



# PRIVATE HEALTH SERVICES REGULATORY COUNCIL

PHSRC GUIDELINE 08

DATE: 14.06.2013

## GUIDELINE FOR PRIVATE AMBULANCE SERVICES

### INTRODUCTION

These guidelines are for implementation by any non – state sector organization / institute, operating or intending to operate a private ambulance service. The guidelines spell out the minimum requirements which the agency must meet when operating a private ambulance service.

The intended areas cover:

- Ambulance owner / operator / agency
- Ambulance vehicles & necessary equipments
- Emergency medicine
- Ambulance crew

**Section A** deals with the Guidelines for Non-Emergency Ambulance Services

**Section B** deals with the Guidelines for Emergency Ambulance Services

### SECTION A

#### 1 Definition:

**1.1** A non-emergency is a condition which does not cause immediate harm to life or endanger life and usually is a long standing problem and does not need immediate medical attention.

A non-emergency ambulance service is one that provides ambulances for transport a non-emergency patients :

- a. Patients requesting an ambulance for regular outpatient clinic attendance.
- b. Patients requesting for ambulance for transport to hospital with medical conditions
- c. Intra hospital transfers of non-critically ill patients.
- d. Patients discharged from hospital
- e. Internal Domestic transfers of patients
- f. Routine home visits

**It is noted that any non-critical/non-emergency patient can develop any acute emergencies at any given time at any given place.** Hence, non-emergency ambulance service also should be prepared for emergency services if required.

## **2. Non-Emergency Ambulance Agency**

**2.1** The Agency that intends to provide the service shall be a hospital, nursing home, registered ambulance service provides or any other voluntary or charitable organization operating a Non-Emergency Ambulance Service.

**2.2** The Agency must have the following:

- a. An acceptable place of operations with a mailing address.
- b. A qualified person (either a doctor or a nurse) employed by the agency who is responsible in organizing, designing and implementing protocols of care for patients transport, training the staff to locally accepted levels and supervision of medical care given to the patients.
- c. A structured programme for training and monitoring performance levels of ambulance crew and records of such performance monitoring, acceptable scales of ambulance equipment and ambulance medical supplies.
- d. A system for activation of the ambulances services of the agency and mode of intra communication if more than one ambulance is operated.

## **3. Non-Emergency Ambulance Vehicle**

**3.1** The ambulance vehicle shall meet the vehicle specifications set by the Sri Lankan Laws and regulations.

**3.2** All equipments should be in good working condition at any given time. these equipment maintenance should be carried out by qualified persons and should be documented.

## **4 Non-Emergency Ambulance Crew**

**4.1** Each Non-Emergency Ambulance should be staffed by at least a two member crew.

- a. Ambulance Officer – a qualified Nurse or trained paramedic.
- b. Driver

**4.2** The driver should have the following minimum qualifications/experience:-

- a. Possess a valid license to drive the ambulance.
- b. Understand the usage of ambulance stretchers and basic ambulance equipment.
- c. Undergone training in Standard First Aid.
- d. Trained in defensive training and aware of the usage of sirens and flashing lights for conveying emergency patients to hospital.

- e. Basic skills in handling communication equipment and message conveying to another party  
Ex: Hospitals, another care giver centers

**4.3** The Ambulance Officer (a qualified Nurse or trained Paramedic) should be able to

- a. Measure vital signs eg pulse rate, respiratory rate, blood pressure, conscious level.
- b. Perform Basic Cardiac Life Support (BCLS) and be certified by a qualified agency registered with the Ministry of Health. Those have to be revalidated every 2 years.
- c. Use air way adjuncts such as oro-pharyngeal, naso-pharyngeal airways, suction devices and basic oxygen devices such as bag valve mask.
- d. Use various types of stretchers and body immobilization devices.
- e. Perform basic emergency procedures such as:-
  - i. Control of external bleeding
  - ii Application of dressings, bandages, slings and splints.
- f. Monitor peripheral lines of stable patients.
- g. Transfer and maintain patients with nasogastric tubes and urinary catheters.
- h. Establish contact with a nearest receiving hospital if need arises.

## **SECTION B**

### **GUIDELINES FOR EMERGENCY AMBULANCE SERVICE**

#### **1 Definition**

##### **1.1 Emergency patient:**

A patient through sickness, injury or other circumstances is in immediate danger of life unless emergency treatment is given and a patient who needs monitoring and suitable transport to a facility where necessary treatment is provided.

- **Emergency ambulance service:**

Ambulance service which can provide services, necessary ambulance to respond to a scene of a medical or surgical or other mass casualty emergency, stabilize the victims by providing emergency care at the scene and transport with necessary monitoring facilities for a definitive treatment to a suitable facility or to provide necessary transport for critically ill patients been transferred from one facility to another facility.

