



HEART SAFE COMMUNITIES UK

The Journey Continues



Annual Report & Summary Financial Statements 2023 - 2024

“Together We Can Make A Difference”

Annual Report

“Every Second Counts”

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Chair's report

It gives me pleasure to introduce the second annual report of Heart Safe Communities UK (HSCUK).

It has been another challenging year because of the general economic pressures faced by many households and businesses throughout the U.K. and the need to rebuild momentum after the challenge faced last year.

With so many fantastic charities working tirelessly to achieve their own objectives the competition to raise funds is significant.

Whilst this has meant progress has been slower than we would have liked, we have had a steady flow of donations including one from dental surgeon Robin Bryant. Robin raised over £3,000 from his 430km cycle ride from Barcelona to Valencia. We thank him for his inspiration and hope that Robin will feel able to help us with another challenge this year.

We know that going forward we need to increase our capacity to help more communities and have a wide range of ways in which people are able to make donations in support of HSCUK. We hope to be able to find others who might be willing to help raise funds in whatever way they feel able through specific campaigns or challenges such as Robin's.

We aim to increase the number of Trustees and broaden the expertise we have at Board level during the coming years so that we can develop the charity and ensure a sustainable future. It's because of this that we have placed an emphasis on recruiting volunteer trustees in to the role of Communications, Public Relations and Marketing; Income Generation and a Clinical Advisor with experience in Cardiology, Emergency Medicine or associated academia together with more general roles.

We have made a firm commitment to developing our training programme to ensure consistency and remain current. This will hopefully help bring on board additional volunteer trainers that will enable us to assist more communities.

I am pleased to report that we have an agreed Business / Financial Plan for the period 2024/27 that sets a clear agenda for the next three years. This is a rolling plan that will be kept under review and enable us to monitor progress.

I would like to place on record my sincere thanks to my fellow trustees, volunteers, supporters and others who have helped in any way. Without them our work would not be possible.

Last but not least, if you would like to be part of our journey or support us in any way do get in touch. You can email us at info@hscuk.org.uk.

Russell B. Hamilton

Chair

Heart Safe Communities UK

Introduction

This is the second Annual Report of Heart Safe Communities UK (HSCUK). We are a Charitable Incorporated Organisation (“the CIO”) that is registered with the Charity Commission for England and Wales (Registered Charity Number 1196702).

The charity’s principle address for administrative purposes is 27 Station Road, Nassington, Peterborough PE8 6QB.

Our aims are purely charitable and we have no affiliation to any business, organisation or other charity in pursuit of profit. Our only income is derived from public donations.

To fulfil our governance requirements this report covers the period 06 April 2023 to 05 April 2024.

The Purpose of the Charity

The Charity has worked in accordance with the objects of its CIO throughout the year to promote and protect good health for the public benefit, in particular but not limited to cardiac health issues and the need for prevention and appropriate treatment and rehabilitation in particular but not limited to those living, working or visiting the United Kingdom, in the following ways;

- (a) Promoting the concept, definition and development of common standards leading to a single unified accreditation process for ‘Heart Safe Communities’;
- (b) Building capacity and inspiring people to create Heart Safe Communities (HSC) [Caring Communities] based on the principles of caring communities, saving lives, equity, inclusivity, fairness and equality; through but not exclusively by;
- (c) Advancing the education of the public regarding health and related issues and/or;
- (d) Providing training for the public on life saving /skills such as how to perform Cardio Pulmonary Resuscitation (CPR) and use an AED, in particular but not limited to training throughout communities including in schools, sports clubs, community groups, and organisations; and/or;
- (e) Providing automated external defibrillators (AED) as part of strategic networks (Predominately public access defibrillators and other equipment necessary for emergency care); and/or;
- (f) Supporting and encouraging businesses, organisations and other premises to raise awareness, offer training, provide access to and support the provision of defibrillators; and equipment necessary for emergency care;

- (g) Providing, facilitating & encouraging clear signage and information that enables life saving equipment to be found and accessed as quickly as possible when needed;
- (h) Seeking out new, novel and innovative ways to develop Heart Safe Communities while improving speed of access to AEDs, delivery and awareness of related issues; and/or;
- (i) Such other charitable ways the trustees, in their absolute discretion determine.

