



Dr Richard Aickin's address to member organisations at the New Zealand Resuscitation Council's Annual General Meeting, 6 November 2017.

Sofitel Hotel; 11 Bolton Street, Wellington.

Welcome all to this annual general meeting of the New Zealand Resuscitation Council.

Service Performance Indicators

We measure our performance against a range of indicators. Our outcome areas are: robust, credible education; better-informed rescuers; and improved New Zealand standards.

Robust, credible education

In the year to 30 June 2017, we trained 59 new instructors (36 new CORE Advanced instructors and 23 new newborn life support instructors) over 5 instructor courses (3 CORE Instructor courses and 2 newborn life support instructor courses).

There were no instructor workshops in 2017. These are biennial events and our next workshops will be on 19 April 2018.

We ask that full-day CORE course attendees give feedback on instructor performance on six variables. The variables are: approachability, availability, knowledge, communication, positive attitude, and course organisation. Ratings are given on a scale of 1-5, where 1 is 'strongly disagree' and 5 is 'strongly agree'. From 4,151 responses, the average score from all responses and across all variables was 4.85/5, which is a testament to the high quality of our instructors.

Better-informed rescuers

We are committed to keeping people informed about our progress. In part, we achieve this through our newsletters, of which there were five in the year to 30 June 2017. These had an average open rate of 41.69% and an average click-through rate of nearly one-quarter of those who opened the newsletter (24.47%).

We also published five media releases, and seven other news stories, as well as frequent posts to our Facebook and Twitter audiences.

Improved New Zealand standards

The Australian Resuscitation Council is our closest international partner, with whom we develop resuscitation and first aid guidelines. ANZCOR Guideline 10.6 – Family Presence During Resuscitation was new this year, while another 15 guidelines had minor amendments. Further, the New Zealand Resuscitation Council has representation on four of six ILCOR^[1] task forces:

- Dr Robert Frengley on Education, Implementation and Teams
- Dr Tonia Nicholson on Advanced Life Support
- Dr Gabrielle Nuthall and me on Paediatric Life Support task force (of which I am co-chair)

- Dr Lindsay Mildenhall has been reconfirmed on Neonatal Life Support.

Kevin Nation has also been instated as a domain lead for airway and ventilation. Domains are topics that may have implications across more than one task force.

Projects

CORE

CORE is our train-the-trainer programme for health professionals. Our new CORE courses became the endorsed course prescriptions on 1 January 2017. Feedback from providers and learners, as given to us in correspondence and course evaluations, has shown us that the providers and learners broadly are very satisfied with the changes.

We are mindful that there needs to be some more clarity for providers around the delivery of the course – namely those components that are flexible, adaptability of scenarios, and equipment in skill stations. We intend to address these points by way of a new CORE Advanced Instructor Manual that all CORE instructors shall receive.

Since 2016, we have been working on developing an online learning portal to administer our training programmes. We hoped this would support our new courses, starting with CORE Advanced. This has not proven so easy, and we are now evaluating our options from here.

Newborn Life Support

Excitingly, we reinstated our newborn life support instructor course. This programme had been on hold for three years while it was being reviewed. These courses were delivered at Waikato Clinical School, supported by a faculty that included educators, neonatologists and midwives.

As far as possible, the Council is aiming to align the expectations of CORE and NLS instructor pathways, instructor and provider course assessments, instructor and provider course delivery, and ongoing instructor requirements.

International links

The release of revised resuscitation guidelines in January 2016 came hot on the heels of new international consensus statements on science and treatment recommendations. ILCOR drives this process through its task forces. Task force members were confirmed in late 2016.

For our councillors who serve on ILCOR task forces, the workload has eased for the time being. ILCOR is now looking internally at how it may enable a more continuous review of evidence, as opposed to five-yearly consensus statements.

We have used this downtime to consider aspects of our interaction with the Australian Resuscitation Council. Since 2010, we have been progressively co-badging guidelines that come up for review and which can equally apply to the New Zealand environment. We are in the process of appointing section

leads to work closer with Australian authors during all stages of guideline development so that we have an even tighter and more collaborative approach than we currently do.

First aid and community focus

In my last report I spoke of how we need a stronger presence in first aid. It is through providing first aid that the majority of New Zealanders are most likely to come into contact with resuscitation. In resuscitation, these are the life-saving skills and knowledge that we would like for all Kiwis to be equipped with, should they come across a person in need.

