DEPARTMENT OF HEALTH

NO. 830

15 JULY 2016

NATIONAL HEALTH ACT, 2003 (ACT NO. 61 OF 2003)

EMERGENCY MEDICAL SERVICES REGULATIONS

The Minister of Health intends, in terms of section 90(1)(m) of the National Health Act, 2003 (Act No. 61 of 2003), to make Regulations in the schedule.

Interested persons are invited to submit any substantiated comments on the proposed Regulations, or any representations they may wish to make in regard thereto, to the Director-General: Health, Private Bag X828, Pretoria, 0001, NaidoR@health.gov.za - for the attention of the Director: Emergency Medical Services within three months of this notice.

DR A MOTSOALEDI, MP

DATE:

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SCHEDULE

DEFINITIONS

- In these Regulations a word or expression to which a meaning has been assigned in the Act, bears the meaning so assigned and, unless the context otherwise indicates:
 - "Advanced Life Support (ALS)" means a level of care provided within the Paramedic, Emergency Care Technician or Emergency Care Practitioner scope of practice as determined by the Health Professions Council of South Africa in terms of the Health Professions Act:
 - "Adverse patient incident" means an event or circumstance that leads to unintended harm or injury to, suffering or illness of, a patient;
 - "Ambulance" means an appropriately equipped vehicle which is either airborne, or landbased and designed or adapted for the purpose of providing emergency care and the transportation of patients which is licensed to an Emergency Medical Service and registered as per the respective legislation, as amended and staffed and equipped as per "Annexures A and B";
 - "Ambulance Emergency Assistant" means a person registered as such with the Health Professions Council of South Africa in terms of the Health Professions Act;
 - "Base or Station" means a dedicated self-contained facility for the housing of emergency vehicles, personnel and associated emergency equipment;
 - "Basic Life Support (BLS)" means a level of emergency care provided primarily by emergency care providers that practice within the Basic Ambulance Assistant scope of practice as determined by the Health Professions Council of South Africa in terms of the Health Professions Act;
 - "Committee" means the Emergency Medical Services Advisory Committee appointed in terms of Regulation 7;

- "Emergency Care" means the evaluation, treatment and care of an ill or injured person in a situation in which such emergency evaluation, treatment and care is required, and the continuation of treatment and care during the transportation of such person to or between health establishments;
- "Education Institution Emergency Medical Service" means an organisation or body that is dedicated, staffed and equipped to operate as an ambulance or medical response vehicle in order to offer emergency care for the purpose of education and training of emergency care students who are registered with the Health Professions Council of South Africa in terms of the Health Professions Act;
- "Emergency Medical Service" or "EMS" means an organisation or body that is dedicated, staffed and equipped to operate an ambulance, medical rescue vehicle or medical response vehicle in order to offer emergency care;
- "Event Medical Service" means an organisation or body that is dedicated, staffed and equipped to operate an ambulance or medical response vehicle in order to offer emergency care at mass gathering or high risk events;
- "Emergency Medical Service Manager" means a person who is duly appointed as the responsible manager for the Emergency Medical Service and who is registered with the Health Professions Council of South Africa in terms of the Health Professions Act:
- "Emergency Care Personnel" means personnel who are registered with the Health Professions Council of South Africa under the auspices of the Professional Board for Emergency Care;
- "Head of Department" means the accounting officer for a provincial health department;
- "Health Professions Act" means the Health Professions Act, 1974 (Act No.56 of 1974);
- "Health Professions Council of South Africa" or "HPCSA" means the body established in terms of section 2 of the Health Professions Act;
- "Inspecting Officer" means a person employed with, or appointed by, the Provincial Health Licensing and Inspectorate Authority;

"Intermediate Life Support (ILS)" means a level of emergency care provided within the Ambulance Emergency Assistant scope of practice as determined by the Health Professions Council of South Africa in terms of the Health Professions Act;

"Licence" means a licence issued in terms of these Regulations, which authorises the provision of an Emergency Medical Service;

"Licensing and Inspectorate Authority" means the provincial health component appointed by the Head of Department for the licensing and inspection of Emergency Medical Services:

"MEC" means the Member of the Provincial Executive Council responsible for Health;

"Medical Practitioner" means a person registered as such in terms of the Health Professions Act;

"Medical Rescue Vehicle" means a vehicle registered to an Emergency Medical Service as such and registered as per the National Road Traffic Act, as amended and staffed and equipped as per "Annexures A and B";