Main Activities

The Charity has a clear aim to promote the concept of a single consistent definition and concept of what constitutes a 'Heart Safe Community'; together with the development of common standards leading to a single unified accreditation process for 'Heart Safe Communities'. We know this won't be easy and that it is a long term objective. It will require many to think more broadly and make new and novel connections for this to become reality.

Our vision of a 'Heart Safe Community' (a concept) is one where people work together in their own community to do everything possible to reduce deaths and improve outcomes from cardiac arrest because they care. Our vision is that people understand the issues and feel inspired to act using evidence based methods.

We know that neither Government nor the NHS / broader public services or any single organisation has the will, resources or ability to deliver this; but together we can make a difference.

A meaningful 'Heart Safe Community' will be led and supported by local people who together have a greater potential to save lives from cardiac arrest than would otherwise be possible.

Communities must understand and own the issue, be fully open and committed to raising awareness, increase and sustain the number of potential life savers and increase the number of strategically located defibrillators to bring more people within the recommended retrieval distance of 100 metres or a 2-3 minute brisk walk.

We appreciate the size of the task and know it will take time and a coordinated approach to build the true capacity needed.

We have worked during the year to encourage and support communities within the resources available and will continue to extend our work incrementally as funding allows.

We will build on our progress by seeking out high calibre people with the required expertise to help develop the charity. Our immediate aim is to recruit volunteer trustees with significant expertise in income generation, public relations & marketing and experience in cardiac/emergency medicine. Others will follow.

The Trustees have been supported by a small number of others who helped develop our website and social media, supported high quality training in CPR and use of defibrillators and book keeping.

Awareness

Everyone is a potential life saver and awareness of the issues is of paramount importance; it provides the basis for all we do and aspire to. We see every interaction formal or informal as an opportunity to increase awareness.

Our work to raise awareness is ongoing within the resources available but there is more that we can do.

The opportunities for achieving this are wide ranging and possibilities endless. The results are frequently obvious and can be immediate whilst at other times invisible, slow to manifest and often immeasurable.

We aim to promote discussion about what cardiac arrest is, how to identify it, how to act in such event, why training helps even if not essential, and why having plans should family, friends or neighbours be faced with such circumstances can make a difference.

Whilst we know some aspects of our ideas and work are similar to many others, that's not universally so. We endeavour to think differently and make broader connections with other areas of community. In either case we are another voice among many who care about others and our chosen field.

Thankfully many others share the same passion and determination to help reduce premature deaths as a result of cardiac arrest. We applaud anyone who is committed to this.

Looking forward, we are realistic about what we can achieve and recognise that our resources are more limited than we would wish. As part of our ongoing plans to develop our capacity to share our message, we have identified the need for a trustee with skills in communications, public relations and marketing together with a trustee lead for income generation. We think these skills would compliment those we already have and enhance our board's capacity to take the Charity forward. We hope to fill that role at the earliest opportunity.

This together with the help of our generous supporters will enable us to extend our reach and to share knowledge more widely.

Training

The number of training sessions during the past year have been less than we would have liked due to the resources available to us. However the total number of people trained in the communities where we have worked since we were formed is relatively high.

All training provided remains focused on raising awareness, increasing confidence to help in an emergency, promoting high quality CPR, use of defibrillators (AED) and encouraging attendees to develop their own preparedness plan.

Our initial trainer to participant ratio for training sessions was set at 1:6 as research shows that at this level trainers are most likely to be able to pick up errors in technique and correct them.

