



Community Engagement

Defibrillators in Havering

Review of locations and ease of access

February 2026

Healthwatch Havering is the operating name of
Havering Healthwatch Limited
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Locations and access



What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Community Interest Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your voice, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

'You make a living by what you get, but you make a life by what you give.' Winston Churchill

Community engagement

Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Havering has a statutory duty to ascertain the views of health and social care services and to make them known to the commissioners and providers of those services so that they can be taken into account in the development, commissioning and delivery of services.

We do this in a variety of ways, such as surveys, interviews and focus groups.

We also participate, with other Healthwatch organisations across North East London, in the Community Insights System, which gathers views and comments on health and social care from people across the area. Intelligence gained from Community Insights is used directly in, or to inform, many of the surveys and other public engagement events that we carry out.

The results of our community engagement are shared with Havering Council, NHS North East London, NHS and other provider organisations and Healthwatch England.

Introduction

A defibrillator is a medical device that is used to restart the heart of someone who has suffered a cardiac arrest¹. Once seen mainly in hospitals, defibrillators (also known as “defibs” or “AEDs”) are now widely available in many locations, both public and private, including offices, shops, schools, places of worship and, increasingly, in stand-alone booths similar to old-fashioned telephone boxes. Typically available through the use of 999 calls to ambulance services, who can advise the location of the nearest defibrillator to a medical emergency that might require the use of one, these defibrillators are of a variety known as “Automatic External Defibrillator” or “AED”. Unlike the more specialised defibrillators used in hospital, use of these devices requires no special clinical

¹ “Cardiac arrest” can occur as the result of both an acute illness or a long-term condition, including where an implantable defibrillator has been surgically implanted.

knowledge or training: they give pre-recorded, audible instructions to users and are simple to use. A poster from the Resuscitation UK illustrating the process for using a defibrillator is reproduced in the Appendix this report, which also reproduces the Resuscitation Council's advice on signposting the availability of a defibrillator.

For readers' convenience, and to avoid excessive use of initials or acronyms, in the rest of this report "defibrillators" refers specifically to "Automatic External Defibrillators" or "AEDs".

These defibrillators are not owned or provided by public health authorities: each one – including those located on high streets "phone booth"-style – is owned and provided by the person or organisation on whose premises it is located but they are generally made available for public use out of a sense of community solidarity.

The period between an individual suffering cardiac arrest and professional medical assistance reaching them is crucial to survival. Every second counts: the chances of survival reduce rapidly as time passes. Traditional Cardio-Pulmonary Resuscitation (CPR) can help prevent some deterioration – for every minute that CPR is not applied, the chances of survival decrease by 10% - but the prompt use of a defibrillator is critical if an individual is to have any chance of survival.

In August 2024, our colleagues at Healthwatch Manchester produced a report ² on the location and availability of defibrillators in Manchester City Centre. Their report had been prompted by a report from a resident of that City who, faced with a medical emergency requiring access to a defibrillator, took 15 minutes to find one that was readily available and to get it back to the person requiring it

² <https://www.healthwatchmanchester.co.uk/report/2024-08-15/where-it-review-informationhttps://www.healthwatchmanchester.co.uk/report/2024-08-15/where-it-review-information-accuracy-regarding-location-defibrillators-acrossaccuracy-regarding-location-defibrillators-across>

(by which time an ambulance had arrived on the scene), a delay which they found traumatic.

Inspired by what Healthwatch Manchester had reported, we decided to carry out a similar review and to report our findings to local health and social care authorities and the London Ambulance Service (LAS). Fortunately, one of our volunteer members is also a senior officer in St John Ambulance and a volunteer responder for the LAS, has a passion for making defibrillators more widely available, and was keen to undertake the research needed to produce this report. The data on which this report is based is taken from The Circuit and is freely available to the public^{3,4}.

