

August 13, 2020

FOI No: 2020-36

VIA E-MAIL – **Redacted**

Redacted

Dear **Redacted**

Re: Request for Records
Freedom of Information and Protection of Privacy Act
Redacted

The City of White Rock has reviewed your request for access to the following records pursuant to the Freedom of Information and Protection of Privacy Act (the “Act”):

- *Complete WRFD records for motor vehicle accident which occurred on March 19, 2016 involving **Redacted***

Access to these records is available. However, some of the information in the records is excepted from the disclosure requirements of the Act. I have severed the excepted information so that I could disclose to you the remaining information as attached.

The severed information is excepted from disclosure under section 22 of the Act. Severing is necessary to avoid disclosing any third-party personal information without permission.

Please contact our office if you have any questions or concerns.

Sincerely,



Ken Overton
Manager, Property, Risk Management, and FOI
604-541-2104

Att.

Corporate Administration
P: 604.541.2212 | F: 604.541.9348

City of White Rock
15322 Buena Vista Avenue, White Rock BC, Canada V4B 1Y6

WHITE ROCK
City by the Sea!

www.whiterockcity.ca

If you believe that the City of White Rock has been unreasonable in its handling of your request, you may ask the Information and Privacy Commissioner to review our response. You have 30 days from receipt of this notice to request a review by writing to:

Office of the Information and Privacy Commissioner
3rd Floor, 756 Fort Street
Victoria BC V8W 1H2

Should you decide to request a review, please provide the Commissioner's office with:

1. your name, address and telephone number;
2. a copy of this letter;
3. a copy of your original request sent to the City of White Rock; and
4. the reasons or grounds upon which you are requesting the review.

PLEASE PRESS FIRMLY - YOU ARE MAKING 3 COPIES.

DATE OF RESPONSE (MM / DD / YYYY)
03 / 19 / 2018

TIME CALL RECEIVED 00:27
CURBSIDE TIME 00:41
TIME AT PATIENT'S SIDE 00:45
ARRIVAL TIME OF BCAS
TIME BCAS TOOK OVER
EXTRICATION TIME

POLICE ATTENDING?
 YES NO

PATIENT SURNAME
Redacted S. 22

PATIENT GIVEN NAME
Redacted S. 22 s. 22

MAILING ADDRESS
Redacted S. 22

CITY
Redacted S. 22

PHON
Redacted S. 22

GENC
 M

PATIENT'S PHYSICIAN

DEPARTMENT NAME
W R F R

STATION NUMBER
1

UNIT NUMBER / SHIFT
D

FR QUALIFICATION
3

RESPONSE #
16-18631

FIRST RESPONDER NAMES OR LICENSE NUMBERS
McMahon, Ryan

RESPONSE LOCATION
Finlay ! N Bluff

CHIEF COMPLAINT / DESCRIPTION OF INCIDENT
Sore Neck ! left side of shoulder

MECHANISM OF INJURY / HISTORY OF ILLNESS
Car accident

RELEVANT PAST MEDICAL HISTORY
Asthma

MEDICATIONS

ALLERGIES
Codine

ADDITIONAL TREATMENTS AND / OR COMMENTS

CARDIAC ARREST PATIENTS

WERE BYSTANDER VENTILATIONS BEING PERFORMED?
 YES NO

WERE BYSTANDER COMPRESSIONS BEING PERFORMED?
 YES NO

WAS THE CARDIAC ARREST WITNESSED?
 YES NO
IF YES: BYSTANDER FR BCAS

ESTIMATED TIME OF COLLAPSE _____
TIME FIRST AED APPLIED _____
TIME OF FIRST ANALYSIS _____
ESTIMATED TIME FIRST CPR COMPRESSIONS BY ANYONE _____
TIME FIRST CPR COMPRESSIONS BY FIRST RESPONDER _____

FIRST RESPONDER AED PROTOCOL				AED RESULTS	
TIME	SHOCK	NO SHOCK	CPR	WAS AN AED IN USE UPON ARRIVAL?	INITIAL AED RHYTHM ANALYSIS?
00:27				<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> SHOCKABLE <input type="checkbox"/> NON-SHOCKABLE
				IF YES: <input type="checkbox"/> PAD <input type="checkbox"/> POLICE <input type="checkbox"/> BCAS	
				DID A PULSE RETURN?	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				TIME OF RETURN OF PULSE _____	
				LONGEST DURATION OF PULSE (ESTIMATED) _____	

PAIN ASSESSMENT

P Neck / shoulder
Q Sharp
R Low - left shoulder
S 8/10
T Since accident - Getting worse

