

# Global Resuscitation Alliance



## Update on the Implementation of the 10 steps in Global Resuscitation Alliance to Improve OHCA survival in Southern Philippines Medical Center, Davao City, Philippines

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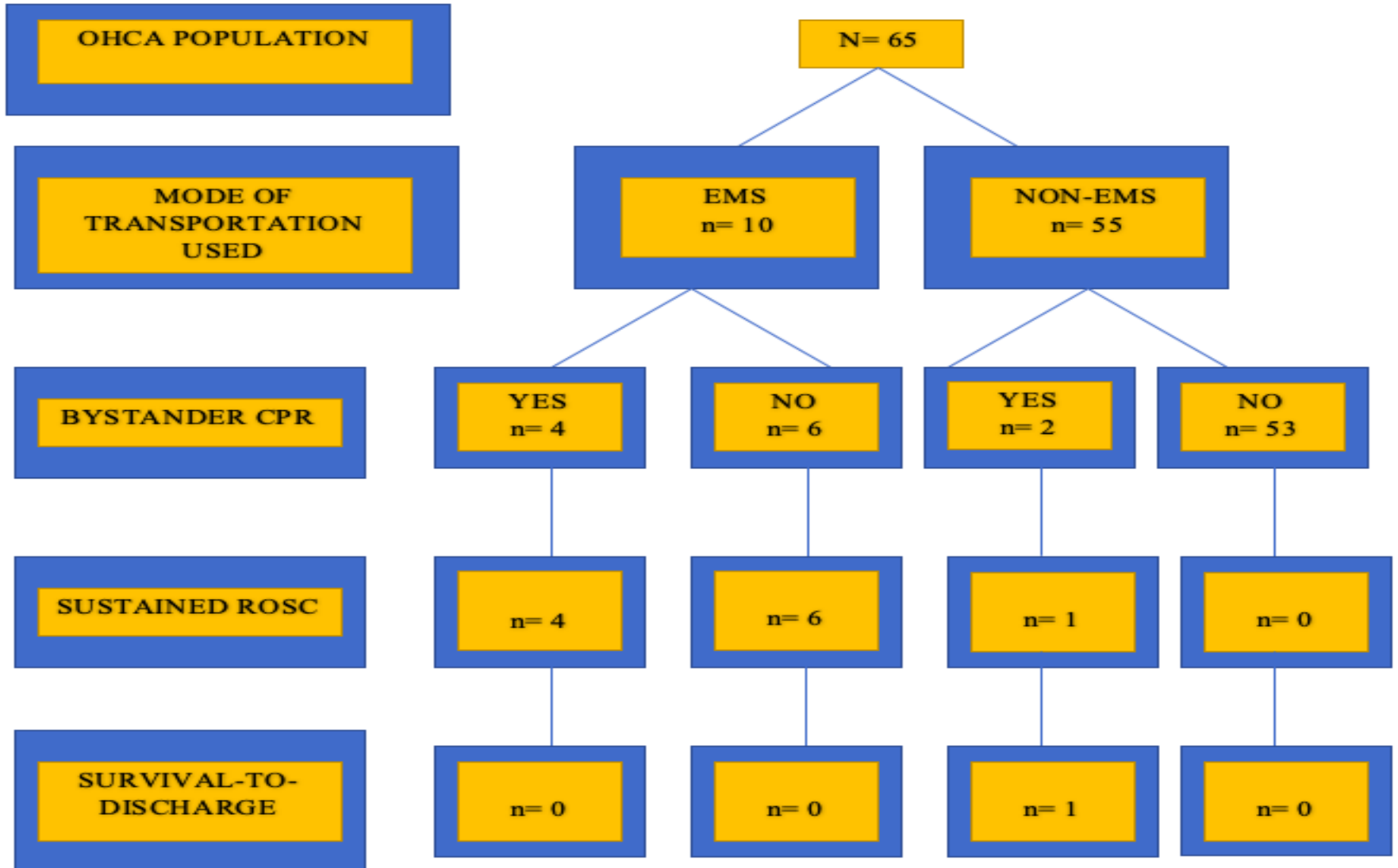


# BASELINE STATISTICS

- No accurate OHCA mortality data in SPMC
- In 2016, we started our registry to establish baseline incidence of OHCA.
- This is important as this will generate pre-hospital protocol and will guide health policy makers in implementing appropriate preventive strategies, improving emergency preparedness and instituting financing policies for the improvement of OHCA survival.



