



Oifig anStiúrthóir
An tSeirbhís Náisiúnta,

Foirgneamh Aibhneacha, Crosbhóthar
Thamhlachta, Tamhlacht,
Baile Átha Cliath D24 XNP2

Office of the Director
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Deputy David Cullinane TD
Dáil Éireann
Leinster House
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PQ 40118/22

NAS Re; the Community First Responders; NAS has recently launched a massive drive to recruit volunteers. I welcome the use of CFR's, but how and why they are used is of concern. When a CFR is activated, an ambulance should also be allocated to the call, the response time should be measured by the arrival of an ambulance and not by the CFR. The concern is that NAS is attempting to use them to "improve" response times as a scene resource. CFR'S do not have the means to transport patients to the appropriate emergency department or offer prolonged care. This seems that the use of CFR'S might be used to hide the lack of ambulances and paramedics that are available. The NHS briefly used CFRS as clock stoppers and on paper this might reflect positively, the reality is that patients aren't getting the right care in the right time. I fully support the use of CFR's and can improve outcomes, but the reality is that time is an important factor, the time it takes for an ambulance to arrive and the time it takes to get to a hospital.

Dear Deputy Cullinane,

The Health Service Executive (HSE) National Ambulance Service (NAS) has been requested to reply directly to you in the context of the above Parliamentary Questions, which you submitted to the Minister for Health for response.

Prior to the pandemic NAS had 275 CFR schemes nationally which were all stood down in March 2020 for reasons of safety. We began a gradual reactivation of a small number of schemes (30) in December 2020 with strict governance and oversight surrounding a safe response in full PPE and only to cardiac arrest incidents.

Since December 2022 we have reactivated 180 schemes and reintroduced chest pain and stroke calls in some areas and to date we have not had any adverse incident for CFRs relating to Covid.

HSE funding for the NAS led Out Of Hospital Cardiac Arrest Strategy for Ireland secured in Q3 2022 was allocated to a number of priority actions of which one was to support the reactivation of CFR schemes. €68k was allocated to the CFR support actions of which a large amount was spent on training equipment and €6k was allocated to the CFR recruitment campaign. This was driven by feedback from CFR schemes who were struggling with recruitment and retention of volunteers, especially in rural Ireland where CFR is very beneficial to the community.

Three quotations were obtained from production companies to film and produce the video which took some months to plan and action as we were using the RTE Fair City set for filming. The aim of the campaign is to once again bring our CFR scheme numbers back up to where they were pre-pandemic and further develop the scheme and increase our response to cardiac arrest in Ireland.





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CFRs are not clock stoppers, they are heart starters and it is only a NAS trackable resource that can be recognised by the system to provide an accurate on scene time which then reflects on response times.

When a 112/999 call is received by the National Emergency Operations Centre, the Computer Aided Dispatch (CAD) System checks if a call meets the criteria for a CFR group to respond, if the criteria is met then the system automatically sends out a text to a CFR group in that area. This happens in the background while an emergency call-taker deals with the caller and a despatcher deploys the nearest available appropriate resource. The National Ambulance Service KPI response time calculations are based on ambulance vehicles attending a scene.

To conclude, the aim of this recruitment campaign is not to stop any clocks but to reactivate old schemes and encourage new ones to link with NAS and increase the likelihood of a more successful outcome for patients who suffer an out of hospital cardiac arrest.

Yours sincerely

William Merriman
Deputy Director
National Ambulance Service

