

Citizen Participation and Public Petitions Committee  
Wednesday 30 October 2024  
16th Meeting, 2024 (Session 6)

## PE1989: Increase defibrillators in public spaces and workplaces

### Introduction

**Petitioner** Mary Montague

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to support the provision of defibrillators in public spaces and workplaces.

**Webpage** <https://petitions.parliament.scot/petitions/PE1989>

1. [The Committee last considered this petition at its meeting on 6 December 2023.](#) At that meeting, the Committee agreed to write to the Scottish Government.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received a new written submission from the Minister for Public Health and Women's Health which is set out in **Annexe C**.
4. [Written submissions received prior to the Committee's last consideration can be found on the petition's webpage.](#)
5. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
6. [The Scottish Government gave its initial response to the petition on 13 December 2022.](#)
7. Every petition collects signatures while it remains under consideration. At the time of writing, 581 signatures have been received on this petition.

### Action

8. The Committee is invited to consider what action it wishes to take.

**Clerks to the Committee**  
**October 2024**

**Annexe A: Summary of petition**

**PE1989: Increase defibrillators in public spaces and workplaces**

**Petitioner**

Mary Montague

**Date Lodged**

16 November 2022

**Petition summary**

Calling on the Scottish Parliament to urge the Scottish Government to support the provision of defibrillators in public spaces and workplaces.

**Previous action**

I contacted Paul Sweeney MSP to ask about a Petition to widen access to Automated External Defibrillators (AED) and was advised of the Committee route.

**Background information**

Following the fatal cardiac arrest of a close family member in a large, local supermarket, my request for an Automated External Defibrillator (AED) was refused, despite my highlighting that all other large supermarkets locally provided these. A bereaved family may be comforted to know that everything that could have been done to save the life of their loved one, was done. The effect on shop staff in such a fatality can be traumatic also.

Sudden cardiac arrest is the leading cause of death in adults over the age of 40. British Heart Foundation say that "Cardiac arrest is a critical medical emergency" and "Unless treated immediately, leads to death within minutes. With around 3,200 out-of-hospital cardiac arrests in Scotland each year, the survival rate is just 1 in 10". An AED increases survival rates but the provision of AEDs is random.

**Annexe B: Extract from Official Report of last consideration of PE1989 on 6 December 2023**

**The Convener:** The next petition is PE1989, which is on increasing the number of defibrillators that are in public spaces and workplaces. The petition was lodged by Mary Montague, who I should acknowledge has subsequently become the provost of my local authority in East Renfrewshire.

The petition calls on the Scottish Parliament to urge the Scottish Government to support the provision of defibrillators in public spaces and workplaces. We last considered the petition on 8 March, when we agreed to write to the Scottish Government, the British Heart Foundation and the Order of St John. The petitioner highlights a recent UK-wide survey on the factors affecting public access to defibrillators, which found a strong desire for public funding to support placement of PADs, as there is currently a reliance on communities, charities or local organisations.

The petitioner has suggested that the Scottish Government makes representations to the UK Government to appropriately update health and safety at work legislation, with the inclusion of reasonable defibrillator provision in first aid requirements. We received information on survival rates—there is a 60 per cent greater chance of survival if there is access to a defibrillator, and that is a very meaningful difference.

The Scottish Government's response states that the Scottish out-of-hospital cardiac arrest report 2022-23 was due for publication in October. However, the clerks have become aware that publication of the report has now been delayed until later in the year, although there is not much of the year for it to be delayed to; I presume that it must therefore be imminent.

St John Scotland's written submission highlights growing financial concerns among community groups in relation to purchasing batteries and meeting rising energy costs. It also shares challenges in engaging with some local authorities whose response is a bit uneven, stating that some refuse to provide the relevant planning permission and that they will not enter into a dialogue to address the issues.

The British Heart Foundation Scotland has highlighted Government funding in Wales and England to assist with the provision of defibrillators in areas of need, and notes that it would support a similar programme in Scotland.

