



**SURVIVAL FACTORS ATTACHMENT**

**NTSB Interviews of YCFLS**

**Williamsburg, VA**

**HWY23MH004**

(48 pages)

UNITED STATES OF AMERICA

NATIONAL TRANSPORTATION SAFETY BOARD

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Investigation of:

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FATAL TWO-VEHICLE CRASH IN YORK

COUNTY NEAR NEWPORT NEWS, VIRGINIA

ON DECEMBER 16, 2022

Accident No.: HWY23MH004

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Interview of: ANTHONY COLLINS, JR., Battalion Chief  
JOSEPH LEDUC, Captain  
York County Fire Station Number 3

Newport News, Virginia

Saturday,  
December 17, 2022

APPEARANCES:

TOM BARTH, Investigator  
National Transportation Safety Board

JASON ZEITLER, Engineer  
National Transportation Safety Board

JOHN HUMM  
National Transportation Safety Board

I N D E X

ITEM

PAGE

Interview of Anthony Collins and Joseph LeDuc:

By Mr. Barth

4

I N T E R V I E W

1  
2 MR. BARTH: We're talking to -- who are we talking to? Your  
3 name and your rank.

4 CHIEF COLLINS: Battalion Chief Anthony Collins, Junior.

5 CAPTAIN LEDUC: Captain Joseph LeDuc.

6 INTERVIEW OF ANTHONY COLLINS, JR. & JOSEPH LEDUC

7 BY MR. BARTH:

8 Q. Okay. And are you guys also trained as paramedics or  
9 anything like that?

10 A. We're both paramedics and firefighters and fire officers.

11 Q. Okay. And so let's see is the -- is this agency all paid or  
12 do you have a mix of paid, volunteer?

13 A. I think on paper we would be considered combination, but we  
14 are greater than 99 percent paid.

15 Q. Okay.

16 A. I'm sorry. We would be considered combination. I don't know  
17 if I said that right. Combination is volunteer and paid, but  
18 we're basically 99 plus percent paid department.

19 Q. Okay. And who does your -- how does the dispatch work? Do  
20 you guys have your own dispatch or you're dispatched through the  
21 county? How does that --

22 A. We have a regional dispatch center. It is operated by York  
23 County, but it serves numerous localities including -- well,  
24 there's numerous. I'm sure you can, you can get on there, and  
25 talk to them, and look at that. But York County Fire, obviously,

1 law enforcement, Sheriff's Department in York County it serves the  
2 City of Williamsburg fire employees; it serves the City of  
3 Poquoson fire employees. The other agency that had almost as many  
4 units on us, and was very integral in this operation was James  
5 City County. And while they have a different dispatch center,  
6 they're interoperable. So the dispatch notes pass back and forth  
7 amongst the centers. And I believe at any time James City can  
8 take over our dispatch; we take over theirs for them. So there's  
9 interoperability even though they have a separate site.

10 Q. Okay.

11 A. But it was dispatched by York County's dispatch.

12 Q. And so York County dispatch they -- not only do they run the  
13 -- so they run the 911 piece app, and the dispatch to the fire  
14 service and, and law enforcement including --

15 A. In York County but not state police. Yes. State police  
16 would have their own.

17 Q. Okay.

18 A. They were on the call as well.

19 Q. Okay. And so they do sheriff and city police? Or I don't  
20 know if you guys have a city police.

21 A. Williamsburg has a city, and they do the city police. They  
22 do the Poquoson City police, and then everything in between for us  
23 is York County, and we do their Sheriff's Office which is a patrol  
24 -- for York County.

25 Q. Okay.

1 A. So I already forgot the question, but the York County units  
2 were dispatched on York County, and James City units on the  
3 initial dispatch were dispatched on James City County's frequency,  
4 and then they switch over to our channel, and they start talking  
5 to us.

6 Q. Okay.

7 A. And then it's managed by our dispatch center.

8 Q. Got it. Okay. And then so state police completely separate?

9 A. Yeah. We don't have -- our dispatch center talked to their  
10 dispatch center, but we can't, like, turn a dial and speak to  
11 them, no.

12 Q. Right. Okay. And then, and you guys have EMS services --

13 A. Yeah.

14 Q. -- in-house?

15 A. Yeah, absolutely.

16 Q. And so can you describe how those are set up? Like, are they  
17 -- do you have, like, dedicated ambulances or do you use them off  
18 of, like, combo trucks or like what --- how are they set up?

19 A. The ambulances are staffed 24/7. We have six fire stations,  
20 and all six have an ALS ambulance, Advanced Life Support  
21 ambulance, with either a paramedic -- and we still have some EMT  
22 intermediates, but most of them are paramedics.

23 Q. Okay. And so each of those -- so each station has an ALS  
24 unit that --

25 A. Yeah. And actually in York County all of our fire trucks are

1 ALS. So the same equipment is on the ladder, is on the rescue, is  
2 on the tower, is on the medic.

3 Q. But they just can't transport patients?

4 A. Yes, no, sir. Only ambulances transport --

5 Q. Okay.

6 A. And so when our guys, when our guys get a day off the  
7 ambulance they're usually driving one of the fire apparatus and so  
8 on and so forth. And then if they're on a call, we respond with a  
9 fire truck, and we provide ALS care on scene until the ambulance  
10 gets there. We're a smaller package of the same equipment.

11 Q. Okay. And so for responses, do you guys use any BLS stuff or  
12 -- so basically any, any private BLS stuff is just for patient  
13 transport between hospitals and stuff --

14 A. We don't do -- we do not do inter-facility transport. We do  
15 911 transport.

16 Q. Right.

17 A. On special request from a hospital when they cannot get a  
18 private transport for a very acute patient we will take someone  
19 from a regional hospital to a, to a larger trauma center or  
20 whatever.

21 Q. Okay. But then like responding to an emergency call it  
22 wouldn't be private ambulance services?

23 A. No, sir, not at all, no.

24 Q. Okay.

25 A. And all the agencies that responded on this were all



1 municipal county or city fire and EMS departments that all operate  
2 the same way; that are all structured the same way.

3 Q. Okay. Cool. And then you answered -- I think you answered  
4 my question. So on the ALS units you typically -- it sounds like  
5 you have a lot of paramedics. So some -- but sometimes, like, if  
6 you have an EMT he'll be the --

7 A. Yes.

8 Q. -- paramedic in the back?

9 A. The EMT basic driver most often or a unreleased paramedic --  
10 provider, yes, and then a released ALS provider in the right seat  
11 every time.

12 Q. Okay.

13 A. Everybody in the department is at least an EMTB. So on all  
14 the fire trucks and all the apparatus there at least will be an  
15 EMTB.

16 Q. That's great. About how many -- so York County, can you just  
17 kind of describe the total resources, units and stuff?