Having initially set out to deliver 5 sessions per training day with 6 participants per session we have learned that it would be more effective to hold less sessions with more places. Experience has led us to change the format. We now hold 4 sessions per day with 8 places per session. Our trainer / participant ratio is based on sound reason so remains unchanged at 1:6, but as we never have less than 2 trainers that's an academic point. Normal practice of having 3:8 trainers / participants means we almost always exceed our standard.

The Charity aims to provide a 1:1 - Manikin:Participant ratio and training 1:2 Defibrillator:Participant ratio so that all participants get ample opportunity to practice their skills.

Training is accessed by participants visiting HSCUK's website where sessions are advertised as they are released for booking. Participants then follow a simple booking process that secures their preferred venue, date and time. They are then sent an automated booking confirmation. We don't yet have the ability to send automated reminders but hope to be able to do so in the future.

All training continues to be totally FREE with no cost to any individual. Participants may however make a voluntary donation when attending sessions should they choose.

The number of our own training manikins and defibrillators remains more limited than we would like but thanks to Oundle Community First Responders (OCFR) group we are able to supplement these by others on loan whenever needed.

Our training sessions were all led by volunteers who are highly trained, experienced, practicing professionals that could be called upon to assist people in life threatening situations. They are all subject to regular / refresher training and peer review in their professional workplace roles. They are all registered medical/clinical practitioners or community first responders trained by their respective ambulance service.

All participants are invited to complete anonymous questionnaires following training sessions. Completed questionnaires are analysed in detail and responses used to respond to participants needs; and improve training. We have continued to have a very high completion rate and overall satisfaction score.

Looking ahead; whilst some choose to use lay people who are trained to train we have adopted a more rigorous approach to help promote and maintain the highest possible standards. As a result of this we aim to recruit more trainers who will be qualified/practicing clinicians.

We will explore opportunities to establish local training groups in other locations that operate within the HSCUK framework.

As part of our determination to provide a consistent approach to all training sessions we aim to produce a standardised training programme / script and associated training video(s).

HSCUK will also seek funding to enable self sufficiency where possible and ensure that the manikins used reflect ethnic and age diversity, thereby reflecting its commitment to promoting equality for all.

Building Networks of Strategically Located Defibrillators

“Strategically located defibrillators” are those that are carefully placed to increase the number of people brought within the recommended retrieval distance of 100 metres or a 2 - 3 minute brisk walk.

Such locations should be carefully mapped and defibrillators placed in order to optimise coverage and ensure a distribution that offers whenever possible, equitable access within communities.

All installations supported by HSCUK are considered, planned and subject to ensuring communities take ownership, carry out routine checks and maintenance and that they understand the ongoing needs to sustain the network.

HSCUK only supports installations that fit its own strategic aims, including clear identification of guardianship and commitment to registration and maintenance in a publicly visible manner on the British Heart Foundation’s national database for defibrillators - ‘The Circuit’ from the outset.

We have continued to work worked within our capacity during the year and hope to develop our ability to increase the number of communities that we are able to assist; as interest from them and funds allow.

We also work with organisations / business / public service and others to encourage them to adopt policies that support our aim and objectives together with encouraging existing defibrillators to be placed in more accessible locations and where possible 24 hours a day / 365 days a year.

Grant making

We remain committed to implementing our grant making policy when funds allow and once we are able to identify communities who, with our support are willing to make a commitment to helping themselves.

We aim to make the first steps to establishing a grant fund during the year.

Volunteers

The number of volunteers attached to the charity remains the same this year. We will increase the number and opportunities in future to enable the careful growth of the charity as demand necessitates.

As previously reported safeguarding will always be of paramount importance and at the forefront of recruitment when developing such opportunities. The Charity has a policy that requires all Trustees and volunteers regardless of role to be subject to DBS checks.

Principal sources of funding

The Charity's principal source of funding is public donations. Donations come from people, organisations or groups that choose to support us as a charity because they believe what we are doing is relevant and worthwhile.