Mary Montague has brought a very important health issue to the committee. We received interesting evidence from the various organisations to whom we have written. Do members have any comments or suggestions?

**David Torrance:** I wonder whether the committee would consider writing to the Scottish Government to highlight the issues that St John Scotland has identified in communicating with some local authorities. We could ask the Government whether it is aware of any local authorities that have refused to engage with charities and community groups or that have refused to provide planning permission for public access defibrillator installations and, if so, why that has occurred, and how it intends

to work with local authorities to improve their engagement with charities and community groups that seek to install PADs.

The committee could also ask the Government whether it has considered providing a specific fund for the provision of defibrillators in areas of greatest need in Scotland that would be similar to the funds that exist in England and Wales, and whether it will consider making representations to the UK Government to update the health and safety at work legislation to include defibrillator provision as part of the minimum first aid requirements.

**Fergus Ewing:** I wonder whether we could add to the content of the letter to the Government as described by Mr Torrance a request that the Government comment specifically on the statistic to which the convener alluded, which shows that access to a defibrillator increases substantially a person's chances of survival. In addition, I might have missed this in the papers—there is a lot of data in the British Heart Foundation's submission—but I wonder whether it is possible to identify how many people's lives have been saved as a result of the increased protect and survive capability that defibrillators provide. Rather than having a theoretical statistical percentage, it would be very interesting to find out how many people's lives have been saved as a result of defibrillators. I think that that would be useful data to access—if, of course, the British Heart Foundation has it. We can ascertain whether it does by asking it that question.

**The Convener:** Depending on the responses that we receive, I suggest to colleagues that the issue might be one that we could put on our shortlist of topics to debate in the chamber. I know that we are looking for debating time for two shorter debates that could be combined, but the issue of defibrillator provision seems to be one of considerable importance.

## Annexe C: Written submission

### Minister for Public Health and Women's Health written submission, 9 January 2024

#### PE1989/G: Increase defibrillators in public spaces and workplaces

Thank you for your email of 8 December 2023 inviting me to provide further information. I have organised my response into sections corresponding to the questions asked.

#### Funding

The committee has asked if the Scottish Government has considered providing a specific fund for the provision of defibrillators. At present the purchase of defibrillators is mainly through fundraising in the community, or from business or organisational resources. In 2021/22 we provided financial support to the [Scottish Football Supporters Association \(SFSA\) fund to improve grassroots access to defibrillators](#).

Applications are currently open for community groups across the UK to apply for a [British Heart Foundation funded defibrillator](#) (closing date 15 March 2024).

Importantly, schemes like the one provided by British Heart Foundation (BHF) also provide Cardiopulmonary Resuscitation (CPR) and defibrillator training resources.

It is important that defibrillators are placed in areas of need, are publicly accessible and registered on The Circuit. This is noted in the BHF Scotland response to the petition and is the approach set out in the [Out of Hospital Cardiac Arrest \(OHCA\) Strategy \(2021 – 2026\)](#). Both BHF Scotland and Scottish Government are working together alongside other Save a Life for Scotland partners to deliver this strategy.

There are already over 7000 defibrillators in Scotland currently registered on The Circuit, but a significant proportion of those are not available 24/7 and there is variation in proximity of defibrillators to locations of OHCA occurrence<sup>1</sup>. Therefore, there remains work to be done to ensure that existing defibrillators in Scotland are as accessible as possible when a cardiac arrest occurs.

It is important that we are guided by evidence about where cardiac arrests are most likely to occur to encourage optimal placement. We are working alongside the Resuscitation Research Group at the University of Edinburgh to better understand the evidence around placement of defibrillators in Scotland and to develop a tool, which would help defibrillator guardians make informed decisions about where best to place their device in order that it could have most impact.

#### Health and Safety at Work etc. Act 1947

Any legislative action would have to be based on strong evidence that it would achieve the aim of improving OHCA survival. As the Health and Safety at Work etc.