# At a Glance: 2016-2017 Data





## 2016-2017 DISPATCH INFORMATION ACTIVITY

ACTIVITY	MINUTES
Call-to-arrival at scene	
Mean	0:13:30
Median	0:13:50
Call-to-arrival at hospital	
Mean	0:27:40
Median	0:29:00

# Improving SURVIVAL from OHCA: Our Experience in the Philippines

Implementation of GRA's 10-programs/actions consensus recommendations to improve OHCA survival



# THE **CHALLENGE** from the start...



- **Survival from sudden cardiac arrest (SCA) is low.**
- **Most of the constituents in the community do not know how to do compression-only CPR**
- **Unavailability of AED's in public areas**
- **No available smart technology where bystander volunteers can be notified to respond to a nearby arrest to provide early CPR**



# THE PROGRAM...

## Ten Steps to Improve Cardiac Arrest Survival

1. Establish a cardiac arrest registry
2. Begin Telephone-CPR with ongoing training and QI
3. Begin high-performance EMS CPR with ongoing training and QI
4. Begin rapid dispatch
5. Measure professional resuscitation using the defibrillator recording (and voice if possible)
6. Begin an AED program for first responders, including police officers, guards, and other security personnel.
7. Use smart technologies to extend CPR and public access defibrillation programs to notify volunteer bystanders who can respond to nearby arrest to provide early CPR and defibrillation
8. Make CPR and AED training mandatory in schools and the community
9. Work toward accountability – submit annual reports to the community
10. Work toward a culture of excellence