We have a wide range of ways in which donations can be made either directly or indirectly. These include: donations via our website or by text and gift aid. Other methods include payroll giving, Give as you Live, Donr, PayPal.

Others wishing to help raise funds for us can do so through 'Just Giving' campaigns.

HSCUK also seeks opportunities to raise income through grant funding, events and collecting boxes.

The Charity is registered with the Fundraising Regulator.

Governance

HSCUK continues its work to ensure it is a high quality, well run, sustainable charity. As such, it has continued to develop and improve a wide range of policies and procedures that underpin its operation.

We have begun our search for new trustees to broaden our knowledge, expertise and capacity to build the charity. Such roles include Communications, Public Relations & Marketing, Income Generation, Clinical Advisor and general appointments that compliment and enhance our capacity to deliver. We hope to attract suitable candidates and make some appointments over the coming year.

Risk

The Charity has implemented a Risk Management Policy and Risk Register that records its principal risks. Risk management is a standing item on every board agenda meaning that the trustees retain a focus on minimising risk to the charity and its operation.

In addition to this the charity maintains an up to date register of declarations of interest. Trustees are invited to note any new declarations at the start of every board meeting. Any new declarations are added to the register or removed if no longer relevant. In addition to this trustees are asked to complete an annual declaration each April.

Adherence to Charity Commission Guidance

The Trustees take our obligations to the Charity Commission seriously. As already highlighted our aim is for HSCUK to be a charity that has sound foundations, led by the best possible people, at the forefront of modern society. It is our intention to grow the charity in a measured manner that delivers its activities to the highest possible standards within the resources available. Ultimately we believe in the ethos of public/community service and care for others. We want to make a lasting difference as underlined by our constitution.

The Trustees are aware of our obligations under guidance issued by the Charity Commission on public benefit and pay due regard to this. For as long as the Charity exists we will endeavour to do our very best to maintain these high standards.

Charity Board Trustees

Russell B. Hamilton is founding Chair of Heart Safe Communities UK.

He has broad knowledge and experience of healthcare after an extensive career spanning 30 years in the NHS. He is an experienced board member and has held a wide range of leadership role in a broad range of organisations including learning disabilities, primary care, acute hospital and ambulance services at an operational and strategic level; together with a period in a unique role working between health and local government.

Having left public service he made further contributions to public service as a County Councillor where Cabinet responsibilities included environment, housing and planning. He also has experience of being a Parish Councillor where he made a significant contribution to road safety.

He has been a school governor, involved with of wide range of charities as a Trustee or volunteer and served as Magistrate in three different counties until he retired after 25 years. He has had his own management consultancy business and once had a short spell as an agent representing a number of musicians.

Russell believes that the third sector has an immeasurable valuable to society and that it's not always given the recognition that it's due. He has had a lifelong commitment to campaigning and serving communities in a wide range of ways, much of which has been independent of any organisation. Having initiated and led a significant number of successful voluntary community based projects spanning many years he remains determined to make a difference.

Russell is a founding member of HSCUK and considers himself to have an ethos of public service with a philanthropic outlook on life. His aim is for Heart Safe Communities UK to inspire and encourage people everywhere. Russell was appointed a Trustee in November 2021.

Dr. Karen Hamilton - Clinical Lead & Charity Secretary

Karen is a General Practitioner who has been working in the NHS for over 30 years. She is a member of the Royal College of Practitioners and is involved in training and assessing the next generation of GPs. During her career she has been involved in Primary Care management with a special interest in Clinical Governance. She has also worked as a Clinical Assessor for the National Clinical Assessment Service.

Karen is a founding trustee of HSCUK and believes strongly in equity of access to emergency care and Public Access Defibrillators for everyone. She is involved in the development and delivery of free training sessions in Cardio Pulmonary Resuscitation and use of Public Access Defibrillators in the community. She believes in empowering communities to come together and help each other to make everyone's life better. Karen was originally appointed a Trustee in November 2021. Following her initial term Karen has recently been reappointed for a further 3 years.