18 A. So there are six stations, six engines, six ambulances. So  
19 we have four small stations that are just going to be an engine  
20 and a medic, and then we have two large stations, and they --  
21 those in addition to an engine and a medic have a ladder or tower  
22 truck and a rescue. And that's generally cross-staffed by a task  
23 force. So there's four people, and if they get a fire call, the  
24 four of them get on a ladder. And if they get an extrication of  
25 significant vehicle accident like this one, the four of them will

1 get on the rescue, and just leave the ladder truck here. But the  
2 engines are always staffed, and the medics are always staffed.

3 Q. So the four large stations all have an engine plus a medic  
4 unit?

5 A. No. Four are small and they're engine medic. And then the  
6 large station are the same engine medic, but also a ladder and a  
7 rescue.

8 Q. Got you.

9 A. And then they have a complement of trucks that are used  
10 seldomly in unique situations like a brush truck for a wild land  
11 fire or a tanker, and things like that. But for the majority of  
12 the responses it's the six engines, six medics, and then like I  
13 said, two ladders, two rescues.

14 Q. Okay. And then you as Battalion Chief, you're in like a SUV  
15 or what?

16 A. Top back. It's a Ford F250 with a truck cap on the back with  
17 equipment in back and stuff like --

18 Q. Okay.

19 A. -- crew cab pickup truck. We have two battalion chiefs, one  
20 in the lower end of the county, one in the upper end of the  
21 county. York County geographically is a long rectangle with a big  
22 chunk out of the middle that's taken by Naval Weapons Station,  
23 Yorktown. So the Second Battalion is up here, and the First  
24 Battalion is down here, and it's like this dead space in between  
25 where it really separates us into two departments even though

1 they're one -- we're one jurisdiction.

2 Q. Okay. All right, I think that pretty much answered all of my  
3 questions about background.

4 MR. BARTH: You guys have any questions about the background  
5 of their setup?

6 BY MR. BARTH:

7 Q. Okay. Yeah. So the next thing is, like, what we want to do  
8 is eventually what we want to, want to get from you or sounds like  
9 the dispatch logs are going to be through the County and that. So  
10 we want to get the dispatch logs. But if you have, like, a list  
11 of the, of the units you guys sent, like, you know, which units,  
12 and you don't have to, like, list every single staff member, but  
13 if, you know, like, if you give, give us an idea of how they're  
14 typically staffed. Like a rescue truck is -- we've got a captain  
15 and two firefighters. Or I don't know how, how you normally do  
16 it.

17 A. So the engines, like you want that right now, like, how  
18 they're normally staffed?

19 Q. Sure.

20 A. Okay. Ambulances are always part two unless we're trying to  
21 release a new provider and someone is being supervised. So the  
22 engines are -- I'm sorry -- the ambulances are always going to be  
23 part two; most often one ALS and one BLS provider.

24 Q. Okay.

25 A. The engines depending on jurisdiction York County still

1 sometimes our minimum staffing is two on an engine. Most  
2 everybody else is running three right now. I think Engine 11 from  
3 James City might have come with two. So at our minimum staffing  
4 days there's only two on the engine. And then when we have better  
5 staffing days, when we have less people out we have three on the  
6 engine. And the officer in York County on an engine is -- has the  
7 rank of lieutenant. James City doesn't use the rank of  
8 lieutenant. So the James City engines there theirs were captains,  
9 but they are frontline company officer. It's same but different.  
10 Just different rank structure and different departments. Here in  
11 York County the captains are, I would, I would term more middle  
12 management between the first line officer and the battalion chief.  
13 And so the captain rides the rescue or the ladder truck depending  
14 on which truck the call calls for, and they perform the more, more  
15 crucial functions, more high risk, low frequency type stuff, like,  
16 the ladder company operations on a fire or the rescue truck  
17 operations on an extrication overturned vehicle or something like  
18 this. And then when the battalion chief is out the captains move  
19 up and cover for the battalion chiefs.

20 And so if I'm ever not available, if I have a delayed  
21 response, I know that the captain is going to get there and  
22 supervise the other company officers on the engines. That's kind  
23 of how York County operates. So Captain LeDuc came on the rescue,  
24 and then the other engines, depending on their locality, would  
25 have either had an engine -- I'm sorry -- would have either had a

1 lieutenant or captain depending on the rank structure of the  
2 department they responded from.

3 Q. Okay.

4 A. And then battalion chief, like I said, we have two battalion  
5 chiefs, and I supervise the upper end of the county. The other  
6 battalion chief, Battalion Chief Rhodes (ph.) is working. He also  
7 came to the incident, but it takes him a little bit longer to get  
8 up there, but he supervises the lower end of the county. If at  
9 any point there's something large enough in either end of the  
10 county, I'll go down there, and cover second call for him, or come  
11 to the incident with him. Commercial -- we had a commercial hotel  
12 fire recently. He came up to assist me, and so on and so forth.

13 Q. I see. And so for this specific event, how many units did  
14 -- what units did you guys send?

15 A. So --

16 Q. And who -- let me clarify this. So I don't know how long you  
17 supported law enforcement later, but what we're primarily  
18 interested in is like the initial emergency response. Like, when  
19 basically up through getting the victims off the scene and  
20 securing the scene. Like, if you, if you had, you know, if you  
21 had trucks there with lights or other support, basically, you  
22 know, for through the whole night hours after the event, we're not  
23 interested in that. More interested in the initial response.

24 A. So our normal response for Interstate calls in York County  
25 when it's an accident, accident, unknown injuries, or even if it

1 is an extrication, our normal response for the Interstate is two  
2 engines, two medics, and a rescue. And so she placed the normal  
3 response on -- she -- whoever the dispatcher was. I woke up to  
4 the call. So I was waking up here, and they said accident with  
5 unknown injuries on the Interstate. And so their goal is to get  
6 the call out in less than one minute. So sometimes the initial  
7 call isn't exactly what you're going to get, but they'll add the  
8 information in. They're trying to beat a time, and they're trying  
9 to get it out to us as quickly as they can. Because we also have  
10 a time they'd like us to get out the door as well.

11 So the initial dispatch was for accident, unknown injuries.  
12 So initially I thought, okay, so far we've got a routine accident.  
13 We'll see what they say. When we're dispatched, they dispatch the  
14 call, and they run off the units that are assigned to it, and then  
15 when those units go out, and get on the truck, and mark that they  
16 are responding on the radio she gives the additional information,  
17 additional, additionally information is already on the MDT as well  
18 but they still say it verbally on the radio.

19 So I'm not on an accident unknown injuries. So I sat up and  
20 listened to the radio, and a minute may, you know, as they were  
21 getting on the trucks I got a phone call, and I also got the  
22 dispatch calling me on the radio. So they're like, hey, we're  
23 getting a lot more information about this call. And I don't know  
24 if they didn't know they were both calling me, but I had one in  
25 front of me talking, and I'm trying to listen to both, and I got

1 one really hyped up in my ear, and I could tell something's going  
2 on. And they're like, hey, they're saying this is, this is  
3 involving a bus, and someone's trapped under, and, you know, she's  
4 going on, and I just woke up. So I'm, like, okay, add Station 4,  
5 and Station 4 is our technical rescue station. They're in the  
6 lower end of the county, but they are the furthest north or west  
7 depending on how you want to put it station to this. They're  
8 right up against Naval Weapons which is sort of the boundary  
9 between the two ends. So we had, as I said, two engines, two  
10 medics, and a rescue going. With the additional information this  
11 station emptied out, and James City Station 2 emptied out.

