

Chairman's Report 2014

Dr Richard Aickin's address to member organisations at the New Zealand Resuscitation Council's Annual General Meeting, 10 November 2014.

Conference Room 1, Wellington Conference Centre; Level 7, 50 Customhouse Quay, Wellington

Welcome everyone to this annual general meeting of the New Zealand Resuscitation Council, and thank you for joining us in Wellington today.

Overall, 2014 has been a big year for the Council and we've achieved a lot. We've taken some big steps in multi-year projects and laid good foundations for others. We've hosted our biggest conference to date. Amongst this we've remained true to our values of evidence-informed treatment for resuscitation, and have upheld our commitment to accessibility of resuscitation education.

Before going further, I wish to acknowledge the recent and sudden death of Professor Ian Jacobs. Ian was a good friend on both a personal level and to our Council, and had a driving commitment to the relationship between Australia and New Zealand. He was Professor of Resuscitation and Pre-Hospital Care at Curtin University. His background was in emergency nursing and as a paramedic, and he continued working clinically as a paramedic in addition to his extraordinarily active academic career.. His contribution to resuscitation was enormous – as Chair of Australian Resuscitation Council for 15 years, co-Chair of ILCOR, and champion of many other significant developments including the Utstein template. His untimely death has understandably shaken the resuscitation community to its roots.

ILCOR

ILCOR's scientific review drives the development of national resuscitation council guidelines.[\[1\]](#) The scientific review occurs every five years, and the next release of treatment recommendations scheduled for 16 October 2015.

We are fortunate that many of our councillors sit on ILCOR task forces, affording New Zealand with a strong presence in various areas of resuscitation on the world stage. For its 2015 review ILCOR has adopted a GRADE framework.[\[2\]](#) While this framework will benefit the review process, it has placed new demands on reviewers. Many councillors have generously invested a great deal of their time in these reviews.

Looking ahead, the Council is committed to ILCOR meetings in Chicago this month, and in Dallas in February. The writing and editorial groups will write the consensus on science and treatment recommendation papers after the Dallas meeting, following which the material for publication will be embargoed until their appearance in peer reviewed journals in October 2015. We will however continue to have access to the completed PICO question worksheets in order to update our resuscitation guidelines in response to ILCOR's recommendations during the period before CoSTR publication.

ANZCOR



Our relationship with the Australian Resuscitation Council is closer than that of any other resuscitation council. Our two councils are collectively represented on ILCOR through ANZCOR, the Australian and New Zealand Committee on Resuscitation.

This relationship with Australia is significant for guideline development, whereby we collaborate to develop resuscitation guidelines that are applicable to both countries. Our council now endorses 51 guidelines that are co-badged with the Australian Resuscitation Council, four of which are either new or updated this year.

The New Zealand and Australian resuscitation councils have also committed to annual ANZCOR meetings. This provides a regular means of exploring mutually beneficial opportunities separate to scientific interests. This might include a common approach to other aspects of resuscitation, such as recognition of qualifications, instructor pathways, and cross-credentialing for instructors. Our next ANZCOR meeting will coincide with the Australian Resuscitation Council's Spark of Life conference (17-18 April 2015, Melbourne) and here we will hold preliminary talks about guideline development as a result of ILCOR's 2015 review.

I have earlier mentioned the tragic loss of Professor Ian Jacobs, who was instrumental in setting up ANZCOR. As Chair of the New Zealand Resuscitation Council, I hold a seat on the Australian Resuscitation Council's Executive. At the end of last week, I attended their Council meeting – a poignant occasion under the circumstances. Peter Morley is their Acting Chair and Michael Parr the Deputy Chair, and Peter, Michael and I will continue as ANZCOR delegates to ILCOR. Irrespective of recent events, both councils are fully committed to further enhancing our ANZCOR partnership.

Financial overview

Although the year to 30 June saw the Council incur a loss, the Council is financially in a strong position. The loss was expected and is easily explained due to increased expenditure on salaries and wages given that we now have two employees. Sales of textbooks have also tapered off, as is usual in the later stages of ILCOR's review cycle. You will hear more about our financial position in the Treasurer's report.