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<sup>1</sup> [Out of Hospital Cardiac Arrest Annual Report \(scottishambulance.com\)](#)

Act 1947 is a reserved policy area it would be the responsibility of the UK Government to consider the evidence and assess the benefits or consequences of updates to the Act to include defibrillator provision as part of the minimum First Aid requirements.

Our priority is to continue the collaborative partnership approach to improving outcomes from cardiac arrest which has been successful to date in Scotland.

### **Data on the lifesaving benefits of defibrillators**

The Committee has requested relevant information that could indicate how many lives have been saved by increased access to public access defibrillators. The following references may provide some useful information.

- The Public Access Defibrillation Trial Investigators. Public-access defibrillation and survival after out-of-hospital cardiac arrest. *New England Journal of Medicine*. 2004;351(7):637-646.
- Pollack RA, Brown SP, Rea T, et al. Impact of bystander automated external defibrillator use on survival and functional outcomes in shockable observed public cardiac arrests. *Circulation*. 2018;137(20):2104-2113.
- Hansen SM, Hansen CM, Folke F, et al. Bystander defibrillation for out-of-hospital cardiac arrest in Public vs Residential Locations. *JAMA Cardiology*. 2017;2(5):507-514.
- Marengo JP, Wang PJ, Link MS, Homoud MK, Estes NAM. Improving survival from sudden cardiac arrest: The role of the automated external defibrillator. *Journal of the American Medical Association*. 2001;285(9):1193-1200.
- Blom MT, Beesems SG, Homma PCM, et al. Improved survival after out-of-hospital cardiac arrest and use of automated external defibrillators. *Circulation*. 2014;130(21):1868-1875.
- Weisfeldt ML, Sittlani CM, Ornato JP, et al. Survival After Application of Automatic External Defibrillators Before Arrival of the Emergency Medical System. Evaluation in the Resuscitation Outcomes Consortium Population of 21 Million. *Journal of the American College of Cardiology*. 2010;55(16):1713-1720.

Defibrillation is one aspect in a chain of survival and other aspects, such as bystander CPR, also have an important impact on improving survival rates in the population. Since the first Out of Hospital Cardiac Arrest Strategy was launched in 2015, in Scotland bystander CPR rates have increased from 43% to 66.1% and public access defibrillator deployment before the arrival of the ambulance service has increased from 2.5% to 8% in 2021/22. Correspondingly, in 2021/22 1 in 10 people with OHCA survived to leave hospital, as compared to 1 in 20 in 2015<sup>2</sup>.

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<sup>2</sup> [Out of Hospital Cardiac Arrest Annual Report \(scottishambulance.com\)](https://www.scottishambulance.com/out-of-hospital-cardiac-arrest-annual-report)

The Scottish Ambulance Service publish annual updates on out of hospital cardiac arrest data, including data on defibrillation. The most recent can be found here ([Out of Hospital Cardiac Arrest Annual Report \(scottishambulance.com\)](https://www.scottishambulance.com/out-of-hospital-cardiac-arrest-annual-report))

### **Local Authority Planning**

Decisions on the installation and maintenance of defibrillators on local authority premises are a matter for local authorities to consider at the local level. Scottish Government is not aware of any local authorities that have refused to engage with charities or community groups, nor do we know the details of decisions relating to planning permission requests for defibrillator installations in individual local authorities.

You may wish to contact the relevant local authorities on this matter. The Scottish local government page of the Confederation of Scottish Local Authorities (COSLA) provides contact information: <https://www.cosla.gov.uk/councils>.

The Committee also asks for information on how Scottish Government intends to work with local authorities to improve their engagement with charities and community groups seeking to install defibrillators. As noted previously, we are a key partner in the Save a Life for Scotland (SALFS) partnership.

SALFS is currently working with a number of local authorities to support community-based activities to strengthen OHCA survival, including initiatives to increase the number of defibrillators in communities. SALFS has engaged with three local authorities who are undertaking innovative work in this area and has facilitated meetings to share learning and ideas. The intention is to produce a blueprint for other local authorities and encourage the sharing of best practice across Scotland.

I hope you find this response useful.

**Maree Todd MSP**