## REVIVE

# Access to Road Traffic Collisions 

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## Introduction

- Statistics - 221 Stations - attend 4000-5000 RTCs/annum
- Retained (202)/On-Call v Fulltime Model
- Dublin Fire Brigade - EMS
- Advanced Paramedic - Paramedic - First Responder



## Call Taking/ Mobilisation <br> - 112/999-ECAS

- 3 Control centres
- CTRi Project
- Calls may come direct from public or from HSE/NAS or AGS
- If call comes in direct we will normally advise both HSE/NAS and AGS (and vice versa)
- Turnout - Fulltime (1 minute)
- Retained/On-Call (5 minutes)


## The Regional Control Centre's



## MRCC Workstation



## Pre-Determined Attendances

(PDAs)

- PDA determines who responds depending on location and weight of response (weight of response may vary depending on location and/or incident type)
- PDAs may vary slightly across the Country but will always include at least one appliance with crash rescue equipment - Aı
- Fire Service medical capacity ranges from AP to $1^{\text {st }}$ Responder (but some stations may have very limited $1^{\text {st }}$ aid capacity)


## Pre-Determined Attendances (PDAs)

- Currently we don't have AVLS or dynamic mobilisation but CTRi may deliver this
- Incident Command System
- Dynamic Risk Assessment
- Fend Off
- Health \& Safety - Rolling Stop - Emergency Traffic Management - Road Closure?
- Motorways







 first appliance and © A2 from IC lanes Commencing Commence

Rolling Block


## Slow to 50Kph



IC from Az
Slowing to

Az from IC Slow to 50 Km


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( 4



## Business Continuity

- Need to get Traffic moving again - SAFELY!



## At 6oom use the VMS if available

900m \& 600m

## 300m





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IC to officer:
Incident is one sector please check other vehicles and



FF's are Diagrammatic only. At a real incident they may come form different appliances









So what does this look like in reality?

## Questions/Comments?