"Medical Response Vehicle" means a vehicle registered to an Emergency Medical Service as such and registered as per the National Road Traffic Act, as amended and staffed and equipped as per "Annexures A and B";

"Paramedic" means a person registered as such with the Health Professions Council of South Africa in terms of the Health Professions Act;

"Response time" means the time measured from when an Emergency Medical Service receives an emergency call to the time the first medical responder arrives at the scene;

"Responsible person" means a person, a nominee, in the case of a company or an association of persons (whether corporate or not) or an organ of state, registered with HPCSA, who establishes, extends, conducts, maintains or renders an Emergency Medical Service;

"Register of Emergency Medical Services" means the publicly available register referred to in Regulation 5 (13);

"National Road Traffic Act" means the National Road Traffic Act, 1996 (Act No.93 of 1996);

"Sluice facilities" means a facility that is dedicated to the laundering of dirty linen and cleaning of soiled equipment;

"Supervising Medical Practitioner" means a medical practitioner who:

- a) is contracted or employed by an Emergency Medical Service in a supervisory clinical capacity;
- b) is regularly consulted by Emergency Care Personnel;
- c) holds additional emergency medical qualifications; and
- d) is registered with the Health Professions Council of South Africa in terms of the Health Professions Act;

"Temporary licence" means a valid licence issued in terms of these Regulations which authorises the temporary provision of an Emergency Medical Service; and

"Volunteer Emergency Medical Service" means an organization or body which is licensed to provide such Volunteer Emergency Medical Services as formally approved by the relevant Provincial Department of Health and registered in accordance with the National Road Traffic Act and must be registered as a Non Profit Organisation, as well as a Public Benefit Organisation as per the relevant Act or Regulation. Such volunteer personnel shall not receive any remuneration for the provision of Volunteer Emergency Medical Services, but may receive reasonable reimbursement for expenses incurred such as telephone costs, equipment costs and fuel costs for the use of their own vehicles.

SCOPE OF APPLICATION

- These Regulations apply to:
 - (a) public and private Emergency Medical Services operating in the Republic of South Africa, excluding the South African National Defence Force; and
 - (b) the South African Military Health Services when providing a service within the civilian environment to non-military patients.

LICENCING

- 3. (1) A person, organisation or organ of state may not establish, operate, extend, manage, control, change ownership, rename, temporarily or permanently relocate the resources, or alter the services:
 - (a) an Emergency Medical Service;
 - (b) an Aeromedical Service;
 - (c) an Event Medical Service;
 - (d) a Volunteer Emergency Medical Service; or
 - (e) an Education Institution Emergency Medical Service;
 - (2) The minimum licensing category shall be Intermediate Life Support:
 - (a) an Emergency Medical Service that is licensed at either Intermediate Life Support level, or Advanced Life Support level, shall be allowed to operate up to, but not exceeding, 50% of the ambulances operated by the Emergency Medical Service at Basic Life Support level; and
 - (b) the remaining 50% of the ambulances being operated by the Emergency Medical Service shall be operated at either Intermediate Life Support level, or Advanced Life Support level, or a combination of thereof.

- (3) The Head of Department may only issue a licence if the service has been inspected by an inspecting officer and found to be in compliance with Annexures A and B and suitable and adequate for the purpose of providing a service in respect of the licence application.
- (4) A Volunteer Emergency Medical Services is required to comply with the requirements for licensing of an Emergency Medical Service with the exclusion of Sections 2(b) and 5(c) in Annexure A.
- (5) Private Emergency Medical Services (excluding Event Medical Services) may only provide emergency medical service within the demarcated boundary within a health district as specified in their application for a licence and in which their base/s are located unless transporting patients between health establishments or if requested by the Head of Department.

APPLICATION FOR A LICENCE

- 4. (1) An application for the licensing of an Emergency Medical Service must be:
 - (a) submitted on the prescribed form (Annexure C) to the Head of Department for the Province where the service will operate;
 - (b) accompanied by the required supporting documents;
 - (c) accompanied by the prescribed application and inspection fees as per Annexure D;
 - (d) Volunteer Emergency Medical Services are only required to pay annual licensing fees per response vehicle and/or ambulance as stipulated in Annexure D.
 - (2) An application submitted in terms of subregulation (1)(a) must be an original application delivered by hand or by registered mail to the Head of Department.

