Health professionals must be proactive in risk management for potential adverse events in their workplace. One of these potential risks, includes a patient incident of sudden cardiac arrest (SCA) during or following exercise. Apart from the obvious devastating impact to all involved, this may also precipitate a case of litigation against the supervising health professional or health and fitness facility (HFF). Evidently, AEPs, Exercise Scientists and Sports Scientists must consider the need for Automated External Defibrillator (AED) placement in their workplace as part of effective risk management practices.

This article provides several important considerations for ESSA members when assessing the need for AED placement in their workplace.

**EVIDENCE SUPPORTING AED PLACEMENT**

SCA, often associated with coronary artery disease (CAD), is one of the leading causes of premature death with approximately 30,000 Australians dying from SCA each year, mostly outside of a hospital setting. HFFs face an additional increased risk of exposure to SCA, as highlighted by epidemiological studies demonstrating that vigorous exercise can trigger SCA, particularly in habitually sedentary populations with diagnosed or undiagnosed CAD.

Survival rates decline rapidly by ~7-10% every minute that defibrillation is delayed, whereby a SCA victim without defibrillation beyond 12 minutes only has a 2-5% chance of survival. The importance of nearby AED access is also highlighted by the fact that median emergency response time by Australian ambulance services is ~7.5-10 minutes.

The American Heart Association (AHA) and American College of Sports Medicine (ACSM) have released a scientific statement on AEDs in HFFs. These guidelines encourage effective placement and use of AEDs, as permitted by law, to achieve the goal of minimising time between recognition of a SCA and successful defibrillation. This was mostly emphasised in relation to facilities with more than 2,500 members, that offered special programs to clinical populations and/or those in which the time from recognition of SCA until defibrillation delivered by emergency medical services was anticipated to be more than 5 minutes.

Additionally, the Australian and New Zealand Resuscitation Council guidelines support placement of AEDs in public settings (e.g. sports facilities) where witnessed cardiac arrest is likely to occur. This has also been supported by numerous other professional bodies such as St John Ambulance, Australian Red Cross and Sports Medicine Australia.

**LEGISLATIVE REQUIREMENTS FOR AED PLACEMENT**

There is no Australian legislation that either supports or excludes the installation of an AED in HFFs. However, HFFs that demonstrate low cardiac emergency preparation, lack pre-activity screening procedures and do not follow risk management recommendations and policies published by the leading national professional organisations expose themselves to serious risk of litigation by breaching the legal standard of care expected of them. A breach of standard of care occurs where a risk of injury is a reasonably foreseeable consequence of the provider’s conduct or omission, and the provider’s response to such risk does not comply with what a reasonable provider would have done in response.
EXCLUSION CLAUSES AND WAIVERS

HFFs frequently incorporate exclusion clauses or waivers into membership contracts to transfer risk of injury claims to clients. However, many health professionals mistakenly believe that a signed waiver provides complete protection against litigation. However, Australian recreational services are subject to provisions of the Australian Consumer Law (Sections 60 and 64). Specifically, where services are supplied to a consumer, a provider must render such services with due care and skill. Therefore, a provider will be liable to compensate a consumer for any loss or damage suffered as a result of a breach of such guarantee (negligence).8,14.

ESSA RECOMMENDATIONS

The ESSA Board advocates that ESSA members conduct appropriate risk assessment as part of their decision making process on acquiring an AED. Specifically, professionals and HFFs need to determine the risk of a client having a cardiovascular event whilst they are in their care or using the facility. This will help determine whether an AED would be a useful addition to their first aid equipment. For example, a large HFF catering for many people with health conditions (at higher risk of SCA exposure) would have greater need for an AED versus a small business aimed at children with musculoskeletal issues (at lower risk of a SCA exposure).

Part of effective risk assessment involves identifying the vulnerability to specific threats (i.e. what is the expected likelihood and consequences of a specific threat or risk?). Increasingly, ESSA members (particularly AEPs) are exposed to greater 'likelihood' of a client under their supervision experiencing SCA, attributed to:

- An aging population
- Increased prevalence of chronic disease, multiple comorbidities and risk factors
- Rising incidence of cardiovascular disease (diagnosed and undiagnosed)

WORK HEALTH & SAFETY (WH&S) REGULATIONS 2011

Australian employers are responsible under WH&S Regulations to ensure that the environment, their employees and other people (e.g. clients) are not exposed to risks to their health and safety arising out of the services that they provide. Employers must implement appropriate precautions to reduce these risks, including:

- Ensuring risk management procedures are implemented to identify, assess, control and monitor workplace hazards.
- Ensuring emergency preparedness and response, including training, first aid and equipment requirements.
- Identifying potential risks and ensuring that appropriate control measures are in place to minimise the likelihood of an incident occurring.

ESSA acknowledges that purchase of an AED may seem cost-prohibitive to some businesses - hence there is a need for each business to independently assess their requirement for an AED and take any reasonable steps to prevent harm occurring to their patients, and ultimately, provide protection in the unfortunate circumstance of litigation.