Projects

CORE Review

CORE is the Council's flagship education programme and the way we have chosen to realise our vision that New Zealanders enjoy access to high-quality and consistent resuscitation education and practice.^[3] CORE has been developed for the New Zealand environment, and participants come from many different occupations—an approach that is central to CORE philosophy.

The CORE Review includes a wide-sweeping review of the provider and instructor course, as well as course texts, resources and administration. Arguably we also need to invest more in quality assurance. Changes informed by the review will emphasise the skills and knowledge that benefit many, rather than a few. An example of this has been the removal of intubation, which was deemed a specialist skill.

The CORE Review will take a lot of our time over the next year. It will require us to follow a clear timeline and project plan. But it is an opportunity to make sure that CORE is uniform across New Zealand and relevant for years to come. In turn this will allow the Council to reaffirm the value of CORE as the standard resuscitation training for all New Zealand health professionals.

Conference

Our Queenstown conference ‘Science to Sensibility’ was a great opportunity to host international speakers and all participants in a fantastic part of New Zealand. Two hundred and fifty-eight registrants attended, making this the largest conference we’ve hosted to date. Participants included paramedics, Defence personnel, midwives, clinical specialists, anaesthetists and resuscitation instructors. This is a wide audience with many different interests, but we succeeded in providing a programme that could be enjoyed by most.

Our next conference will be held in Auckland in April 2016. Much of the programme will be based on the release of new resuscitation guidelines.

Newborn Life Support

Newborn Life Support is a specialty area of resuscitation. Like CORE, we train instructors to provide Newborn Life Support courses. Unlike CORE, though, course administration and reference materials have been less well supported by the Council in recent times.

With over 100 Newborn Life Support instructors on our books, it was fitting to include a workshop day for this group as part of our conference. Since then we have facilitated a working party to review Newborn Life Support courses and resources. We are also working to incorporate Newborn Life Support instructors as a group within the CORE Instructors of New Zealand.

Non Health Professionals Working Group

The Non Health Professionals Working Group was tasked with describing the current situation regarding the Council’s activity in educating rescuers who do not come from a health professional background, with particular attention given to First Aid. The Working Group provided their report in May. Since that time the Council has also participated in NZQA’s Targeted Review of Qualifications for Pre-hospital and Emergency Care and First Aid.[\[4\]](#)

As a council we need to be mindful of our scope where basic rescuers and first responders are asked to manage emergencies. Many First Aid training options for these groups already exist, and scientific evidence for treatment tends to be weaker than for advanced care. That said, ILCOR has for the first time established a First Aid taskforce. As the standard-setting body for resuscitation in New Zealand, our Council also has a duty to provide guidance to all New Zealand rescuers, most of whom do not have a health professional background.

Planning for Growth

As a Council, we are changing and we are growing. We need to plan for growth.

Nineteen member organisations are now represented on the Council. The Heart Foundation, Royal College of Urgent Care and New Zealand Fire Service have joined within the past year, and it likely that other new members will be added soon.

We need to organise ourselves to meet these opportunities and challenges, and this requires investment. At an administrative level, we have initiated a review of the office. In doing so we aim to outsource some existing manual processes – such as dispatch of orders and data entry – to better support operational requirements like reporting, and to improve service delivery. At the Council level, we need to ensure that our Rules and governance arrangements remain relevant and efficient.

From the project that I've described earlier, it's clear that the Council is increasingly expected to demonstrate leadership in different areas of health and education. I take this as a positive sign that increasingly we are recognised for what we want to be; namely, the standard-setting body for resuscitation in New Zealand. But we also need to be mindful of our scope, and ensure that our various activities support our vision that people in New Zealand will have access to resuscitation practice and education that is consistent and of high standard, and the best possible outcome from immediate threats to life and limb. I am optimistic that we are in a good position to deliver our work programme, provided that we think carefully about priorities and our capacity to meet expectations within given timelines. I look forward to discussing this further this afternoon.

Finally, I wish thank all councillors and member organisations for their contribution this year, particularly to those who have given many hours to the working groups. My special thanks go to the staff and Executive Committee for their support.

[1] 'ILCOR' – International Liaison Committee on Resuscitation.

[2] 'GRADE' – Grading Assessment, Development and Evaluation.

[3] 'CORE' – Certificate of Resuscitation and Emergency Care

[4] 'NZQA' – New Zealand Qualifications Authority