- (3) An applicant may withdraw the application at any time before it has been evaluated by the Committee. If an applicant withdraws the application after the Committee has considered it, the application fee will be forfeited.
- (4) The Head of Department may, on the receipt of an application issue a temporary licence valid for a period of six months in the event of a licensed vehicle being relocated from one Province to another, except for when such movement occurs in the course of an inter-provincial patient transfer:
 - (a) a temporary licence shall be issued within 14 days of application;
 - (b) a temporary licence may not be renewed;
 - a temporary licence shall be deemed to have expired in the event that an application for a licence is refused or if an application for a licence is withdrawn;
 - (d) in the case of a temporary licence issued in the event of a licensed vehicle moving from one Province to another, only the prescribed annual licencing fee shall be applicable.
- (5) An application received without proof of payment of the application fee:
 - (a) shall not be processed until the application fee is paid;
 - (b) if the application fee is not paid within 30 days of submission of the application, the applicant must provide valid reasons in writing to the Head of Department as to why the deadline has not been met;
 - (c) the Head of Department may then pend the application for a period not exceeding 90 days after which period, if the application fee has still not been paid, the application may be considered to have been withdrawn.

(6) An applicant submitting an application for the licensing of an Emergency Medical Service must have a base or station which adheres to the minimum norms and standards provided for in Annexure A.

PROCESSING OF THE APPLICATION

- 5. (1) On receipt of the application, the Head of Department must issue the applicant, by registered mail, with an acknowledgement of receipt of the application, which indicates the date on which the application was received.
 - (2) The Head of Department must:
 - (a) within 10 days of receipt of an application review the application to determine whether it has been properly completed or whether additional information is required; and
 - (b) concurrently place a notice in a local newspaper and in the gazette to inform the public of the application and invite public comment on the application providing a period of 21 days for such public comment.
 - (3) If the Head of Department is of the opinion that the application form as contemplated in Regulation 4(1) has been properly completed, he or she must, within 10 days, instruct an inspecting officer to inspect the Emergency Medical Service concerned.
 - (4) If the Head of Department is of the opinion that the application form has not been properly completed or that additional information is required, the Head of Department must inform the applicant, in writing, of the incompleteness of the application and request the applicant to properly complete the application form or supply the additional information required, as the case may be, by a specified date.
 - (5) If an applicant fails to properly complete an application form or to supply the additional information by the date specified by the Head of Department in terms of subregulation (4), the applicant must be regarded as having withdrawn the application.

- (6) The Licensing and Inspectorate Authority must carry out an inspection of the Emergency Medical Service and submit a written report on the findings relating to the inspection to the Committee within 25 days of the instruction of the Head of Department.
- (7) If an applicant fails to provide a date for inspection to the Licensing and Inspectorate Authority within 120 days of the date specified by the Head of Department in terms of subregulation (6), the applicant must be regarded as having withdrawn the application.
- (8) The Committee must make a recommendation within 20 days of receipt of the report on the findings of the inspection from the Licensing and Inspectorate Authority.
- (9) The Head of Department must, within 15 days of receipt of recommendations from the Committee, consider the recommendations and make a decision.
- (10) The Head of Department may, prior to taking a decision in terms of subregulation (9), refer an application back to the Committee for reconsideration of its recommendations:
 - (a) the Head of Department must give reasons in writing for referring an application back to the Committee;
 - (b) if the Head of Department refers the application back for reconsideration, the Committee must make its final recommendation on such an application within 20 days of the application being referred back to it.
- (11) The Head of Department must, within 10 days of receipt of a final recommendation in terms of subregulation (10), consider the recommendation in accordance with subregulation (9).
- (12) The Head of Department must, within 10 days of deciding on an application as contemplated by subregulations (9) or (10), inform the applicant in writing of the

- decision and, if the application is refused, give written reasons for the refusal and also inform the applicant of his or her right to appeal in terms of Regulation 25.
- (13) If the Head of Department has confirmed the Committee's recommendations that an application be approved, the Head of Department must issue a licence for the Emergency Medical Service to be registered in a register of Emergency Medical Services.