12 I added Station 4 immediately, and I had a feeling about what  
13 they were saying that we were going to need more equipment, and I  
14 wanted to get out to the truck and look at the notes on the MDT to  
15 make sure what they were telling me on the radio on the phone, and  
16 then what I was seeing on the MDT, sort of form an opinion of what  
17 else we needed. So I got --

18 Q. What does MDT stand for?

19 A. Mobile Data Terminal. It's a computer.

20 Q. Okay.

21 A. And all the dispatch notes get pushed right into it. So  
22 whatever she punches in there we can see on the computer when we  
23 get in the truck. And sometimes it's even more than because they  
24 will repeat the notes to you verbally, but everything in between  
25 is already on the computer. So you can find it there as well.

1           So I pulled the, pulled my truck out the back. I marked  
2 myself responding. I walked out and got in the truck, pulled out  
3 on the ramp, and I'm looking at the notes, wow, you know, saying  
4 there's a bus overturned, there's people trapped. And I didn't  
5 even get -- I come from Station 5 which is -- I don't know how  
6 many miles it is from here, but it's two Interstate exits off  
7 basically. Your hotel is in the middle. Embassy --

8 Q.    Yeah.

9 A.    (Indiscernible) Embassy. If you drove from this station to  
10 Station 5, you're in the middle.

11 Q.    Okay.

12 A.    So I was coming from Station 5. So actually I get on the  
13 Interstate at the 234. If you get off at 234, you can see my fire  
14 station. And then this was the 240 and a half. So I'm six miles  
15 away. When they get on the Interstate they're two miles away. So  
16 my point is we get out the station, and then dispatch they  
17 dispatched a whole another accident assignment, which I thought  
18 was odd. They sent two more engines, two more medics, and instead  
19 of the next -- rescue they were asking for a ladder. But with our  
20 staffing model the ladder company was on the rescue. So that  
21 didn't go. So basically it put two more ambulances, and two more  
22 medic -- I'm sorry -- two more engines, two more ambulances on the  
23 road right away to another accident. When we --

24 Q.    To --

25 A.    They thought there was a second accident.



1 Q. Okay.

2 A. They had conflicting information from bystanders with  
3 different mile markers.

4 Q. Okay.

5 A. So they punched out a second accident. It actually -- that  
6 error worked to our benefit I think tremendously. I mean, among  
7 other things but --

8 Q. So basically you had, like, basically additional resources  
9 applied even before you necessarily --

10 A. Yes. So, so I --

11 Q. -- knew you needed them.

12 A. -- started with two engines, two medics and a rescue. I  
13 added Station 4 which came with a squad which is a combination of  
14 rescue and an engine and one. So Station 4 sent a squad and a  
15 medic. So now I'm up to three and three. Three and three on  
16 engines and medics and a rescue. And then one of those engines,  
17 the one I got from four is a combination engine rescue with heavy  
18 equipment type stuff to deal with commercial vehicles.

19 Q. And then James City also sent --

20 A. Well, they were on that initial, yeah.

21 Q. And what did they send?

22 A. They were the original engine and medic. So dispatch --

23 Q. Oh, okay.

24 A. -- dispatch --

25 (Crosstalk)

1 A. So the initial would have been Engine 3, Medic 3, Rescue 3.  
2 And then from James City it would have been Engine 21, Medic 21.  
3 That was your initial. So I added Station 4 which gave me Squad 4  
4 and Medic 411. The extra number is on the end of the 4 because  
5 it's on the reserve truck which is identical to the primary truck.  
6 It's just different.

7 When they added the second call, they added two more engines  
8 and two more medics. So then that was York Engine 513 which  
9 designates as a reserve, but it's as I said an equivalent truck.  
10 And Medic 5, and then Engine 11 from James City County, and Medic  
11 11 from James City County. So now I had 1, 2, 3, 4 -- I had 5  
12 ambulances right off the get-go. 1, 2, 3, 4 engines. And then a  
13 squad which is a combination between an engine and a rescue, and  
14 then a rescue. So I had -- they were going to two different  
15 accidents for about a minute. And once I got on the Interstate  
16 the first arriving unit was James City Engine 21. And they were  
17 coming from -- they were headed in a westbound direction. So they  
18 came and parked blocking the left lane by the tractor trailer  
19 first. I'm sure you've seen pictures by now, but it came from the  
20 east through and rested at the west guardrail. Had the east  
21 guardrail with it, I think, too.

22 But it came to rest there. So they blocked that lane. And  
23 to get from where they parked to the scene they had to pass the  
24 truck. So they went to the truck driver, and he was stable and  
25 conscious. So they put someone to check on him, and then moved

1 on. But when they came around to see everything that they saw  
2 after that their officer, like, ran back to the truck and called  
3 for more, more help. And among the things he said was I need at  
4 least two more ambulances. And then right at that point I'm still  
5 a couple minutes out from the scene. Dispatch says 10-4. We'll  
6 give you the two ambulances from the additional assignment because  
7 we have confirmed they are the same accident.

8 Q. I see.

9 A. I said negative York County. Give them the whole second  
10 assignment, and two more ambulances in addition to that.

11 Q. I see.

12 A. So that gave us -- so then Medic 10 Williamsburg, and Medic  
13 31 James City County. So now I got 1, 2, 3, 4 -- now I got 7  
14 ambulances, 4 engines, a squad and a rescue. So now I have quite  
15 a few people. I knew that those trucks had already been woken up,  
16 and they had already got on the road. So I was going to keep  
17 everybody coming to the scene because I know it's, you know,  
18 sounded pretty significant. Turned out that way because you're  
19 her. But so -- given the number of units that were requested from  
20 James City County their battalion chief and EMS supervisor also  
21 jumped on the call and came as well. So then James City's  
22 battalion chief, James City's EMS supervisor, and my Battalion 1,  
23 my counterpart at the lower end of the county was coming also.

24 Q. Okay.

25 A. So I don't even know what the question was.

1 Q. No, that -- basically I wanted to get an idea of all of the  
2 units that responded. And we may -- I don't know, if you -- if  
3 it's easy for you to do, if you want to, if you want to kind of  
4 write down a quick little list of that, that would be great.  
5 Otherwise, I mean, we can also listen to the tape and --

6 A. Yeah.

7 Q. -- figure it out.

8 A. After we got on scene I requested MCI 3, which is a mass  
9 casualty bus that is housed at Station 6 in the lower end of the  
10 county. And then I don't know the exact timing of it, but a  
11 short time later the James City battalion chief that arrived that  
12 was assisting me also requested MCI 4 which is an additional mass  
13 casualty bus that is kept at Riverside Doctors Hospital. So MCI 3  
14 was coming from one of fire stations lower end of the county. MCI  
15 4 is a, is also another bus, and that was coming for Riverside  
16 Doctors Hospital. And to get that in service that's staffed by  
17 fire department. So an engine company from James City another  
18 engine company went to the hospital, and got the keys essentially  
19 from the hospital, put that unit in service. So we had two buses  
20 coming.