work in  
progress



**WHERE ARE WE NOW?**

WORK IN PROGRESS

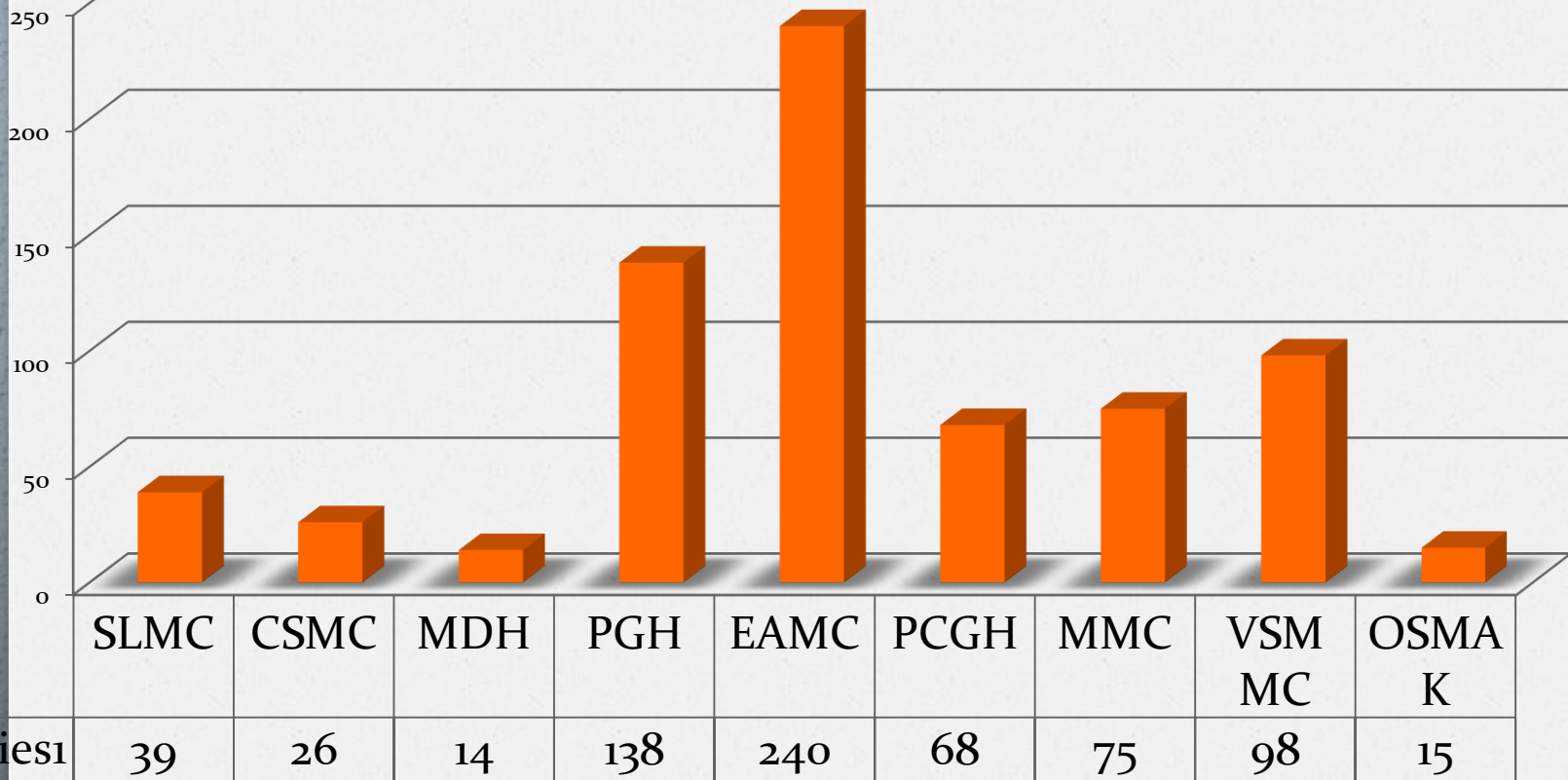


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# STEP 1: ESTABLISH A CARDIAC ARREST REGISTRY

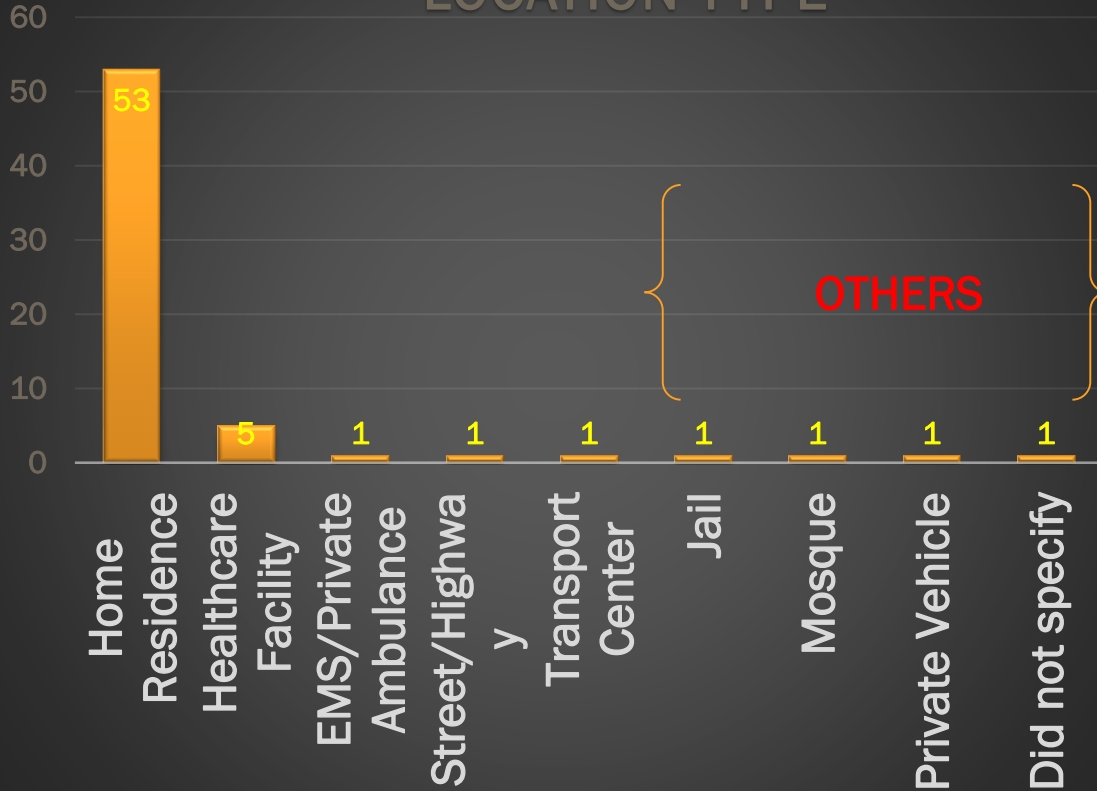
DISTRIBUTION OF OHCA CASES PER INSTITUTION



