

## LCQ9: Performing first aid on persons suffering from sudden cardiac arrest

Following is a question by the Hon Kenneth Lau and a written reply by the Secretary for Security, Mr John Lee, in the Legislative Council today (April 17):

Question:

Some villagers have relayed to me that as the response time of emergency ambulance service for many remote villages is quite long, persons suffering from sudden cardiac arrest may die as a result of not receiving treatment in time. They have therefore proposed that the Government should install automated external defibrillators (AEDs) in the village offices of such villages so that timely first aid may be performed on such persons in the hope that they will stand a better chance of survival. In this connection, will the Government inform this Council:

(1) whether it has installed AEDs in the village offices of villages and at hiking trails; if so, of the addresses and the total number of such locations; if not, the reasons for that;

(2) whether the Fire Services Department (FSD) will organise community AED and cardiopulmonary resuscitation (CPR) educational lectures in rural areas to enable villagers to acquire the relevant knowledge; if so, of the details; if not, the reasons for that;

(3) whether it will collect and disseminate to villagers the contact information of residents in the vicinity of the various remote villages who have received first aid training, so that villagers may contact such persons for performing first aid on persons suffering from sudden cardiac arrest before the arrival of ambulance personnel; if so, of the details; if not, the reasons for that; and

(4) while FSD has recently been, through the virtual character known as "Anyone", promoting to members of the public CPR and the applications of AEDs as well as publicising the message that "anyone can save lives", there is currently no legislation exempting rescuers from the legal liabilities that might be incurred in performing first aid, whether the Government will consider afresh enacting the relevant legislation to allay the concerns of rescuers?

Reply:

President,

The Fire Services Department (FSD) has been actively promoting cardiopulmonary resuscitation (CPR) and the use of automated external defibrillator (AED). The FSD established the Community Emergency Preparedness

Division (CEPD) on October 2, 2018 to promote in the community the means and skills in respect of emergency preparedness through educational and promotional activities, with a view to further enhancing public awareness of emergency preparedness in a holistic manner, strengthening the public's response capability in the event of emergencies or contingencies, and imparting knowledge to the public on firefighting, self-help as well as escape and evacuation. The promotion of CPR and the use of AED to the public is one of the key highlights of the promotion and publicity work of CEPD.

Through various platforms (such as social media, training courses, advertisements) and by different promotional strategies, The FSD has been reaching out to people from different age cohorts and community groups (including residents of rural areas) to publicise the concepts of "Anyone Can Save Lives" and "Dare to Do, Save a Life". The FSD also encourages organisations which have attended the training courses (such as schools, sports associations, property management companies) to install AEDs in public premises, so that first aid can be provided to cardiac arrest patients in the event of emergencies. The FSD hopes to educate more members of the public on CPR and the use of AED, so that when a cardiac arrest patient is nearby, people around will be able to provide first aid to the patient immediately, thereby increasing the patient's chance of survival.

In consultation with relevant policy bureaux and departments, our consolidated reply to the questions raised by the Hon Lau is as follows:

(1) We do not have information on whether or not village offices of villages are equipped with AEDs.

As regards hiking trails, as most of the hiking trails and recreation sites in country parks are located in the countryside with no offices or shelters, there is practical difficulty in providing AEDs at those sites. Nevertheless, four country park visitor centres (including Sai Kung Country Park Visitor Centre, Lions Nature Education Centre, Clear Water Bay Country Park Visitor Centre and Tai Mo Shan Country Park Visitor Centre) are currently equipped with AEDs for use by countryside visitors in need.

Separately, the Auxiliary Medical Service (AMS) deploys its personnel to provide first aid and ambulance services at fixed first aid posts at designated country parks on Sundays and public holidays. When the AMS personnel are on duty at these fixed first aid posts and ambulances, they will provide assistance to cardiac arrest patient(s) using AEDs when necessary.

(2) Since 1999, the FSD has organised community CPR training courses from time to time, covering basic CPR and an introduction to the use of AED, for members of the public. So far, more than 30 000 people have attended the courses.

Since mid-2017, the FSD has allocated additional resources for organising educational lectures on CPR and AED as well as the "'Press to shock – Save a life' Automated External Defibrillator Course" in different

districts across the territory for free, with a view to further enhancing the public's knowledge of CPR and the use of AED. These educational lectures and courses have been organised in various districts, among which the large-scale educational lectures held in regions such as Tai Po and Yuen Long indeed serve to facilitate attendance by residents of the New Territories (including those from the rural areas).

For those who are interested in the "'Press to shock-Save a life' Automated External Defibrillator Course" (including residents of the rural areas), apart from applying for the course as individuals, they may apply for group class (with a minimum of 10 people per class). Subject to availability of resources, the FSD will deploy staff to the venues provided by the applicants (such as village offices) to conduct the course. Course details are available on the website of FSD:  
[www.hkfsd.gov.hk/eng/education/amb\\_press\\_to\\_shock.html](http://www.hkfsd.gov.hk/eng/education/amb_press_to_shock.html).

The FSD will continue to organise the aforementioned educational lectures and courses to enhance participation by members of the public.

(3) On publicity and public education, the FSD's approach is to step up efforts in educating more members of the public on CPR and the use of AED, so that they can help those in need in the event of emergencies prior to the arrival of rescue crew.

The FSD has launched an enhanced post-dispatch advice (PDA) service since October 2018. Comprehensive and appropriate PDA on 32 types of injuries and sicknesses (including physical trauma, loss of consciousness and cardiac or respiratory arrest) are provided to callers for emergency ambulance service. The service enables the emergency ambulance callers to, according to the appropriate advice given by the operators of the Fire Services Communications Centre, stabilise the patient's conditions before the arrival of rescue crew at scene, thereby increasing the patient's chance of survival.

We have also considered the feasibility and practicability of the suggestion of collecting the contact details of residents of remote villages who have received first aid training and distributing such information to villagers. Since these trained persons may not be able to rush to the scene immediately in the event of emergencies (e.g. cardiac arrest cases), their assistance may not be readily available in time-critical and life-threatening situations. The FSD therefore considers it more appropriate to step up publicity on CPR and the use of AED, as well as to provide the PDA service.

(4) There is currently no legislation in Hong Kong which provides for the exemption of rescuers from legal liabilities that might be incurred in performing first aid. The issue of whether such legislation is suitable to be introduced requires thorough discussion among relevant policy bureaux, departments and stakeholders, taking into consideration various factors and requisite conditions, including the public awareness of cardiac arrest and their knowledge of the first aid for it, as well as the level of first aid training of rescuers.