21 Q. So these buses, can you describe what, like, is it -- what  
22 kind of a bus is it like?

23 A. Ours is on a Ford chassis, F550, F450, F6 -- something along  
24 those lines chassis. It's only about two years old. You can go  
25 see it at Fire Station 6 while you're in town if you'd like.

1 Q. And about how many seats does it have?

2 A. That's a great question. I don't know the answer to that.  
3 They have cots built in. They have several layers of cots where  
4 they can put patients, and then they have seats as well.

5 Q. Okay.

6 A. It's outfitted for, it's outfitted for walking wounded or  
7 people on cots that we carry out.

8 Q. Got you. And where did -- what was the destination of MCI 3?

9 A. So they ended up going to Sentara Williamsburg Regional.

10 Q. Okay.

11 A. A little, you know, a while into the incident. Obviously,  
12 the ambulances took the most acute patients first. And the green  
13 were all placed on MCI 3 our bus while we awaited the arrival of  
14 the next MCI bus because we coordinated -- we declared a mass  
15 casualty, and we started coordinating with the regional.  
16 Initially, my counterpart Battalion 1 contacted Riverside Doctors  
17 Hospital which is the nearest hospital. It's a Riverside Hospital  
18 in Williamsburg. Because our mass casualty plan regionally calls  
19 for us to contact the closest hospital and essentially start a  
20 triage -- I'm sorry, a transport based on we give them the number  
21 of patients, we give them the triage color, red, yellow, green --  
22 we're obviously -- we don't transport black. They're red, yellow,  
23 green. And we give them the numbers, and they're to coordinate  
24 where they're going essentially, how many of these are going to --  
25 and so behind the scenes while we're working on scene the hospital

1 whoever the coordinating hospital is will contact the surrounding  
2 hospital, and how many can you take, how many can you take, and  
3 what are you going to take?

4 Riverside Doctors they deferred, they deferred their medical  
5 control for, for the MCI. They deferred it to Riverside Regional  
6 which is the largest hospital here on the Peninsula, and they're a  
7 regional trauma center. So they deferred the medical control for  
8 the incident to Riverside Regional. And that's what my  
9 counterpart, as I said, Battalion 1, found out, and he was calling  
10 on the way up to the scene. So he found out that the deferred it.  
11 Obviously I couldn't hear his conversation because I was on scene  
12 running the incident and so forth. But when he got on scene he  
13 told myself, the James City EMS captain, and the, and the  
14 battalion that they had deferred, and we needed to coordinate the  
15 MCI through Riverside Regional.

16 So I tasked the James City EMS captain, who actually is going  
17 to be a chief in a couple weeks when she moves to her new  
18 position, but I tasked her with being the hospital liaison or  
19 transport officer that would contact them, and let them know the  
20 mass casualty, let them know the number of patients we have, the  
21 colors.

22 Q. So the initial, so the initial IC for just a few minutes  
23 was --

24 A. So our policy is the first unit on scene gives a size up,  
25 takes command. So I believe Engine 21 was, if I had to guess, for

1 two minutes, three minutes, and then him until I got there for  
2 three, four more minutes.

3 Q. So the captain of Engine 21 was --

4 A. Size up --

5 (Crosstalk)

6 Q. And then you arrived a few minutes later, and you became the  
7 incident commander and --

8 A. Yes. Captain LeDuc and then myself. But those two first --  
9 as I said were probably a couple minutes each just to --

10 Q. Okay.

11 A. And then I had it from the time I got there.

12 Q. Okay. And then who did -- and then you assigned as the  
13 triage coordinator on scene --

14 A. Not the treatment. I would, I guess, consider her role the  
15 transportation officer and hospital liaison because she was  
16 calling the hospitals to coordinate the MCI and the hospital  
17 destinations for the patients. And that was Betsy Sink with James  
18 City County. She's their EMS supervisor that was on duty.

19 Q. How do you spell her last name?

20 A. Sink like that.

21 Q. Okay. S-i-n-k?

22 A. Yes, sir.

23 Q. Did you say Captain Sink?

24 A. So she just -- it's weird. She's an EMS captain, and she's  
25 in a captain's role, but she's getting promoted, and in a couple

1 weeks it's effective that she's a chief.

2 Q. Okay.

3 A. I don't know how we got to this point or what question --

4 Q. Jumped along, yeah.

5 A. -- but she contacted Riverside Regional, and they advised  
6 that -- we gave them the number of patients, and she spoke to them  
7 about the designations of the hospitals, and that they needed to  
8 coordinate with the other regional hospitals while we finish  
9 triaging the patients on scene, and that we would call that back.  
10 So she maintained contact with the hospitals. When she called  
11 back, she gave them our up-to-date count of patients. And  
12 Riverside Regional which is the Trauma Center said they would take  
13 all of the red and yellow patients. And the green at that time we  
14 were at 13. They said split them in half, and send half to  
15 Riverside Doctors and half to Sentara Williamsburg. So the  
16 ambulances took all of the reds and yellows to the Trauma Center,  
17 and the bus -- all of the green patients were loaded onto one bus  
18 initially while we waited for the second bus to keep them warm  
19 because it was cold. And we got names on them, brief description  
20 of injury, and triage tag on each patient.

21 And then they started to set up who was going where.

22 Because --

23 Q. Yeah.

24 A. -- our understanding all the people on the bus knew each  
25 other. So if you wanted to be with a friend, a relative, we



1 needed to draw a line because you can't all go to the same  
2 facility, and figure out who is going with who. So they sorted  
3 that out on the bus as they were triaged. When the second bus got  
4 there, we unloaded six, and put them on that bus. So MCI 3 took  
5 seven patients to Sentara Williamsburg. And then MCI 4 took six  
6 patients to Riverside Doctors.

7 But prior to that seven patients or six patients were  
8 transferred --

9 Seven because we had seven --

10 So prior to that seven patients were already transported, and  
11 six of them went to the Trauma Center, and one went to Sentara. I  
12 had that written down actually.

13 Q. Okay. And that, and that's -- how many were red, and how  
14 many were --

15 A. So I can just run it down if you all are ready to copy?

16 Q. Sure.

17 A. So we had 13 green. 13 green. And MCI 3, which is one of  
18 the buses, took seven to Sentara Williamsburg. MCI 4 took six to  
19 Riverside Doctors. Now we have six yellows next.