Series1

# SPMC RESULTS

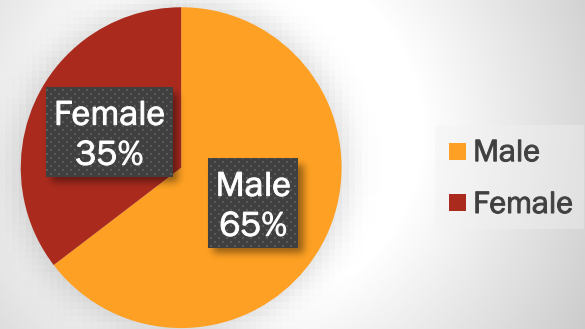
## LOCATION TYPE



PATIENT INFORMATION	DESCRIPTIVE STATISTICS
Age (Mean+SD)	49.12 +/-20.57



## Distribution of Sex



**DAVAO**  
city

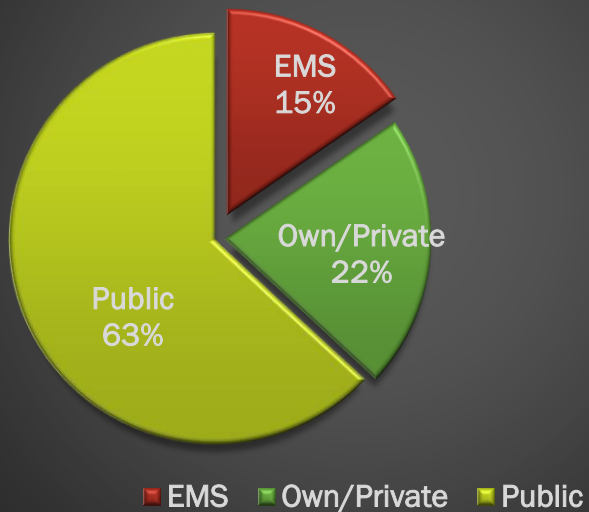


PHILIPPINES  
**CENTRAL 911**

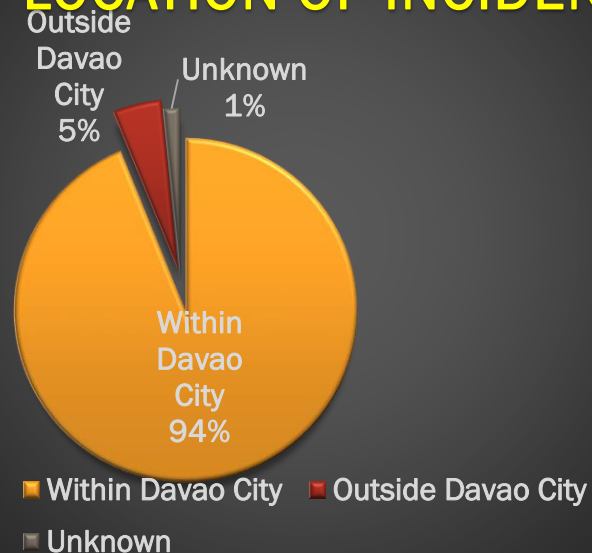


# CLINICAL PARAMETERS RESULTS

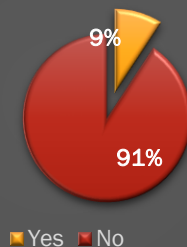
## MODE OF TRANSPORTATION



## LOCATION OF INCIDENT



## Bystander Performing CPR



# CONCLUSION

- o Return of spontaneous circulation or resuscitation success rate for this study is 17 % where majority of patients were admitted.
- o The survival to hospital discharge or survival to 30 days post cardiac arrest is 1.5 %.
- o Modifiable factors include bystander CPR and access to EMS services

