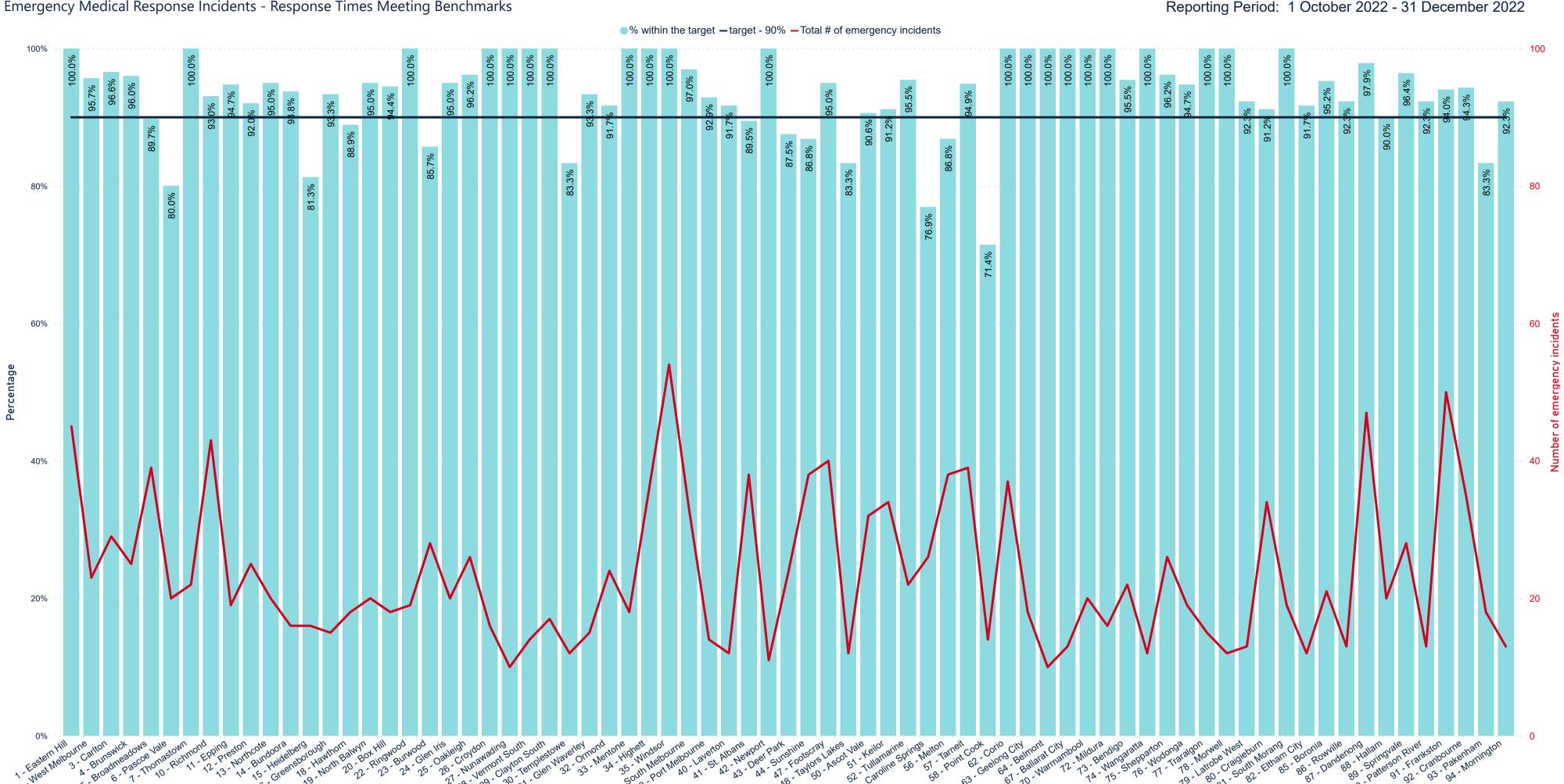




Emergency Medical Response Incidents - Response Times Meeting Benchmarks



Alternative data set - An alternative data set was used to generate this report, as access to FRV data was limited following the cyber-attack of 15 December 2022. Post incident data containing correct incident type classifications (i.e. structure fire) was unavailable.

To validate the accuracy of the result, the previous and alternative data sets were compared for Q1 FY 2022/23. This showed a 0.6 percentage point difference for Emergency Medical Response (EMR) incidents, with the result showing as 95.0 per cent using alternative data compared to 95.6 per cent using previous data. This is deemed an acceptable margin of difference.

Increase in response times - Response time incorporates time taken to depart, or 'turn out' from the station and the travel time to the incident. There has been a slight increase in response time in FY 2022/23, likely attributable to the electronic and automated Station Turnout System (STO) being disabled (as a result of the cyber-attack) from December 2022, increasing time taken to turn out from the station.

FRV's response times to emergency medical incidents have seen minimal variance. FRV has continued to render life-saving medical care to cardiac patients at close to pre-cyber-attack response times.

In STO's absence, FRV crews and appliances were dispatched to emergencies through pagers, radios and mobile phones. The restoration of STO on 1 August 2023 is expected to improve response times in reporting periods following Q4 FY 2022/23.