20 Q. Six yellow. Okay.

21 A. Five went to Riverside Regional, and one went to Sentara  
22 Williamsburg.

23 Q. Okay.

24 A. There were technically two reds although only one was ours to  
25 treat, and that was taken to Riverside Regional also. There was

1 one that the hospital told us was a red category patient, but they  
2 actually were transported by a bystander before we arrived on  
3 scene. So I have them in the patient count, but we did not treat  
4 them, and they went to Riverside Doctors Hospital, which is not a  
5 trauma center, but that's where the bystander took them. I don't  
6 even know who the bystander was because it had all occurred before  
7 we got there.

8 Q. You said they went to Regional?

9 A. Of the two reds one went to Regional, and then the one  
10 transported by a bystander went to Doctors, Riverside Doctors.

11 Q. Oh, to Doctors, okay.

12 A. It's confusing because they're both Riverside.

13 Q. Yeah.

14 A. They went to Doctors which is the closest hospital. They  
15 followed the hospital signs off the Interstate, I guess.

16 Q. And do you know -- know which, what -- well, do we know which  
17 patient that was?

18 UNIDENTIFIED SPEAKER: I heard it was a male.

19 UNIDENTIFIED SPEAKER: The one that was, the one that was  
20 brought in --

21 UNIDENTIFIED SPEAKER: It was POD -- I never got the name,  
22 but I, I think I can track it down now with that information.

23 BY MR. BARTH:

24 Q. We'll get it.

25 A. And then there were three deceased on the scene.

1 Q. And, so, yeah, now, I mean, now we're getting into some  
2 specific questions about kind of like the response. And you've  
3 already described a little bit about the assigning like the triage  
4 and stuff. But I guess we'll have -- let's, let -- if we can go  
5 through it sort of chronologically, like, you know, what, what the  
6 major activities were through that process. And I know one thing  
7 that I haven't heard that I still want to check on is like the --  
8 if there were extrications or that kind of thing.

9 CHIEF COLLINS: So do you want to touch on Engine 21 getting  
10 there and you through when I arrived?

11 CAPTAIN LEDUC: Okay. Yeah. It was a couple minutes, but so  
12 Engine 21 (indiscernible) you heard they needed a couple  
13 additional ambulances. I arrived right after my engine company.  
14 So the engine kind of came up. They took the first lane. We took  
15 the second lane. I told my guys in the truck that we needed to do  
16 triage immediately when we get out of the truck. Came out of the  
17 truck, and there was a, a mob of people basically right by the  
18 side of the road.

19 BY MR. BARTH:

20 Q. And which unit were you on again?

21 A. Rescue 3.

22 Q. Rescue 3. Okay.

23 A. Yeah. So I knew that there was a call for an extrication --

24 Q. And what's your last name just so I --

25 A. LeDuc.

1 Q. LeDuc, yeah. How do you spell that?

2 A. L-e capital D-u-c.

3 Q. L-e capital D --

4 A. -- u-c.

5 Q. -- u-e-c. Okay.

6 A. No e, just u-c.

7 Q. Okay. Thanks.

8 A. All right. So come out of the truck. Again, patients are  
9 still coming up the hill. There were several deceased right on  
10 the side of the road. Basically started calling out that we  
11 needed to start triaging and started working some of the green  
12 patients away from them, but everybody was kind of screaming. So  
13 I was trying, trying to get my guys to realize that we needed to  
14 move them away from the current patients so we can get a good  
15 count, accurate count to start with.

16 About that time Engine 21 officer made it up the hill, came  
17 to me, and kind of said we need to get, get working on this. What  
18 do we need to do? I said let's work on the -- get separating the  
19 two. So we initially got most of the green patients kind of  
20 walking towards Medic 3 which was staged a little bit further in  
21 front of us, and leaving behind the yellows and the reds. I got a  
22 firefighter from Engine 21 came up to me next, and said are you  
23 technical rescue? I said, yes. I said do we have a trap? The  
24 extrication is in bottom of the hill; is underneath the roofline  
25 from the -- the party bus had flopped and onto the bottom of the

1 roof -- ravine. I said, okay, I'll be down there in just a  
2 second. Trying to separate these two. So we started getting all  
3 the greens going in one direction. And I had my engine crew kind  
4 of working the red and yellow patients. And then about that time  
5 you arrived on scene right behind me. So you said, I think, you  
6 actually called me on the radio and asked --

7 CHIEF COLLINS: Yeah. I said give me -- situation update.

8 CAPTAIN LEDUC: So I did. I gave a quick count from what I  
9 could see from my vantage point. Said, yeah, it's six or seven  
10 yellows I believe I told you. Yellow slash red. I said I saw two  
11 black at the time, and I said a bunch of greens over here. At the  
12 time they were all kind of intermingled along the side of the  
13 road; had been very difficult to count. A dozen or so I think was  
14 what it was.

15 So he arrives. I get a face-to-face with him. I said as  
16 long as you're here, I'm going to go work -- see what the  
17 extrication is. So went down the hill, made it to the bottom of  
18 the hill, and James City Engine 21 medic --

19 CHIEF COLLINS: Medic 21, yeah.

20 CAPTAIN LEDUC: -- crew was with that patient.

21 CHIEF COLLINS: -- that time the first two engine companies  
22 were rolled into a triage group that were separating the patients.  
23 And then his crew on Rescue 3 went down to begin the extrication.

24 CAPTAIN LEDUC: Yeah, with Medic 21 crew. So got down to the  
25 bottom. The roofline seemed like it was all intact. There was no

1 walls, just the roof itself. And then the medic had his  
2 flashlight, and he was kneeling down on the one side. He kind of  
3 grabbed me. He said he's down here. I knelt down. Saw kind of a  
4 groove or a hole where he was laying in. He said he can't feel  
5 his legs. He's got a crush going on. I started talking to him  
6 trying to get a quick assessment. He was twisting in there, and  
7 he was kind of talking to me. I said, is he alert and oriented?  
8 Yes. Do you have something that would stop the -- like he had  
9 shocks underneath it so it wasn't continually crushing on him. I  
10 said, well, if he's that way, he's all right. He's not our  
11 priority right now. And I walked back up the hill. I kind of  
12 told him, I said, you can stay with him. I'll send down -- my  
13 crewmembers when I can. We have a lot of patients up top.

14 So I continued back up the hill. When I made it back up the  
15 hill, they -- the greens had kind of started to mingle back into  
16 the yellows. So we again tried to get the greens to separate.  
17 And then I started assigning the crews that were there to start  
18 help treating. There were several that were working with the  
19 ambulance crews as they were coming in. Take this patient, load  
20 them in. Next ambulance will show up, take this patient. And  
21 then we're just kind of separating, and then working on the  
22 treatments.

23 Once I realized everybody was up there kind of doing --

24 CHIEF COLLINS: -- flowing now.

25 CAPTAIN LEDUC: Yeah. Everything was kind of -- didn't need

1 me there anymore. I went back down the hill to try to help my  
2 crew with the extrication.