- 1.2** An Emergency Ambulance Service may, in addition also, at its own choosing, attend to Non-Emergency patients or else refer these patients to any Non-emergency Ambulance Service.

#### **2 Emergency Ambulance Agency**

**2.1** The Agency that intends to provide the service must be a hospital, nursing home, registered ambulance service provider or any other voluntary/charitable organization operating an Emergency Ambulance Service.

**2.2 The Agency must have the following**

- a. An Agency place of operations with a mailing address.
- b. The capacity to provide uninterrupted services for 24 hours, 365 days or a standard agreement with another ambulance service provider as a back up in the event of unavailability.
- c. A qualified person ( a doctor) employed by the agency, who is responsible in organizing, designing and implementing protocols of care for patients transport, training the staff to locally accepted levels and supervision of medical care given to the patients.
- d. A structured programme for training and monitoring performance levels of ambulance crew and records of such performance monitoring.
- e. Acceptable scales of ambulance equipment and ambulance medical supplies.
- f. A system for activation of the ambulance services of the agency and mode of intra communication  
if more than one ambulance is operated.

**3 Emergency Ambulance Vehicle**

**3.1** Emergency Ambulance vehicles managed by the agency may be one or more of the following types:

- a. Standard ambulance vehicles
- b. Bus ambulances
- c. Air ambulances

**3.2** The ambulance shall meet the vehicle/vessel specifications for emergency ambulances set by the Government of Sri Lanka.

**3.3** The minimum equipment in each emergency ambulance should be serviceable at all times when the ambulance is in operation.

**3.4.** Maintenance of emergency equipment should be as of supplier specification and all maintenance should be documented.

**4 Emergency Ambulance Crew**

**4.1** Each Emergency Ambulance should be staffed by 4 crew-members, including an ambulance driver and an ambulance assistant. The Ambulance Officer should be a Medical Officer and the Assistant Ambulance Officer should be a Nurse or trained Para-medic.

**4.2** The Emergency Ambulance should have ambulance crew whom are competent in providing simultaneous air way and circulatory management during transportation of critically ill patients.

- 4.3** The driver of the Emergency Ambulance should have the following minimum qualifications/experience: -
- a.** Possess a valid license to drive the Emergency Ambulance.
  - b.** Undergone training in Standard First Aid certified by relevant Provincial Director of Health Services or registered agency with Health Ministry.
  - c.** Exhibit proficiency in the use of ambulance stretchers and basic equipment.
  - d.** Trained in defensive driving and be well aware of the use of sirens and flashing lights for conveying emergency patients to hospital.
- 4.4** The Ambulance Officer and the Ambulance Assistant must be able to,
- a.** Evaluate the ill and injured.
  - b.** Render Basic life support/Advanced life support/Pediatric Life support and first-aid to patients with trauma Emergencies.
  - c.** Measure vital signs such as temperature, blood pressure, pulse and respiratory rates,SO2 levels, level of consciousness and pupil status.
  - d.** Perform Cardio Pulmonary Resuscitation (CPR) including the use of mechanical adjunctive aids such as oropharyngeal nasopharyngeal airway, suction devices, and basic oxygen delivery systems.
  - e.** Use various types of stretchers and body immobilization devices.
  - f.** Carry out emergency basic procedures to control external haemorrhage, apply dressings, sling bandages and splints. Provide immediate medical care to casualties during the process of extrication and disentanglement from entrapments.
  - g.** Perform basic field triage.
  - h.** insertion and monitoring of peripheral IV lines and monitoring of central lines.
  - i.** Transfer patients with endo-trachial tubes, intercostals drainage tubes, nasogastric tubes,or foley catheters.
  - j.** Administer intravenous injections and fluids,sublingual.subcutaneous,oral,intramuscular as prescribed by appropriate protocols.
  - k.** Perform defibrillation and synchronized cardio-version.
  - l.** Obtain venous samples.
  - m.** Monitor ECG.
- 4.5** The other Supportive crew-members should be able to assist:
- a.** Render Basic Life support and first-aid to patients with trauma emergencies.
  - b.** Perform CPR including the use of mechanical adjunctive aids such as oropharyngeal nasopharyngeal airways, suction devices and basic oxygen delivery devices.
  - c.** Use of various types of stretchers and body immobilization devices.
  - d.** Carry out emergency basic procedures to control external haemorrhage, apply dressings, slings bandages and splints. Provide immediate medical care to casualties during the process of extrication, disentanglement from entrapments.

