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

## RAJYA SABHA UNSTARRED QUESTION NO. 1077 TO BE ANSWERED ON 29<sup>TH</sup> JULY, 2025

#### AMBULANCES IN THE COUNTRY

#### 1077 SHRI K. R. SURESH REDDY:

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

- (a) whether it is a fact that, as per report by NITI Aayog and AIIMS published in 2021, only 66 per cent of ambulances were functional in Government hospitals with 300 or less beds;
- (b) the measures/steps taken by the Ministry since the publication of the report to improve ambulance functionality and coverage in such hospitals;
- (c) whether the Central Government or State Governments conduct any audits of ambulances and equipment in it; and
- (d) if so, the details thereof?

### **ANSWER**

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

(a) & (b): As per report titled "Emergency and Injury Care at Secondary and Tertiary Level Centres in India" jointly published by NITI Aayog and AIIMS, Delhi in 2021, 87% of ambulances were found to be functional in government hospitals having less than 300 beds. The Ministry provides support to the States/UTs to optimize availability and functionality of ambulances, aiming to address identified gaps and foster continuous improvement across diverse hospital settings.

Health being a State subject, the primary responsibility to ensure availability and service adequacy 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 each year for improving their emergency ecosystem through State Programme Implementation Plan (SPIP) duly approved by National Programme Coordination Committee (NPCC). Deployment of Basic Life Support (BLS) and Advanced Life Support (ALS) ambulances is actively augmented, with centralised call centres (102 and 108) ensuring timely, accessible emergency transportation nationwide. States/UTs 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.

(c) & (d): The Ministry supports a robust framework for periodic audits and assessments of ambulances and their equipment, encouraging high standards of operational readiness and service quality. Since Health is State subject, the primary responsibility of strengthening public healthcare system, including efforts to have required number of functional ambulances adapted to local contexts so that rural, remote, and underserved populations receive sustained attention, lies with the respective State/UT Governments. The implementation progress and performance of ambulances are regularly monitored and inspected by State authorities.

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