3 So on the bottom when they were doing extrication they had  
4 used some spreaders on the bottom to try to lift on that piece.  
5 They said they were not really making any headway on lifting that  
6 roofline. So we started to remove a bunch of debris along the  
7 side. One of the guys was already there assessing said his legs  
8 are over in this general area somewhere. So we started taking a  
9 bunch of debris out of that one side. Found his legs in that --  
10 on that one side that I was at. We kind of manipulated them  
11 through the rebar -- not the rebar -- the tubular steel that was  
12 there. And we basically all just lifted up on that one side, and  
13 they pulled him straight out.

14 CHIEF COLLINS: He stood up.

15 CAPTAIN LEDUC: So originally he said that he couldn't feel  
16 his legs but, yeah, he stood right up, and he walked to their  
17 ambulance. So and then I -- from that point forward I just kind  
18 of came up, and I assisted with --

19 BY MR. BARTH:

20 Q. Do you know which ambulance he went to?

21 A. Medic 21.

22 CHIEF COLLINS: Medic 21 was with him the whole time.

23 BY MR. BARTH:

24 Q. Medic 21?

25 A. Yeah. Because they, they had to pass him to get to the other

1 patients and their, their medic. When we say medic, we mean their  
2 ALS provider stayed with that gentleman because he saw him  
3 trapped.

4 Q. Okay. So that was one extrication?

5 A. Yeah, only one extrication.

6 Q. That's the only one? Okay.

7 A. Yes, sir.

8 Q. We heard reports of, like, maybe it was a deceased or  
9 something that was tangled with the guardrail?

10 A. Yeah. So -- a post, and then you have the pad that the  
11 guardrail is mounted to. The rail was over top, and he -- this  
12 would be where the gentleman was, like, right under it like that.  
13 This being his head.

14 A. Yeah. Originally when I came out of the truck, and I saw the  
15 deceased, they were putting a tarp on top of him. So I went, and I  
16 did a quick check to see what -- make sure that he was. I felt  
17 for a pulse. He was pulseless. I tried to reach down to  
18 manipulate his airway real quick, and he was kind of wedged in  
19 that spot. So, yeah, he's a black at that point. Kind of put the  
20 tarp back on him. I saw them getting ready to cover another  
21 person that was 15 feet to my right. So walked over to that one  
22 as well, kind of flipped back the sheet. He had multiple facial  
23 injuries, and he had no -- he was (indiscernible) as well. So  
24 covered him back up.

25 Q. And so that second fatality was where on the roadway?



1 A. Shoulder. Everybody was kind of on that shoulder.

2 Q. Okay.

3 A. So as we pulled up again we were in --

4 CHIEF COLLINS: Kind of where the pavement transitioned to  
5 grass somewhere within a few feet of that was where I think all  
6 three of them were.

7 CAPTAIN LEDUC: Yeah. We were in the second lane when we  
8 parked, and I got out, and I was a couple of steps away from that  
9 first patient.

10 BY MR. BARTH:

11 Q. Okay. And then the third.

12 A. And the third was further down. So again when I was up the  
13 hill later coming up the hill I noticed that there was another  
14 tarp over to the right. Walked over and saw her, and she had  
15 multiple injuries --

16 CHIEF COLLINS: Not consistent with life.

17 BY MR. BARTH:

18 Q. You said multiple facial injuries again?

19 A. Yeah. She had multiple facial injuries and, again, it was  
20 also pulse was (indiscernible), and she had been covered as well.  
21 I think state troopers had covered her.

22 CHIEF COLLINS: About that point he had redirected and  
23 assigned the engine companies to the triage. Things were flowing  
24 because as ambulances came up they received a red or yellow  
25 patient, and they were gone. So as myself and Chief Sink were

1 coordinating, I was delegating all the communication to her as I  
2 managed the incident. Every time I told her I need you to call  
3 this hospital, I need you to call here, she was managing who was  
4 getting what, and letting all the hospitals know.

5 UNIDENTIFIED SPEAKER: With the hospital, yeah.

6 CHIEF COLLINS: Yeah, on the phone with all the hospitals,  
7 and coordinating everything that was coming. And the ambulances  
8 it was just smooth. The ambulances would show up, get handed a  
9 patient, and they were gone. I didn't -- I would say no one on  
10 scene had to give a lot of direction to the ambulances because  
11 once the triage group gave them a red or yellow, they were gone.

12 BY MR. BARTH:

13 Q. So were you using physical tags or how, how were you  
14 designated the colors?

15 A. So we got the tags --

16 A. Yeah. Originally once you separated the two groups that was  
17 the green group, and everybody else was kind of where we were  
18 So --

19 A. Red and yellow --

20 (Crosstalk)

21 Q. So the green didn't have tags?

22 A. Not initially. They were just separated initially.

23 A. Yea. And then once they kind of were corralled then we  
24 started getting some patient care done on them. After we cleared  
25 out the yellows and the reds patient care was starting going on,

1 and then the bus showed up --

2 A. And they were --

3 (Crosstalk)

4 A. -- bus, and had a better assessment while we waited for the  
5 second bus.

6 Q. Okay.

7 A. That's when the triage tags were applied.

8 A. Initially the tags were just -- it was verbal by the triage  
9 group. They would grab someone and (indiscernible) because like I  
10 said the two responses, and then me adding the units, and then the  
11 other units that I added after James City gave their size up they  
12 gave us enough units that really we'd have been -- to get the tags  
13 out when we knew this was a red --

14 Q. Right.

15 A. -- would have delayed them getting off the scene.

16 Q. Right.

17 A. So it sort of evolved so quick that the ambulances -- the  
18 assignment being upgraded, and then combining the two run  
19 responses made it to where --

20 A. It wasn't necessary.

21 A. -- it wasn't necessary. By the time we could manage the  
22 patients themselves, and get them calmed down and in an organized  
23 fashion, once we designated, hey, that person is laying on the  
24 ground, you know, and they were given a color by the triage team  
25 there was an ambulance, come take this one, come take this one,

1 and they were just, they were just getting out, getting out of  
2 there.

3 Q. Did you see any patterns in the -- I imagine most had like,  
4 you know, abrasions and things like that from the highway and so  
5 forth, but did you notice any injury patterns that stuck out in  
6 your mind? Any particular people that had a very unique injury  
7 pattern from all the others or just --

8 A. Not specifically on the injury. He might be able to speak to  
9 that, but I was not directly involved in patient care obviously.  
10 I was trying to manage everything. But just the fact that the  
11 bus, if you didn't know looked like a flatbed truck. There was --  
12 it was a driver's seat, and a windshield, and the beginning of a  
13 roof, and that was it. It was -- looked like a flatbed truck.  
14 They had to have all been ejections. I don't see any other way  
15 they got off that bus. But, obviously, it occurred before we got  
16 there, but that's what struck me that if it didn't -- if there  
17 wasn't a piece of skin off the side of the bus that said party bus  
18 on it, it looked like a flatbed truck. So I would imagine that  
19 they all had injuries consistent with sliding across the pavement,  
20 but I was not directly involved --

21 A. I wasn't directly involved with patient care either. I was  
22 kind of managing the people more than I was managing the patients.

