAI grant application process.

PUBLIC ACCESS DEFIBRILLATION (PAD) PROGRAMS

The Heart and Stroke Foundation of Ontario has worked to develop relationships with municipalities across Ontario to develop Public Access Defibrillation (PAD) Programs for their communities. It is typically the Emergency Medical Services who oversees the PAD Program but there are also Fire Services, Parks & Recreation Departments and Health units working toward the common goal of cardiac safety. HSFO values these partnerships and continues to build strong relationships for future funding of AEDs, associated training and CPR & AED Awareness events.



1. Algoma	20. Hastings	39. Parry Sound
2. The City of Brampton	21. Huron	40. Perth
3. Brant	22. Kawartha Lakes	41. Peterborough
4. The City of Brantford	23. Kenora	42. Prescott and Russell
5. Bruce	24. The City of Kingston	43. Rainy River
6. Central Elgin	25. Lambton	44. Renfrew
7. Chatham-Kent	26. Lanark	45. The City of Sault Ste. Marie
8. Cochrane	27. Leeds and Grenville	46. Simcoe
9. Cornwall Stormont Dundas and Glengarry	28. Lennox and Addington	47. The City of St. Thomas
10. Dufferin	29. Manitoulin	48. Sudbury
11. Durham	30. Middlesex	49. Thunder Bay
12. East Elgin	31. The City of Mississauga	50. Timiskaming
13. Essex	32. Muskoka	51. Toronto
14. Frontenac	33. Niagara and Niagara-on-the-Lake	52. Waterloo
15. Grey	34. Nipissing	53. Wellington
16. Haldimand	35. Norfolk	54. West Elgin
17. Haliburton	36. Northhumberland	55. The City of Windsor
18. Halton	37. Ottawa	56. York
19. Hamilton	38. Oxford	001 10111

First Nation Communities as of 2011		
57. Chippewas of Beausoleil First Nation	65. Grassy Narrows First Nation	
58. Chippewas of Kettle/Stony Point First Nation	66. Kitchenuhmaykoosib Inninuwug First Nation	
59. Chippewas of Nawash	67. M'Chigeeng First Nation	
60. Chippewas of the Thames First Nation	68. Mississaugas of New Credit	
61. Couchiching First Nation	69. Mississaugas of Scugog	
62. Delaware of the Thames (Moravian Town)	70. Moose Cree First Nation	
63. Dokis First Nation	71. Naotkamegwanning First Nation	
64. Fort William First Nation	72. Oiibways of Hiawatha First Nation	

79. Wahta Mohawks 72. Ojibways of Hiawatha First Nation

(Islington) 78. Wahgoshig First Nation

Policy Ask #3: CPR Assisted Dispatch



EMERGENC

3. That municipalities write the Minister of Health and Long-Term Care in support of the Heart and Stroke Foundation's request that the script for emergency medical dispatchers be revised to provide the most compelling, clear and mandatory CPR direction in all cases of cardiac arrest.

Current situation in Ontario:

When a call is placed to an emergency medical dispatcher they ask you if you would like to perform CPR: "with my help do you want to do chest compressions?"

Policy Ask #3: CPR Assisted Dispatch





- Best practices of Seattle-King County:
 - Mandatory 911 Assisted CPR
- The caller is immediately given instructions on how to perform CPR with no opportunity to opt out
- This could make the difference in bystander response to witnessing sudden cardiac arrest

Follow up



Resources:

- □ Fact sheet on Cardiac Safe Communities
- Sample resolution document
- Sample letter to the Ministry of Health and Long-Term Care
- Questions?

Thank you.

