Requirements for resuscitation training and facilities for supervised cardiac rehabilitation programmes

A joint statement by the Resuscitation Council (UK) and the British Association for Cardiovascular Prevention and Rehabilitation (BACPR)

July 2013

This joint statement was developed initially in 2008 and reviewed in 2013 in response to enquiries about the facilities and level of resuscitation training required for staff supervising the structured exercise component of comprehensive cardiac rehabilitation (CR) programmes.

The current statement covers both early CR (Phase III) and long-term management (Phase IV) and replaces both the Joint Statement on Resuscitation Training and Facilities [BACR and the Resuscitation Council (UK)], November 2008 and the Supplementary Statement on Automated External Defibrillators (AEDs) and Exercise, September 2009.

The statement refers only to cardiorespiratory arrest and assumes that procedures are in place in CR programmes for the management of other potential problems, including chest pain, cardiac arrhythmia and syncope.

Requirements for the management of cardiorespiratory arrest occurring during supervised CR programmes in acute hospitals, community and home settings:

1. Staff should participate in regular and appropriately frequent resuscitation training to a level commensurate with their expected clinical responsibilities and professional code of practice.

2. Irrespective of venue, all staff supervising patients participating in structured exercise, both in early CR (Phase III) and in long-term management (Phase IV), must have received training in and have maintained their competency in cardiopulmonary resuscitation (CPR) to at least the level of Basic Life Support (BLS). At all times during CR there should be at least one staff member trained and competent in the use of an AED.

3. All venues which deliver supervised CR programmes must have a defibrillator immediately available on site, with staff trained and competent in its use. In most venues an AED will be the appropriate choice of defibrillator.

4. The minimum standard for immediate response to cardiac arrest in any setting is that:
   o there is prompt recognition of cardiorespiratory arrest
   o CPR is started immediately


- appropriate help is summoned without delay
- clear directions to the exercise venue are provided to the emergency response team
- a defibrillator is available, applied without delay, and (if an AED) its instructions are followed
- defibrillation is attempted for a shockable rhythm within 3 minutes of collapse.

5. All CR programmes must have a clear policy defining the procedures to be followed in response to cardiorespiratory arrest. All staff working on the CR programme should be familiar with this policy and know how to implement these procedures.

6. CR programmes based in hospitals, and those others where a resuscitation team exists, should have procedures in place to ensure rapid access to the team. The resuscitation team must include individuals who have been trained and have current competency in Advanced Life Support (ALS).

7. For all supervised CR programmes based outside hospitals or where there is no immediate access to a resuscitation team there is a need to provide a prompt response via a ‘999’ emergency protocol. The following should be in place to facilitate an optimum response:

- a telephone or mobile telephone to summon a paramedic ambulance
- immediate on-site access to an AED

   In addition for group based programmes it is best practice to ensure:
   - easy access for ambulances and ambulance trolleys to the CR venue
   - prior identification of the CR venue with the local emergency services

8. Each patient must undergo an individual risk assessment before entering a CR programme. The risk classification for each patient should determine the appropriate exercise intensity, staffing and resources required to allow safe and effective participation in the exercise programme. For more information visit: [http://acpicr.com/sites/default/files/Acpicr%20standards_1.pdf](http://acpicr.com/sites/default/files/Acpicr%20standards_1.pdf)

More complete guidance on appropriate facilities for and training in resuscitation can be found in Cardiopulmonary Resuscitation: Standards for Clinical Practice and Training [http://www.resus.org.uk/pages/standard.htm](http://www.resus.org.uk/pages/standard.htm)

Further advice and response to specific queries not covered by the above guidance may be obtained from [enquiries@resus.org.uk](mailto:enquiries@resus.org.uk) or [bacpr@bcs.com](mailto:bacpr@bcs.com).

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