23 Q. Okay.

24 A. So --

25 Q. And then the other question I had thinking about it was the

1 group of greens at the buses was law enforcement there trying to  
2 establish the people on scene or were they just kind of leaving it  
3 to you guys to deal with the patients?

4 A. To be honest with you I cannot even remember what law  
5 enforcement was doing at all during that entire call.

6 Q. Okay.

7 A. I think they were more investigatory and starting their  
8 investigation. Some of the patients were pretty rowdy, but it  
9 wasn't anything we couldn't handle, and there wasn't anything  
10 physical where we needed them to restrain anyone or anything like  
11 that. We really just had enough people that we never -- I don't  
12 think we ever went and got them to come help with anything. I  
13 know somebody yelled -- and there was a gun when I walked up there  
14 was a pistol laying on the ground, and they got a trooper to come  
15 retrieve that. But I heard from others -- I didn't witness it  
16 myself, obviously, I'm not doing patient care, but that some of  
17 the people were pretty rowdy. But they were able to be talked to,  
18 and sort of, you know, organized. So it didn't get to the point  
19 where we needed law enforcement to physically engage I don't  
20 think.

21 Q. Okay.

22 A. I know that they -- for their investigation purposes they  
23 were tracking down who was driving, and talking to people, but I  
24 was not present for that.

25 Q. Right. Were there any other -- so we had just the one

1 extrication. Any other operations on scene that you needed to do,  
2 other roles besides patient care that required resources?

3 A. Well, our Engine 5 that was added to the second accident they  
4 come from our Hazardous Material Station. So we had enough people  
5 there that while triage was going on the crew went to help a  
6 triage, and their officer went and did a size-up of the trucks,  
7 both of the trucks to look for any, you know, any fuel leaks or  
8 any, any other hazards, environmental hazards or anything like  
9 that. He came back, and told us that both of them were good.  
10 They weren't leaking fuel. There was nothing, no concern of fire  
11 or any other hazardous materials involved with either one of them.  
12 So we -- he let us know that pretty early on.

13 A. That and primary search --

14 (Crosstalk)

15 A. -- we did sweep --

16 (Crosstalk)

17 A. -- the entire median. If you look where the scene was  
18 there's an overpass for Lakeside Road, which we're very thankful  
19 it didn't end up on Lakeside Road because that's in an older  
20 heavily wooded thick road residential area down the street from  
21 here, and that would have just been a nightmare to get all those  
22 -- equipment down there if that bus had gone down. But from where  
23 that overpass goes down to Lakeside back through the whole scene  
24 at least three or four times we had engine companies --

25 Q. Sweep --

1 A. Sweep it, yeah. And they were like I just saw someone do it.  
2 I said sweep it. I said go do it. And so James City engine --  
3 I'm sorry -- James City's battalion chief he was, like, hey, we  
4 need to start sweeping the area, and, you know, I'm running  
5 (indiscernible) I'm like, yes, please assign crews to that, check  
6 this whole area. And then they also checked the right shoulder  
7 eastbound adjacent to where the, the whole crash had started. So  
8 that was something that we considered was sweeping the area really  
9 good. I guess the question was any --

10 Q. Yeah, just any other --

11 (Crosstalk)

12 Q. -- well, either, yeah, I mean, any challenges or any --

13 A. So --

14 (Crosstalk)

15 A. -- the first arriving engine had asked for a couple of  
16 helicopters, and they weren't flying due to weather. But we  
17 didn't have anyone that stuck around on scene long enough that I  
18 think it, it would have changed the outcome of anything. The most  
19 critical patients were taken immediately, and it would have, it  
20 would have only taken time. They'd have been meeting at the  
21 helicopter, and it wouldn't have been a benefit I don't think. I  
22 was immediately told after I walked up that the helicopters had  
23 climbed, and I was like 10-4 just moved on. It wasn't really a  
24 concern. It's something that came up, but it wasn't a concern.

25 Q. Yeah.

1 A. So the HAZMAT, the searches of the areas. I know that I  
2 asked state police to, and I mean obviously they want to know as  
3 well, to get a hold of the owner of the bus to get a par count of  
4 how many people were supposed to be on the bus. James City said  
5 when they arrived first they thought they saw someone walking away  
6 towards the hospital. And that, that we assume was the individual  
7 that was picked up by vehicle. Because that would have been  
8 beyond the scene. And so we swept this whole area where, where we  
9 were operating. But then also every time a unit left we were  
10 having them check areas beyond, run their scene lights as they  
11 leave the scene just to make sure they don't see anybody down the  
12 road. So, I mean, I guess that was a factor. Oh, but what I was  
13 saying from what I understand, and I didn't make the calls,  
14 obviously, law enforcement is handling, but they said they were  
15 trying to reach the owner of the bus, and they reached someone,  
16 and they also went to the hospital and tracked down the driver of  
17 the bus, and no one could give us a par count. It wasn't  
18 available to state police or us so we could account for every  
19 patient we saw and treated, triaged, and, and where they went.  
20 But we can't --

21 Q. You can't confirm it against --

22 A. Can't confirm it against the list or anything. So that -- I  
23 would say, you know, if that -- if you're looking for something  
24 that was a challenge or that, that created any inaccuracy or  
25 concern, I would say that was a concern that we couldn't say,



1 okay, we're done, you know, we have this many. So like I said we  
2 did several searches of the median, the right shoulder. And then  
3 as I said when units left the scene I had state police as well as  
4 some of our units as we released them from the scene run their  
5 scene lights as they leave the scene for the next couple miles and  
6 just make sure they don't see anybody that left before we arrived.

7 Q. Did you guys assist with the removal of the deceased or how  
8 did that happen?

9 A. No. Some people showed up that I believe were from the  
10 Medical Examiner's Office, but not the medical examiner himself,  
11 but they were in suits and --

12 Q. Okay.

13 A. -- and I've never --

14 Q. And since they weren't entrapped --

15 (Crosstalk)

16 A. So they let the rescue -- obviously, after everything kind of  
17 cleared up we were left with the lights because we had to light  
18 the scene for them. They talked about that the ME was on the way,  
19 and we talked about, well, how do you want this, this body to be  
20 removed? Should we wait for them to get here? And then they  
21 said, no, you can go ahead and remove the guardrail first, and  
22 then. So using a saw is all we just cut off the base of it, and  
23 put it to the side.

24 A. The guard rail was gone. It was just posts.

25 A. It was just the post --

1 (Crosstalk)

2 A. And his head was under the post.

3 Q. I see.

4 A. So they, they cut the bottom of the post and removed that so  
5 that when the medical examiners could get there they could remove  
6 him.

7 Q. Okay.

8 A. And then the rescue truck -- I don't know how familiar you  
9 are. It's a big tool box. So it has a big light tower that lit  
10 up the scene. State police asked that that truck stay and lit up  
11 that area. And they had some lighting of their own, but that  
12 provided the most. And then also myself and these guys remained  
13 on scene, and as the tow and VDOT and other people were working  
14 the scene they would have them cut sections of guardrail, and do  
15 other things to help start the process of the wreckers coming in  
16 and all that stuff like that. So we were there 'till after  
17 sunrise.

