GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA UNSTARRED QUESTION NO. 1385 TO BE ANSWERED ON 11.03.2025

NATIONAL AMBULANCE SERVICES

1385. SHRI PRAMOD TIWARI:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether Government has launched the National Ambulance Services (NASs);
- (b) if so, the details thereof;
- (c) whether the number of advanced life support (ALS) ambulances is quite low as compared to the number of operational basic life support (BLS) ambulances;
- (d) if so, the details thereof;
- (e) whether there is a wide regional disparity in ambulance availability;
- (f) if so, the details thereof;
- (g) whether patient transport vehicles (PTVs) take a larger share of the currently available ambulances; and
- (h) if so, the steps proposed to be taken to increase the share of ALS ambulances in the country?

ANSWER

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PRATAPRAO JADHAV)

- (a) & (b): The Ministry of Health and Family Welfare introduced the National Ambulance Services (NAS) in the year 2012 under the National Health Mission (NHM) and has been operating in 36 States/UTs in the country. NHM provides technical and financial assistance to States/UTs to strengthen their healthcare systems, including emergency transportation of patients through NAS. The model for implementation of NAS is selected by respective State/UT Government depending upon their requirement and suitability. NHM provides support towards operational cost and capital expenditure for Basic Life Support (BLS) ambulance, Advance Life Support (ALS) ambulance, Patient transport vehicle (PTV) and innovative solutions like bike, boat ambulances for remote and difficult-to-access areas.
- (c) & (d): The distribution of Advanced Life Support (ALS) and Basic Life Support (BLS) ambulances follows a strategic approach based on population norms outlined under the National Health Mission. According to these norms, one ALS ambulance is recommended per 500,000 people, while one BLS ambulance is recommended per 100,000 people. This allocation is designed to ensure a balanced and efficient response to healthcare needs across

the country.

In addition to the centralized pool of 3,044 ALS and 15,283 BLS ambulances, additional ambulances are stationed at key healthcare facilities like District Hospitals (DHs) supported through multiple financing sources.

- (e) & (f): The availability of ambulances across different regions is guided by population-based norms under the National Health Mission to ensure equitable distribution. However, variations may exist due to factors such as geographic terrain, population density and specific healthcare needs of different regions. Moreover, deployment of ambulance is a function of the State.
- (g) & (h): Patient Transport Vehicles (PTVs) play a crucial role in medical transportation; however, they do not constitute the largest share of the currently available ambulance fleet. As per NHM-MIS data (June 2024), BLS ambulances (15,283) form the largest segment, followed by ALS (3,044) ambulances and PTVs (3,918). As Health is a State subject, the primary responsibility to ensure availability of ambulances lies with the State/UT Governments. However, the Ministry of Health and Family Welfare (MoHFW) provides financial and technical support to the States/UTs. States/UTs have been given this flexibility to propose for a particular type of ambulance and the required number of ambulances including the operational costs/full operational costs based on the requirement and the gap analysis, including performance of existing ambulances in their respective State/UT. State/UT also have the flexibility to deploy the ambulances based on need/service requirements, taking into account the needs of the citizens, including those living in rural or remote areas.
