

## **MUNICIPAL AMBULANCE SERVICE**

**BACKGROUND.** According to the Municipal Citizens Charter, the municipality has a mission statement to **“provide ambulance service to Orion residents in response to emergency medical cases needing immediate transport to medical facility.”**

The method of servicing a request for an ambulance during the previous administration is by a personal interview with the Mayor Private Secretary, today, with the current administration, the practice is the same except that the request for an ambulance is processed by a Barangay Coordinator and there is now new ambulance driver. A client has to see the Barangay Coordinator in person.

Today, the procedure is done on one-in-one interview between the client and the coordinator between the hours of 8:00am to 12:00am and from 1:00pm to 5:00 pm at the office of the Mayor. The requirements are: **for confinement, name of hospital & room where patient is to be confined and for outpatient care, name of hospital and date when the patient will be checked up or received medical treatment.** There is no telephone listed to reach the coordinator; she is not available during lunch period. Request for an ambulance is not available after work hours, on week-ends and on holidays

There are two ambulances, both are just a van type, painted with “AMBULANCE”; it is equipped with an emergency flasher on the top and siren; one has a stretcher and the other has none. Both ambulances are equipped with a basic first aid kit but not designed to monitor patient vital signs. There are two ambulance drivers; both are not qualified as an Emergency Medical Technician (EMT) or Paramedic. The stretcher in the van has no retractable legs with wheels that could be moved by a one person. The driver requires another person to help lift the stretcher. The ambulance service has no nurse or nurse’s aide to accompany the trip. The two ambulances are stored or parked in front of the municipal building at night and on weekends.

***ANALYSIS. While the policy was designed to meet the need of the residents in time of an emergency, in reality, the practice is not even close to meeting the purpose of the ambulance service. In reality the ambulance is being used as a transportation of a patient to a Manila Hospital on a confirmed admission or outpatient appointment and not what an ambulance is intended for, to transport a patient on an emergency. If the ambulance is being used for this purpose, there is a chance an ambulance may not be available when an emergency arises. It is almost impossible to provide ambulance service to the outlying barangay due to lack of communication and poor road condition.***

***In my opinion, a patient must be seen first and decided what to do at our local hospital, Saint Michael Hospital ER. In an outpatient care, there is no appointment necessary at our local hospital. If a patient is able to afford to go to a hospital in Manila on an outpatient care appointment, they, I am sure, can afford a private transportation to go to Manila and not by the municipal ambulance. In an emergency, a patient must first be taken to the nearest hospital, St. Michael Hospital ER. If the patient is to be admitted, the ambulance, if there is an ambulance, is released. If the hospital determines the need for a referral or transfer to a Manila hospital, the hospital contacts the hospital. If the patient has health insurance (ambulance) coverage, St. Michael Hospital uses their in-house ambulance to transport the patient. If there is no ambulance coverage, the hospital may request the***

*services of the municipal ambulance to transport the patient to the hospital in Manila. In this situation, the use of the municipal ambulance is in order.*

*In the US, emergency means exactly that; it is matter of life and death where a victim of an auto accident, violent crime, cardiac arrest, drowning, man-made and natural disaster, may be transported to a nearest hospital ER or trauma center.*

*In practice, from the time an emergency call of 911 is received, the Emergency Medical Dispatcher screens the call, determines what type of assistance, a police, a fire, a rescue, drowning at sea or on water and refers the emergency call to the proper emergency authority. It is amazing when a call is received the location of the caller is flashed on the computer monitor screen. On average an ambulance reaches the scene within (five) minutes.*

RECOMMENDATION. The practice of dispatching the ambulance to an out of town hospital must be on an emergency basis only. However, **one of the ambulances may be used as a pool to transport several patients to a Manila hospital on a confirmed inpatient admission or outpatient medical appointment. Provided, that the accompanying immediate family is limited. Provided further, the ambulance is not used to go shopping at a mall.**

In an emergency (cardiac arrest, stroke, car accident, drowning, shooting, etc) a telephone request should be considered rather than personal interview at the office of the Mayor; the availability of an ambulance on an emergency basis must be on 24/7 and not only confined during working hours and on weekdays only. **IRR to RA 9485 (Anti-Red Tape Act) states that: "Frontline services must at all times be complemented with adequate staff...providing skeletal personnel during lunch and snack time."** Suggest the following:

1. Designate a hot line for an ambulance service during working hours.
2. Centralize emergency hot line for all types of emergencies after working hours. (Police hotline or any hotline approved by the Mayor may be used to monitor, screen, make referral, and dispatch an ambulance due to fire, rescue, and police investigator on auto accident.)
3. Ambulance driver on duty must be in uniform and available anytime, and could be reached by mobile phone.
4. Ambulance on duty must be cleaned and mechanically in good condition.
5. Ambulance driver if not qualified as an Emergency Medical Technician (EMT), must at least be trained for a simple basic emergency first aid procedure, such as CPR, a simple monitoring of vital signs, tourniquet, etc.
6. If necessary a physician assistant or a nurse accompanies the trip if it is long distance.
7. Provide life support medical kits, neck support, blanket and water on both ambulance.
8. The ambulance driver is to document the time, date, mileage, purpose of the trip, destination, passenger and who authorized the trip.