The Circuit is a database on which the location and availability of defibrillators can be registered to enable Ambulance Services to identify them and to let people calling 999 know where they can be found. The Circuit is provided by the British Heart Foundation and supported by the NHS, the Resuscitation Council UK, St John Ambulance and the Association of Ambulance Service Chief Executives (AACE). Unfortunately, The Circuit does not hold the location of all available defibrillators – for example, many stations on the London Underground, London Overground and Elizabeth line networks have them but are not featured in The Circuit; and they are also found in GPs' and dental surgeries, again without necessarily being registered on The Circuit.

As this report was being prepared for publication, the Resuscitation Council issued updated guidance on the use and availability of defibrillators⁵, of which account has been taken in this report.

³ The Circuit is available at: <https://www.bhf.org.uk/how-you-can-help/how-to-save-a-life/defibrillators/national-defibrillator-network-the-circuit>

⁴ Another website with details of available defibrillators is DefibFinder: <https://www.defibfinder.uk/>

⁵ "Public access defibrillators: A guide for communities" – The Resuscitation Council UK, 2025
<https://www.resus.org.uk/about-us/news-and-events/updated-aed-guidance-empowers>
<https://www.resus.org.uk/about-us/news-and-events/updated-aed-guidance-empowers-communities-save-lives>

The Resuscitation Council advise that around 100,000 people suffer a cardiac arrest every year, but defibrillators are used by members of the public in only 9% of those cases – or just around 9,000 get the help of a defibrillator ⁶.

The importance of using a defibrillator is amply illustrated in a one-minute long video from the Resuscitation Council, available on You Tube at <https://www.youtube.com/watch?v=qprA0v0c6C0> (see particularly the section from 40 seconds to the end).

The review

The review was undertaken using information obtained from The Circuit's database ⁷. This information is freely available; it lists all registered defibrillators, giving their location, availability and whether access to them is "public" or "restricted" (the latter being in premises not always open to the public). It should be noted, however, that many locations nominally considered "public" are in fact not necessarily easily accessible – for example, some schools say their defibrillators are "public" but access to schools is limited because of security concerns and, of course, they are generally only open from around 9am-4pm and mainly only during school term time.

Online information regarding defibrillator locations is abundant and the true source of information regarding defibrillator location and availability may not be immediately clear to the public. Moreover, LAS and other Ambulance Service call handlers may not be aware of local conditions and may inadvertently give 999 callers directions to defibrillator locations that are inaccurate (as happened in the case that triggered the Manchester report).

The Resuscitation Council's advice on signposting the location of defibrillators is set out in the Appendix to this report.

⁶ See "Public access defibrillators", ibid: page 5

⁷ <https://www.bhf.org.uk/defibdata>

Considering the nature of, and needs for, defibrillator use, accurate information regarding the whereabouts of defibrillators is clearly of paramount importance. We were not confident that The Circuit database was entirely accurate – although we stress that it is clearly much better than nothing being available! An audit process to confirm the availability of defibrillators would be advantageous – local organisations such as St John Ambulance may have a part to play in doing this, although that is outside the scope of this report.

Havering has a high population density, which is increasing year on year with new housing, businesses and public areas being developed. In the 2021 census, Havering had a population of 262,100: an increase of 10.5% over the population at the time of the 2011 census; further residential development since then has resulted in an even higher population – one consequence of which is that the local general hospital, Queen's Hospital, Romford, is having to deal with accident and emergency cases far in excess of its designed capacity. While this would not directly affect any patient taken there in need of resuscitation following cardiac arrest, any delay in defibrillation will inevitably reduce the chances of survival, so the availability of defibrillators in the community is essential.

According to the Resuscitation Council, around 80% of out-of-hospital cardiac arrest cases happen in the home environment, with 20% occurring in public spaces (and that 90% of those that happen in a public space are witnessed, compared with only 50% at home). It would be ideal, therefore, if there were a proportionate number of readily available defibrillators located across Havering, specifically in the residential areas, and especially those areas of high-density population. This is supported by recent suggestions ⁸ that best practice would be to have a defibrillator within 500m of any given location and deployable within 3-5 minutes.