Since last year, we have been establishing closer ties with the Skills Organisation, which is the New Zealand Qualification's Authority's standard-setting body for first aid. This will be an important relationship if we are to help standardise the content of first aid both in the national qualifications framework and as industry requirements. We hope that our input will result in first aid training providers having increased confidence that they are delivering the right content and in the right way.

Rapid access to defibrillation can make the difference between life and death, with the chances of survival dropping by about 10% for every minute that a person an arrested person goes without a shock. New Zealand's survival rate from out-of-hospital cardiac arrest currently is about 15%. Increasing bystander CPR and access to early defibrillation is critical for improving survival rates.

CPR training and public access defibrillation is coming to the fore in many communities. I am proud that our member organisations Wellington Free Ambulance, St John and New Zealand Red Cross have programmes to provide first aid training and help place defibrillators into communities. Many other community and local groups are taking matters into their own hands too. I commend these initiatives.

We have worked closely with the Ministry of Education to provide AEDs in schools, a document that encourages schools to prepare for medical emergencies and consider acquiring defibrillators. We hope to build on our relationship with the Ministry so that we might find ways to incentivise CPR and first aid training in schools. These aspirations are aligned to the World Health Organisation-endorsed Kids Save Lives statement. Kids Save Lives recommends that every school child over 12 years of age receive 2 hours of CPR training annually. The ultimate outcome sought is increased bystander participation and in New Zealand this may lead to an extra 600 lives saved every year.

In 2018, New Zealand will implement Good SAM, an international registry of trained medical emergency responders and AEDs that is accessed through an app. The app allows a bystander to send for an ambulance, while simultaneously alert the three nearest responders, one of whom will accept the alert and bring the AED. The implementation of Good SAM will be led by emergency management services.

NZ Resus 2018 – Coming of Age

We are only six months away from our next conference, NZ Resus 2018 – Coming of Age: Improving outcomes for 21 years, to be held at Te Papa, Wellington on 19-21 April. Professor Myra Wyckoff, Associate Professor Marcus Ong, and Dr Jasmeet Soar have been confirmed as keynote speakers.



Professor Wyckoff is a neonatologist and current chair of the International Liaison Committee on Resuscitation's neonatal taskforce. She has strong interests in resuscitation teams and registry data.

Associate Professor Ong has extensive experience in cardiac arrest in out-of-hospital environments. He has been a key player in improving response to cardiac arrest in his native Singapore, and a champion of public education and technology-led initiatives.

Dr Soar's longstanding interest in advanced life support is recognised worldwide. He is the current chair of ILCOR's advanced life support taskforce, chair of the European Resuscitation Council's advanced life support working group, and editor of the academic journal Resuscitation.

Building on the success of previous conferences, we anticipate that NZ Resus 2018 – Coming of Age will be our most popular to date. We want to embrace the role of first responders more than we've previously provided for, and so there will be aspects of the programme that are of special interest to this audience.

Acknowledgements

Tony Peck has taken over from Gina Williams as the representative for the Heart Foundation.

Dr Gary Payinda is taking over from Jonathon Webber as the representative for Surf Life Saving New Zealand. Jonathon has made a significant contribution to the Council. He had given us particular expertise in first aid, drowning, and teaching, and we anticipate his continued involvement.

Rebecca O'Sullivan joined the staff as our full-time administrator in March. Regrettably for us, her life is taking her in another direction and she will be leaving at the end of November. She has made an excellent contribution in supporting our service and accounting functions.

Finally, I wish to note that as of 26 November, the New Zealand Resuscitation Council will officially be 21 years old. Since its inception it has evolved and matured, but not without considerable work. I look forward to reflecting on our progress at our conference next year.

For now wish to thank all councillors and staff for your work this year. Our mandate is only as strong as the loyalty of our member organisations who support our work and advocate in favour of our guidelines. Moreover we would not be where we are were it not for our resuscitation instructors out there, across the country, who are delivering our training so that New Zealanders are able to access high-quality emergency care when they need it.

My sincerest thanks to you all for your tireless support of the New Zealand Resuscitation Council.



[\[1\]](#) International Liaison Committee on Resuscitation