

Newsletter



Issue 1: February 2013

Out of Hospital Cardiac Arrest Outcomes

It is estimated that approximately 60,000 out-of-hospital cardiac arrests (OHCA) occur annually in the UK. Resuscitation is attempted in about 30,000 cases. Survival to hospital discharge rates have remained relatively static and in the order of 5-10% over the past 30 years. Of those patients where resuscitation was commenced by the Emergency Medical Service (EMS) there was marked variation in survival rates. The Out of Hospital Cardiac Arrest Outcomes (OHCAO) project will try to find out the reasons behind such big differences in outcome. The project will develop a standardised approach to collecting information about OHCA and how outcomes are followed up to confirm if a resuscitation attempt was successful. The project will use statistical modelling to explain the reasons why survival rates vary between regions. It will provide feedback to ambulance services to allow benchmarking and quality improvement work.



The British Heart Foundation and Resuscitation Council (UK) have funded the structured research project to define the epidemiology and survival rates from OHCA and to identify the sources of variation in outcomes.

Alongside this primary objective, the project is intended to scope the feasibility and optimal configuration for establishing an OHCA registry in the UK for future quality improvement work. Initial funding has been provided over a 3 year period and covers the direct costs of the research being co-ordinated at Warwick Clinical Trials Unit.



Resuscitation Council (UK)

This project will establish, in collaboration with the UK ambulance services, a more unified approach of measurement for process and outcomes in the UK from people who had a cardiac arrest outside the hospital.



Earlier in 2012 a presentation was delivered to the Association of Ambulance Chief Executive's and the National Ambulance Service Medical directors where pledges of support were enthusiastically received by all. The research project will be one of the first to involve every ambulance service within the UK.

Meet the OHCAO Project Team...

Andy Whittington

The Network Coordinator primary role is to liaise with Ambulance Services and to co-ordinate data collection. After a gruelling selection process, Andy Whittington, a former paramedic mentor from the West Midlands Ambulance Service NHS Foundation Trust was appointed. He has worked as a manager with the BHF before developing lay person BLS community projects, and comes with a range of skills from teaching, IT and the recent completion of his foundation degree from Coventry University in Paramedic Science.



Susie Keohane

Susie works as a Clinical Trial Co-ordinator at the University of Warwick Clinical Trials Unit. Susie is responsible for project management, governance and administration processes during the setup of the OHCAO project. Susie's considerable experience is primarily commercial clinical trial management within the pharmaceutical industry working on the development of radioisotope and ultrasound imaging compounds for cardiac and liver/abdominal imaging. Susie joins the team on a part-time basis.

Public Representatives Welcomed to the Steering Committee

The OHCAO team are delighted to welcome Mr Ian Brodie and Mr John Long to the OHCAO Study Steering Committee. Both Ian and John will support the Steering Committee by providing non-clinical input to the project from the lay persons perspective where necessary.

Ian Brodie comes with a wealth of appropriate personal experience; his first aid training spans over 40 years, finally becoming a Community First Responder for the village where he lives. He has personal familiarity of being a patient, when he found himself requiring ambulance assistance and subsequent successful heart surgery, and now supports local charities as a volunteer.

John Long admits he has resuscitation running through his core, being a lifelong supporter and trainer with the Royal Lifesavers Association, receiving a distinguished award for his work from her Majesty The Queen. He also has worked through the ranks of the Police service, and now retired, finds his enquiring skills will be of benefit within the project.



Results in:- Each service was asked to complete an initial feasibility questionnaire, and now a national overview can be assembled, that demonstrates some key findings on how consistently key patient identifiable data is collected for subsequent verification of outcome following a cardiac arrest.

What's next? We are currently looking at which data fields are currently collected by Ambulance Services. This will assist with the development of a bespoke national database for out of hospital cardiac arrests. The OHCAO project staff appreciate the time it takes to complete these questionnaires from already busy audit departments and we would like to say thank you to all those involved for completing this work! The information provided during this phase will help us build a database with the right specifications with the aim of optimising the efficiency of future data collection. If you have any questions concerning this activity, please do not hesitate to contact us at OHCAO@warwick.ac.uk.

And beyond? We are commencing site visits to answer your queries and develop networks to create the infrastructure for submitting data into the project. This is the opportunity to voice views, make recommendations and comments of how the project can be designed to maximise its benefit to each service and the future of patient care. We look forward to meeting staff in all ambulance services and will be in touch shortly to complete these visits. The project team anticipate future newsletters will be sent to the ambulance services and key stakeholders to the project on a quarterly basis to ensure all parties are kept informed as to the progress of the project. If you have any items you would wish to see included in future Newsletters please let us know via email to OHCAO@warwick.ac.uk. We may also ask you for your input into a future issue of the Newsletter as the project progresses.

Progress Chart						
Ambulance Service	Agree to Participate	Research & Development	IG Toolkit Status	Feasibility Returned	Site Visit Completed	Data Share Contract
East of England	✓	✓	Yes	✓	✓	
East Midlands	✓	✓	Yes	✓		
Isle of Wight	TBC	TBC	Not listed	✓		
London	✓	✓	Yes	✓		
North East	✓	✓	Yes	✓	✓	✓
North West	✓	✓	NO	✓		
South East Coast	✓	✓	Yes	✓		
South Central	✓	✓	Yes	✓		
South West	✓		Yes	✓		
Wales	✓		No reports	✓	✓	
West Midlands	✓	✓	Yes	✓	✓	
Yorkshire	✓	✓	Yes	✓		
Great Western	To be merged with South West					
Northern Ireland	To be included once data collection is live					
Scotland	To be included once data collection is live					

National Information Governance Board

Following the Research Ethics Committee approval to conduct the OHCAO project, Warwick Clinical Trials Unit (WCTU) is also required to undertake submission to the NIGB to collect and process patient's identifiable data without their consent. Due to the patient's disposition, in this setting it will not be practical to consult a carer or independent registered medical practitioner for surrogate consent without placing the potential participant at risk of harm from delaying treatment. If a patient is not known by the ambulance service to have died, their clinical and contact details will be sent to the WCTU where project staff at the CTU will check the status of each potential survivor with the Medical Research Information Service (MRIS) after their cardiac arrest. This will allow subsequent survival status to be verified with the Medical Research Information Service (MRIS). In parallel to the NIGB application, the Warwick Clinical Trials Unit is also undertaking the Information Governance Toolkit assessment in order to satisfy the requirements of the NIGB, an assurance from bodies that obtain NHS patient information in circumstances approved under section 251 NHS Act 2006 and supporting Regulations. We plan to find out accurate information about the number of people that have a cardiac arrest in the UK, how many survive, what factors affect survival, what the long term outcomes are for these people and how much treatment costs the NHS. We will use this information to work out the best ways to improve the overall health and outcomes of people that sustain a cardiac arrest.

WWW Forum Would you like the project to set up an online forum for everyone to share questions, ideas, comments, and download documents or watch tutorials on how to submit your data? Let the project know how we can keep you updated and answer your questions. Please send us your comments to this proposal : OHCAO@warwick.ac.uk.

Don't forget, when contacting a member of the OHCAO project team at Warwick Clinical Trials Unit please use the email OHCAO@warwick.ac.uk

Thank you for your on-going support