Emma Kirkpatrick - Governance Lead

Emma is a Chartered Trade Mark Attorney and also advises on general intellectual property law matters. Emma has previously worked as a primary school teacher, in hospitality, as a medical receptionist and as a Court of Protection officer.

Having grown up and lived in rural communities, Emma understands the difficulties of access to medical equipment, such as Public Access Defibrillators, and emergency medical assistance. She was inspired to join HSCUK, as a Trustee, after seeing the passion and determination of the charity to ensure more Heart Safe communities are established. Emma joined the charity as a Trustee in April 2023.

David Powell - Vice Chair / Financial Lead

David has extensive senior leadership experience in local government gained in Unitary, County and District Councils in England and Wales. During a 30 year career in local government this covered a wide range of roles including Chief Executive, deputy Chief Executive and Finance Director. David is a member of the Chartered Institute of Public Finance and Accountancy (CIPFA) and a Fellow of the Institute since 2018.

David has an extensive background as a Non-Executive Director (NED) having served on Boards in the Housing and Property sectors and is also an independent member of Audit and Risk Assurance Committees. David joined the Charity as a Trustee in January 2022.

Charity Support Team

James Wilson IT Advisor

Having volunteered to assist with the creation of the Nassington Heart Safe Community website in 2020 James has continued to support our vision and provided IT and marketing support for Heart Safe Communities UK.

Robert Phipps Book Keeper

After retiring from a career in financial services in 2016, Robert became a volunteer walk leader with the Walking for Health scheme, and now leads a weekly Wellbeing Walk in the village where he lives. His other interests include railways and, when not out walking, Robert can often be found working at the Nene Valley heritage railway.

Jose Cordero Trainer

Jose qualified as a Paramedic in 2017. Having previously worked with East of England Ambulance Service he is currently working at Thistle Moor Medical Centre, a general practice in Peterborough providing care for 30,000 patients. Jose is now training as an Advanced Care Practitioner. He began collaborating the charity as a volunteer in 2021.

Adam Gilbert Trainer

Adam qualified as a paramedic in 2014 after completing his studies at Staffordshire University. Since then, he spent 7 years working with East of England Ambulance. As a result of this Adam has considerable experience of seeing the impact of cardiac arrest and the benefits of being able to provide rapid assistance in an emergency. Adam now works as advanced care practitioner in a large GP surgery in the East of England.

Summary Financial Statements

Heart Safe Communities UK

Income and Expenditure for the year ended 5 April 2024

	2024 £	2024 £
INCOME		
Charitable Activity	3022	
Other Donations (before Gift Aid)	2620	
Gift Aid	774	
Total Income		6416
EXPENDITURE		
Defibrillators	1550	
Signage	0	
Other outgoings	928	
Total expenditure		2478
SURPLUS / DEFICIT FOR THE PERIOD		3938
Cash at Bank start of period		577
Surplus / deficit for the year		3938
Cash at Bank end of period		4515



This document can also be found on the Charity's website
<https://hscuk.org.uk>

If you would like to be part of our journey or support us in any way please get
in touch by email at info@hscuk.org.uk

Registered Charity Number 1196702

HEART SAFE COMMUNITIES UK



INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR END

	2024	2024	2023
	£	£	£
INCOME			
Charitable Activity	3022		
Other Donations (before Gift Aid)	2620		7901
Gift Aid	774		776
Total Income		6416	
EXPENDITURE			
Defibrillators	1550		8698
Signage	0		400
Other outgoings	928		1378
Total expenditure		2478	
SURPLUS / DEFICIT FOR THE PERIOD		3938	
Cash at Bank start of period		577	
Surplus / deficit for the year		3938	
Cash at Bank end of period		4515	

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2023
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