During the course of the research for this report, it was deeply concerning to hear from Havering residents about difficulties they had faced attempting to

⁸ The Resuscitation Council "A Guide to AEDs", 2019 and Science Direct, October 2025

locate defibrillators or finding them in working order when they had located them – as indicated by the following examples:

- A: Defibrillator found but incomplete, with missing pads, out of date equipment or other missing items
- B: Unable to get equipment due to it being stored behind locked doors, location within building not known, location was not open (such as schools, shops, offices, doctors' or dental surgeries)
- C: Equipment not found or delayed access as it was not possible to locate the equipment within the building

Methodology

When we started planning this review, we used the information from the national database, The Circuit. We also reviewed a second database incorporated within the GOOD SAM app, which is a database used internationally by first responders.

It is also important to note that not all defibrillators in Havering are registered on either The Circuit or GOOD SAM and are therefore not available to first responders.

Several safety-focused organisations are urging that further legislation is considered around hosting, maintenance and other issues about defibrillators, but it is clear that such legislation will not be in place for some time and more urgent, albeit less formal, action is needed locally to improve the accessibility of defibrillators for public use.

The Circuit identified around 220 defibrillators in Havering. Owing to this large number and the inevitable resource constraints, a representable sample of 50 locations was accordingly visited in person as part of the research for this

review, together with a desk-top review of all the information provided within The Circuit.

The Circuit showed that there was a wide range of defibrillators available across the borough, and the visits confirmed that:

- they were kept in various locations, including within locked cabinets, unlocked cabinets and hanging on walls within buildings
- many were not clearly located or signed, particularly within buildings
- many were found to have limited access to the public – for example, within schools, workplaces, doctor's surgeries – where access was possible only during work hours (and therefore unlikely overnight, during weekends or on public or school holidays)

The National Resuscitation Council Guide on Public available defibrillators was also reviewed as part of this research.

During the visits, the answers to five questions were sought:

- 1: Is there a defibrillator at the location?
- 2: Is it clearly located and intact?
- 3: Is there a preparation kit with the defibrillator?
- 4: Are there staff at the location trained in its use?
- 5: Is there a dedicated custodian of the equipment?

Findings

The desk top review of information within The Circuit database revealed that, of the 220 registered defibrillators:

- 35% were in schools with limited access, and were therefore only available when the schools were open (so generally not at weekends or public holidays, during school holidays or at any time after about 4pm or before 9am)
- 43% were in other offices or internal locations, again with limited access and only available when the premises were open
- 14% only were available 24/7
- 8% were not actually available or were missing

Clearly, this draws the inescapable conclusion that some 86% of defibrillators in Havering do not conform to the National Resuscitation Council's guidelines for publicly available defibrillators.

Moreover, the overall number of defibrillators located near to or in residential areas is unfortunately very low, despite nationally some 80% of out of hospital cardiac arrests happening in the home.

On the positive side, of the locations visited, 92% had some staff trained in the use of the equipment. That said, a review of GOOD SAM data shows that not all defibrillators are registered on The Circuit and not all defibrillators had preparation kits with them. Although it is preferable for people to be trained in both CPR and defibrillator use, Ambulance Service call handlers are skilled at telling people on the scene how to use the equipment.

It was also noted that many defibrillators lacked signage indicating that one was available in the building or giving directions to its location, thus delaying access when time is of the essence.

Ideally, defibrillators should be kept where they are freely available, preferably in unlocked cabinets. It is accepted that doing so will not always be practicable. One risk faced by those who make defibrillators available is, sadly, that they might be vandalised or stolen. To mitigate that, there will be an understandable temptation to place them in a locked cabinet, although doing so will obviously reduce their accessibility in an emergency. Ideally, defibrillators should be kept in unlocked cabinets but, where a cabinet is locked, it should be accessible using a keycode-type lock with the appropriate code recorded on The Circuit so that call handlers can pass the details on to the person requesting access to it.