# STEP 2: BEGIN TELEPHONE CPR TRAINING

- o OHCA Dispatcher's Course - July 28, 2017; 50 participants
- o OHCA Dispatcher's Course during EMS Asia – June 17, 2018 with 60 participants





DA-CPR  
(Telephone  
CPR)

# DAVAO EMS MODEL

## Medical Direction

NATIONAL-  
DOH

Disaster  
management

LOCAL-  
DILG

COMMUNICATION

TRAINING



MEDICAL  
DIRECTION



FACILITY-EMS  
COMPONENTS

TELEMEDICINE

ULTRASOUND LIFE  
SUPPORT



# STEP 3: HIGH PERFORMANCE EMS CPR WITH TRAINING AND QI



# STEP 4: RAPID DISPATCH

## DISPATCH INFORMATION ACTIVITY

<i>TIME-CRITICAL EMS ACTIVITIES</i>	2016-2017 Data	2018-2019 Data
<i>Call-to-arrival at scene</i>	0:13:30 (Mean in minutes)	0:15:22 (Mean in minutes)
<i>Call-to-arrival at hospital</i>	0:27:40 (Mean in minutes)	0:26:05 (Mean in minutes)



PHILIPPINES  
**CENTRAL 911**

# STEP 8: HIGH PERFORMANCE CPR TRAINING



- o COLLABORATION WITH COMMUNITIES SERVED BY 911
- o PARTNERSHIP WITH LOCAL RADIO NETWORK
- o COLLABORATION WITH PUBLIC SCHOOLS FOR TEACHING CPR TO SENIOR HIGH SCHOOL STUDENTS

# STEP 8: HIGH PERFORMANCE CPR TRAINING

S. No. 3204  
H. No. 6204

*Republic of the Philippines*  
**Congress of the Philippines**  
*Metro Manila*

*Sixteenth Congress*

*Third Regular Session*

Begun and held in Metro Manila, on Monday, the twenty-seventh  
day of July, two thousand fifteen.



