



21st April 2020

Deputy Commissioner Jeremy Fewtrell
Fire Rescue NSW
1 Amarina Avenue (Locked Bag 12)
GREENACRE NSW 2190

Dear Jeremy,

Last year FRNSW approached the FBEU around the PAD proposal. Shortly after approaching the Union FRNSW proceeded to sign a memorandum of understanding with NSW Ambulance regarding the PAD program and its roll out. The Union in good faith pressed for genuine consultation and both parties held a series of meetings. As these meetings progressed it became apparent that FRNSW:

- Had no business plan and no budget for the proposal
- No statistics for the proposal
- Would not entertain genuine discussions about the need for greater training, equipment, support structures, interoperability, or remuneration.
- Were unable to measure or mitigate against the risk that FBEU members would be forced into situations beyond their current training
- Had not genuinely consulted HSRs
- Were unable to explain how PAD was different from MFR, EAD, or any other medical work proposal
- Were yet to undertake any meaningful risk assessment
- Had undercut recourses to the BLS team significantly leaving members uncertified
- Failed to acknowledge the resourcing problems of Ambulance as the root of a timely response to OHCRs

In light of what can only be described as a blatant lack of genuine consultation from FRNSW, the Union filed a general dispute with the NSW Industrial Relations Commission (**the Commission**) which as you know proceeded to a formal hearing late last year.

It is our strong position that, whilst the matter is being considered and determined by the Commission, the status quo must remain in place and any medical or PAD related work should not be allocated to members.

We advise that only a few days ago, our members were sent to a call that was clearly a medical call and that directly breached the status quo. In brief, a FRNSW crew were called to a 7 year old child who was reported as not breathing. The ambulance were delayed at another job, making our members **medical first responders**. On arrival, the child was breathing but was convulsing. This was later clinically assessed by ambulance on the scene as a potential seizure. Whilst our members did their best with the training and equipment available to them at the time, the mere fact that they were responded to such a call raises the following issues:

- The PAD proposal is currently in dispute and as such there was no reason why any member outside of a CFR station should have been turned out this incident
- The call came through ICEMS putting significant and undue stress on FRNSW Comms operators
- This incident confirms FRNSWs inability to carve out the 4x1A calls in the PAD proposal. Put simply, no one knows what they're getting until a clinical assessment is undertaken. This puts members and the community at risk.
- It is abundantly clear the BLS is not a sufficient skillset
- Had this been a genuine cardiac arrest, the FRNSW crew in question would have utilised their Zoll AED+ defibrillator. A model which the manufacturer clearly states cannot be used on a child under 8 years of age without the appropriate pads. FRNSW do not have these pads. There are 700+ defibrillators of this kind (with another 10-11 years of shelf life) in circulation at FRNSW stations.
- Incidents like this cause serious distress to the community and psychological trauma to our members.

It is highly concerning for the FBEU that the problems we raised during the consultative meetings held last year, played out in this scenario. FRNSW have a duty of care to our members and we therefore ask for an explanation as to how and why this occurred. Further we demand that FRNSW observe the status quo whilst waiting for a decision in the NSW IRC.

As you are aware, we have relisted this matter in the Commission and will be seeking the assistance of Commissioner Sloan that the status quo is observed by FRNSW.

Yours fraternally



Leighton Drury
State Secretary