Conclusions

The review found that most defibrillator locations in Havering were accurate and accessible within the time frames stated on The Circuit but it was noticeable that not all defibrillators were registered on The Circuit and there was a lack of appropriate signage at locations or within buildings.

Furthermore, there was a low number of defibrillators available at all times, particularly within residential areas.

There was also confusion over what equipment needs to be with a defibrillator and about the need for checking equipment and having it in the care of a custodian responsible for looking after it.

We are not alone in noting these findings – our Healthwatch Manchester colleagues came to much the same conclusions, and the Welsh Ambulance Service have made similar comments. The partner organisations behind The Circuit are firmly in favour of there being the widest possible spread of publicly accessible and useable defibrillators – indeed, the Resuscitation Council “strongly recommends” registration.

To achieve that aim, it is obvious that there needs to be an accurate, accessible and comprehensive information database of defibrillator locations and

availability within the community, including locations within buildings. This will only be achieved comprehensively through regulation at national level, although local publicity may help improve the situation locally.

Where defibrillators are publicly available, they need to be identified by appropriate and accurate signage, both inside and outside of the building they are in and ideally located where they can be accessed with the minimum of delay.

Clearly, considerations of cost preclude the widespread distribution of defibrillators on the street. But the fact that at least 220 are known to be at various locations in the borough suggests that a greater effort to ask those in possession of a defibrillator to advertise their presence and availability, and to relocate them to a position that is easily accessible, would greatly improve the chances of one being obtained when needed. Havering Council and the Place-based Partnership can assist in arranging the wide-spread publicity that will be needed to achieve this. A similar campaign by the London Ambulance Service London-wide is already in place to help improve the availability of defibrillators across London.

Whilst it is understandable that, given the risk of theft or vandalism, many owners of defibrillators and their cabinets would want them locked, any publicity should suggest that they should be freely accessible.

Recommendations

To Havering Council and the Havering Place-based Partnership Board

That a publicity campaign be promoted within Havering, to prompt owners of premises in which defibrillators are located to consider making them more accessible to the public, ideally by locating them externally in suitable cabinets (which, if kept locked, can be accessed by keycode available to the London Ambulance Service) to ensure that they can be accessed on a 24/7 basis.

Acknowledgements

We are grateful for the assistance given by the owners of defibrillators in Havering during our research.

Appendix**Resuscitation Council guidance on
Signposting the location of defibrillators****Signposting**

Anyone needing to use a defibrillator must be able to find it quickly and take it to the collapsed individual without any delay. This means that, wherever possible:

- It should be placed in a prominent location so that people can see it easily
- Its location should be shown using the recommended sign
- Directional signs should be used to guide people to the defibrillator location. Signage should indicate the direction and distance to the defibrillator and be visible within a minimum 200 metres radius of the defibrillator
- Signage should be a sufficient size to be legible from a distance of at least 50 metres
- The defibrillator cabinet should be illuminated at night, and, whenever possible, exterior signs should have supplementary lighting or at least be made of photoluminescent material.
- Signage should be properly maintained; we suggest that all signs associated with the defibrillator be inspected at the same time that the defibrillator undergoes its routine checks.

- Anyone living or working near to where a defibrillator is located should know what it is, what it is for and be able to direct people to it immediately.
- Check how easy a defibrillator is to find by approaching its location from the different directions that someone may approach from in an emergency.
- Check the description of the defibrillator location that you provided when registering it with The Circuit. Make sure you are confident that the defibrillator can be found and accessed quickly in an emergency

Further information about the work of the Resuscitation Council

UK is available at <https://www.resus.org.uk/>

Defibrillator Heart Restarter

Anyone can use it
No training necessary



For an unconscious person
NOT breathing normally



Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice. Healthwatch Havering Friends' Network

Join our Friends' Network for regular updates and other information about health and social care in Havering and North East London. It cost nothing to join and there is no ongoing commitment.

To find out more, visit our website at

<https://www.healthwatchhavering.co.uk/advice-and-information/2022-06/06/our-friends-network-archive/06/our-friends-network-archive>



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