18 MR. BARTH: Do you guys have any other questions about the --  
19 like I have a couple of questions about your training and things,  
20 but that's more sort of background stuff. But as far as the  
21 actual on scene stuff.

22 UNIDENTIFIED SPEAKER: I just have a couple follow-ups.

23 BY UNIDENTIFIED SPEAKER:

24 Q. So you guys use 10 code signals or plain talk, plain talk?

25 A. Plain talk.

1 A. Plain talk.

2 A. I believe law enforcement uses 10 codes, but we do not. We  
3 don't --

4 Q. The other, the other responding agencies for fire and rescue,  
5 they're the same plain talk?

6 A. Yes.

7 Q. Okay. And what -- can you describe the weather that you guys  
8 encountered?

9 A. Cold.

10 Q. Was it like -- was it clear? Was there a moon?

11 A. Well, the helicopters all declines so there much have been  
12 rain earlier in the night or some reason for that. I don't know.

13 A. I was raining during that day, but I don't remember.

14 A. It was kind of moist.

15 A. Yeah. Everything was wet.

16 A. Everything was wet, but it did not rain on us that I recall.

17 A. It was just cold. But everything was wet. Cold wind and  
18 everything was wet. I remember the pavement being wet pretty  
19 consistently, but I don't remember feeling rain.

20 A. As far as communications everything went on to Channel 5  
21 so --

22 A. I should have mentioned that. When we respond to the  
23 Interstate whether it's on James City side of the line or York  
24 County side of the line we all go to York County Tac Channel 5,  
25 and we manage Interstate incidents on Tac 5. So the initial

1 response, the first units that marked responding immediately went  
2 to Tac 5, and then as I heard them dispatch the second call I said  
3 York County we need -- mark up for that -- tell them to go to Tac  
4 5 as well because I think we're going to end up at the same  
5 accident. So both run assignments were on Tac 5 already on the  
6 way to the same call.

7 Q. Is that -- is it Channel 5 or 5 is it just for rescue or is  
8 that PD also?

9 A. It's just for fire rescue, and whenever we switch to it we,  
10 we remind dispatch to monitor it for us. So there's a dispatcher  
11 listening to Tac 5. And, actually, from that point on I managed  
12 the entire scene of Tac 5. I never went back to our main fire  
13 channel. And they monitored Tac 5 for the entirety of the  
14 operation. And on the communications subject, the hospitals were  
15 all advised by radio that we were working this mass casualty  
16 incident, and to expect patients, but also Chief Sink handled  
17 communication, and she was in regular contact by phone with all of  
18 the ERs that received patients. But in giving them updates along  
19 the way, and also letting them know that we were waiting for the  
20 second bus, and that how many greens they would each be getting  
21 before they got the greens. And, obviously she talked to  
22 Riverside in the beginning. They knew they were getting the  
23 yellows and reds. So --

24 Q. Did you -- we might want to talk to her if we can get her  
25 contact information from you. Or do you happen to mention -- did

1 she happen to mention, like, was she happy with the, with the  
2 communication with the hospitals or --

3 A. I'm not, I'm not --

4 Q. Not sure?

5 A. -- 100 percent sure, yeah.

6 Q. Okay. Do you guys do a debrief at the end of this incident?

7 A. We have not done a formal debrief. We did a hot wash with  
8 the primary crews that were there. We just got together and  
9 debriefed or did our own little hot wash together. We have not  
10 had a formal debrief because we're only one shift after. I  
11 imagine the department will likely set something like that up, and  
12 there's multiple jurisdictions. So our administration, James  
13 City's administration, and if I didn't mention Williamsburg Fire  
14 Department sent an ambulance also. So it's three jurisdictions.  
15 They'll probably set something up, but given that we're going on  
16 break we just did a hot wash with the, the primary crews that,  
17 that were there today. We just met somewhere, a neutral place,  
18 and hung out, and talked about it.

19 UNIDENTIFIED SPEAKER: That's all.

20 MR. BARTH: Okay.

21 BY MR. BARTH:

22 Q. Can you just give a, kind of a quick rundown of like the kind  
23 of training you guys do? Especially with mass casualty stuff.

24 A. So we have a Hampton Roads Regional Mass Casualty Response  
25 Plan. We do training drills once in a while just because of the

1 -- I'd say the environment we've been in the last few years, in  
2 all honesty they tend to be more active shooter exercises. That's  
3 where most of our mass casualty stuff has been practiced as of  
4 late in the last few years.

5 Q. Are these like both desktop and live?

6 A. Yeah. And, yes, and they are also -- a lot of them tend to  
7 be centered around the military installations we have nearby. I  
8 don't remember what month it was, but just a couple months ago we  
9 did a mass casualty active shooter exercise at Cheatham Annex  
10 Naval Base which is -- it's Cheatham Annex. It's an annex of  
11 Yorktown Naval Weapons Station. But that was with us and Yorktown  
12 Naval Weapons Station Fire Department, county law enforcement,  
13 county SWAT team, and a couple of other jurisdictions. So a lot  
14 of the military installations will do a lot of annual active  
15 shooter or mass casualty type exercise. And also we tend to do  
16 them annually or maybe every other year centered around schools  
17 most often. Like I said just because of the environment we're in.  
18 Or the, you know, the recent history I should say more or less.  
19 And so we don't -- I don't -- remember when last time it hit my  
20 shift, but there was one last year at York High School. So --

21 Q. Okay.

22 A. And I mean our basic training, and then our paramedic  
23 certification, and then release processes, whether it be BLS or  
24 ALS there's always a learning portion where you have to go through  
25 the triage system, and the tagging and all that stuff like that.

1 Q. Right.

2 A. It's something that we, we train on now and then, yeah. And  
3 then like I said the drills annually and so on and so forth. So  
4 we just reviewed it when we were doing the active shooter thing a  
5 couple months ago because it was the guys from here that went to  
6 the base with me.

7 MR. BARTH: I think that's all my questions. So yeah, you  
8 can stop that then. And we appreciate you --

9 (Whereupon, the interview was concluded.)

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CERTIFICATE

This is to certify that the attached proceeding before the  
NATIONAL TRANSPORTATION SAFETY BOARD

IN THE MATTER OF: FATAL TWO-VEHICLE CRASH IN YORK  
COUNTY NEAR NEWPORT NEWS, VIRGINIA  
ON DECEMBER 16, 2022  
Interview of Anthony Collins and  
Joseph LeDuc

ACCIDENT NO.: HWY23MH004

PLACE: Newport News, Virginia

DATE: December 17, 2022

was held according to the record, and that this is the original,  
complete, true and accurate transcript which has been transcribed  
to the best of my skill and ability.

[REDACTED]

*Katherine Motley*

Katherine Motley  
Transcriber