VITAL SIGNS

TIME	LOC	PULSE	RESP.	SKIN
00:46	A V P U	60	16	Normal
	A V P U			
	A V P U			
	A V P U			

CARE GIVEN	AIRWAY	OXYGEN
<input type="checkbox"/> CONTROL BLEEDING <input type="checkbox"/> DRESS WOUND <input type="checkbox"/> CPR <input type="checkbox"/> AED <input type="checkbox"/> SPINAL IMMOBILIZATION <input type="checkbox"/> BACK BOARD <input type="checkbox"/> PATIENT COMFORT/REASSURANCE	<input type="checkbox"/> CLEARED <input type="checkbox"/> POSITIONED <input type="checkbox"/> SUCTIONED <input type="checkbox"/> ASSISTED <input type="checkbox"/> ORAL AIRWAY	<input type="checkbox"/> MASK <input type="checkbox"/> NON-REBREATHER <input type="checkbox"/> BVM <input type="checkbox"/> POCKET MASK _____ OXYGEN LPM

FRONT	BACK

White Rock Fire Department Incident Report

August 6, 2020

Incident Number:	16-18631	Incident Begin Time:	03/19/2016 0:36:47
Apt/Unit		Incident End Time:	03/19/2016 1:10:06
Incident Address:	0 156 ST, SURREY		
Cross Street:	16 AVE		
Dispatch Type	MVA		
Incident Type:	29 MVAs	Building Name:	

Officer Reporting:	[N]	Drug Lab:	0
Station Area:	White Rock Hall 1	Grow Op:	0
Shift:	D Shift	Secondary Suite:	0
Incident Commander:	[N]	Total Injuries:	
False Alarm:	0	Total Manhours:	
Liability Release:	0	Total Manpower:	4

Bench Marks

Command Established:		Working Fire:	
Ambulance on Scene:	03/19/2016 01:06:20	1st Search Completed:	
Police on Scene:	03/19/2016 00:44:17	2nd Search Completed:	
Police File Number:		Loss Stopped:	
Property Ref on Scene:		Situation under Control:	
Volunteers Paged:		Post Incident Watch Posted:	
Duty Chief Notified:		Inspector Paged:	
Career Callout Initiated:		BC Hydro on Scene:	
FF with Ambulance:		Gas Utility on Scene:	
FF Return to Crew:		Fire Commissioner Notified:	
Tow Truck Notified:	03/19/2016 01:00:44	Ministry of Environment:	
Public Works Notified:		Provincial Hiways Notified:	
		Min. of Forests Notified:	

Officer/Crew Notes

Notes: Captain Fulton

WRE1 and Surrey Engine 13 were dispatched to respond to a MVA. Both engines arrived simultaneously, RCMP arrived as well. There was a 2 car MVA with one occupant in each vehicle. Only one of the occupants were injured. We tended to the patient, monitoring her vitals and determined medical history. We blocked off traffic and waited for Ambulance and tow trucks to arrive.

Name of occupant #1 Redacted S. 22
DOB Redacted S. 22

Name of occupant #2 Redacted S. 22
DOB Redacted S. 22

Time:

Dispatch Notes

White Rock Fire Department Incident Report

August 6, 2020

03/19/2016 00:36:47 BCAS Summary--->
03/19/2016 00:36:59 Address change from NORTH BLUFF RD, SURREY/156 ST, SURREY to 16
03/19/2016 00:37:22 Address change from 16 AVE, SURREY/156 ST, SURREY to 156 ST,
03/19/2016 00:37:26 The department responsible was changed from 'SURREY FIRE
03/19/2016 00:37:26 Address change from 156 ST, SURREY/156 ST, SURREY to 156 ST,
03/19/2016 00:37:34 Incident dispatcher Assigned: 00004
03/19/2016 00:37:34 Dispatch acknowledged incident.
03/19/2016 00:38:30 FR is responding
03/19/2016 00:38:36 amb stating in the intersection
03/19/2016 00:38:47 SE13: Dispatch message received.
03/19/2016 00:47:52 2 tows Bayview req
03/19/2016 01:00:41 WRE1 - amb eta req
03/19/2016 01:01:04 amb eta:king george/ 132
03/19/2016 01:01:28 crews updated
03/19/2016 01:10:06 Transferred from CAD

Apparatus Attending

Apparatus	Dispatch Time	On Route Time	Onscene Time	Return Service Time	Return Quarter Time/Date
<u>WR Engine 1</u>	03/19/2016 00:37:30	03/19/2016 00:39:14	03/19/2016 00:41:55	03/19/2016 01:10:03	03/19/2016 01:14:51
<u>Surrey Engine 13</u>	03/19/2016 00:37:50	03/19/2016 00:39:27	03/19/2016 00:41:50	03/19/2016 00:48:27	03/19/2016 00:50:35

Attendees

Cordell Fulton	Captain
Connor McMahon	Firefighter
Ken Molland	Deputy Chief
Patrick Ryan	Firefighter
