

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

**LOK SABHA  
UNSTARRED QUESTION NO. 1800  
TO BE ANSWERED ON THE 16<sup>th</sup> DECEMBER, 2022**

**AMBULANCE SERVICES**

**1800: SHRI UDAY PRATAP SINGH:**

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

- (a) whether the lack of an effective emergency care network, unequipped and uncertified ambulances without necessary facilities are responsible for the inadequate emergency medical response services resulting in high casualty rate during the emergency medical crisis in the country;
- (b) if so, the details thereof and necessary steps taken/proposed to be taken in this regard;
- (c) whether the Government has issued guidelines to Government and Non-Government Organizations regarding the use of ambulances in the country and if so, the details thereof; and
- (d) whether the Government proposes to put in place any mechanism to check and monitor ambulance services in the country and if so, the details thereof State/UT-wise including Madhya Pradesh?

**ANSWER**

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

- (a) to (d) The primary responsibility of strengthening public healthcare system, including efforts to have required number of ambulances especially in rural areas lies with the respective State/UT Governments. The Ministry of Health and Family Welfare provides the technical and financial support to the States/UTs to strengthen their public healthcare system, based on the requirements posted by States/UTs in their Programme Implementation Plans (PIPs) and within the overall resource envelope.

Under the National Health Mission, various steps have been taken to support the States/UTs for providing reliable and effective emergency care services. Some of the key steps are:

- MoHFW has launched the National Ambulance Services (NAS) under the National Health Mission. Basic life support ambulances (BLS), Advanced life support ambulances (ALS) and patient transport vehicles (PTVs) are supported by the NAS. An ALS is supported for an average population of 5 Lakh and a BLS Ambulance is supported for over one lakh population. States are at liberty to propose the number of ambulances as per the norm to fill the gap.
- All BLS and ALS ambulances are running with centralised call centres which are presently functioning in States/UTs with the numbers 102 and 108. Norms for both ALS & BLS are defined for the number of drugs, equipment, Emergency Medical Technicians (EMTs) etc.
- Dial 108 is predominantly an emergency response system, primarily designed to attend to patients of critical care, trauma and accident victims etc. Dial 102 services essentially consist of basic patient transport aimed to cater the needs of pregnant women and children though other categories are also taking benefit and are not excluded. Janani Shishu Suraksha Karyakaram (JSSK) entitlements e.g. free transfer from home to facility, inter facility transfer in case of referral and drop back for mother and children are the key focus of 102 service. For Dial 102 Service and Dial 108 Service, operational cost is supported under NHM.
- There are a total 1,856 Advanced Life Support Ambulances, 16,859 Basic Life Support Ambulances, 3,253 Patient Transport Vehicles, 17 Boat and 131 Bike presently supported by NHM in the country (NHM MIS June 22).

Ministry of Road Transport & Highways (MoRTH) has issued the Automotive Industry Standard (AIS 125) also called the National Ambulance Code, that lays down the guidelines for state/UT governments and non-government organizations regarding the standards for ambulances in the country. It is mandatory for all functional ambulances to meet the criteria specified herein.

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