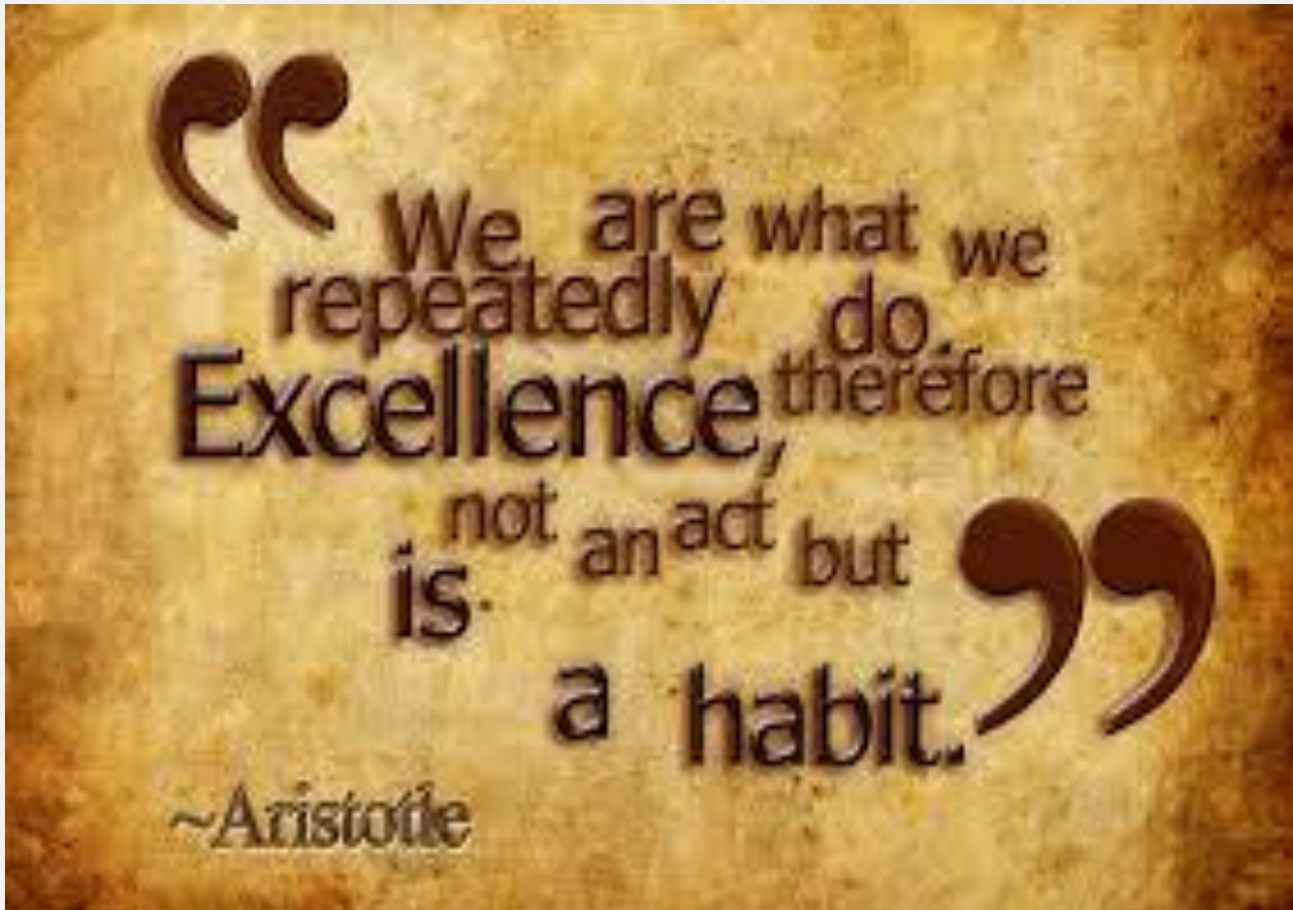
[ REPUBLIC ACT NO. **10871** ]

AN ACT REQUIRING BASIC EDUCATION STUDENTS TO  
UNDERGO AGE-APPROPRIATE BASIC LIFE SUPPORT  
TRAINING

# CPR CAMPAIGNS IN SCHOOLS



# STEP 10: WORK TOWARDS A CULTURE OF EXCELLENCE



# 2018 PAROS Data

<b>Median age</b>	<b>52.5</b>
<b>Gender (Male)</b>	<b>70.8 %</b>
<b>Past Medical History (Heart Disease)</b>	<b>64.3 %</b>
<b>Location: Home Residence</b>	<b>70.8 %</b>
<b>Arrest witnessed by: Unwitnessed</b>	<b>58.3 %</b>
<b>First Arrest Rhythm: Unknown Unshockable</b>	<b>50 %</b>

# 2018 PAROS Data

<b>Bystander CPR</b>	<b>29.2 %</b>
<b>Etiology of Arrest: Presumed Cardiac</b>	<b>87 %</b>
<b>EMS ROSC</b>	<b>8.3 %</b>
<b>ED ROSC</b>	<b>29.2 %</b>
<b>Survived to admission</b>	<b>16.7 %</b>
<b>Survived to discharge</b>	<b>4.2 %</b>



# Outcome since the Implementation of the Program

<i>OTHER PARAMETER</i>	2016-2017 Data	2018-2019 Data
<i>Mode of Transportation</i>	EMS- 15 % Non-EMS- 85 %	All EMS No data for Non-EMS
<i>Bystander CPR Rate</i>	9 %	20 %
<i>Sustained ROSC Rate</i>	17 %	25 %
<i>Survival-to-hospital discharge rate</i>	1.54 %	5 %





**IT TAKES A SYSTEM TO SAVE A LIFE**