INSPECTION

- 6. (1) Inspections in terms of these Regulations are carried out in order to determine whether the service complies with Annexures A and B and is suitable and adequate for the purpose of providing the service for which it is or has applied to be licensed.
 - (2) Subject to a patient's right to privacy and confidentiality, the owner of an Emergency Medical Service or any other person responsible for the management or control of an Emergency Medical Service or who is in charge of the service, must provide to an inspecting officer acting in terms of these Regulations:
 - (a) the information that the inspecting officer may require with regard to the organisation and management of that Emergency Medical Service, including the accommodation, care and treatment of the patients;
 - (b) registers, clinical records and any other records of patients, staff and vehicles;
 - (c) any other information necessary to assess compliance with these Regulations, including with the requirements listed in Annexures A and B.
 - (3) The inspecting officer may request the submission of any other information, including but not limited to service performance data.
 - (4) In the case of an Emergency Medical Service operating multiple bases, the inspecting officer must take into consideration that items such as the registers and clinical registers may be held at another base or office which may be the primary base or head office of the Emergency Medical Service.
 - (5) Subject to a patient's right to privacy and confidentiality, a person may not:

- (a) in any way, obstruct an inspecting officer from carrying out her or his inspection;
- (b) refuse to furnish, to the best of her or his knowledge, information requested by the inspecting officer;
- (c) refuse when requested by the inspecting officer, to show any vehicle, apparatus or place;
- (d) refuse, when requested by the inspecting officer, to unlock a cupboard or storage compartment or area.

EMERGENCY MEDICAL SERVICES ADVISORY COMMITTEE

- 7. (1) The Head of Department must appoint members of the Committee.
 - (2) The Committee must advise and make recommendations on an application referred to in Regulation 4 as well as advise the Head of Department on matters concerning licensing.
 - (3) The Head of Department must determine the terms of reference of the Committee.
 - (4) The Committee must be comprised of at least seven members each with a minimum of 10 years experience in Emergency Medical Service for members referred to in subregulation (5) (c), (e) and (f).
 - (5) The Committee must at least consist of:
 - (a) one member nominated by the National Department of Health;
 - (b) one staff member of the Provincial Department, who must not be from the Emergency Medical Services component of the Provincial Department;
 - (c) one member who is a specialist in emergency medicine, or an appropriate allied specialist discipline;
 - (d) one member nominated by an organisation recognised in terms of the Organised Local Government Act, 1997 (Act No. 52 of 1997), to represent local government in the Province;

- (e) one member with extensive technical expertise from public Emergency Medical Services;
- (f) one member with extensive technical expertise from private Emergency Médical Services; and
- (g) one member representing health care users in the Province.
- (6) The Committee must recommend one of the members as the chairperson of the Committee to the Head of Department for appointment.
- (7) At the first meeting of the Committee:
 - (a) the chairperson must determine the procedure to be followed at the meetings of the Committee:
 - (b) the Committee must appoint a deputy chairperson;
 - (c) the Committee must establish a code of conduct for members.
- (8) The chairperson may, at any stage in the consideration of an application, call upon any person to participate in the proceedings of the Committee, if the chairperson is satisfied that that person will be able to assist the Committee to make a recommendation, but that person may not vote.
- (9) The chairperson must ensure that a full record is kept of attendance at, the proceedings of, and any resolutions taken at a meeting of the Committee.
- (10) The Committee must be convened as frequently as it may be necessary to deal with applications.
- (11) A quorum for a meeting is 50%+1 of the members of the Committee, but either the chairperson or deputy chairperson must always be present.
- (12) Voting:
 - (a) a decision of the majority of members present at a meeting of the Committee is a decision of the Committee; and

- (b) in the event of the number of votes leading to a tie, the chairperson or deputy chairperson presiding at the meeting has a casting vote.
- (13) The chairperson of the Committee must submit an annual report on the activities and expenditure of the Committee to the Head of Department within 60 days of the end of the financial year.
- (14) The Head of Department must pay members who are not employed by the State:
 - (a) remuneration; and
 - (b) allowances for reasonable actual subsistence and travelling expenses necessitated by the attendance of a meeting of the Committee, as determined by the MEC, with the concurrence of the MEC responsible for finance.

EXCLUSION OF MEMBERS OF THE COMMITTEE

- 8. (1) A member of the Committee may not be present during, or take part in, a discussion of, or the taking of a decision in respect of, or the making of recommendations on, an application before the Committee in which:
 - (a) that member or a spouse, immediate family member, business partner, associate or employer (other than the State), of that member; and/ or
 - (b) business partner, associate, immediate family member or employer (other than the State) of the spouse of that member, has a direct or indirect financial interest or has had such an interest during the previous 12 months.
 - (2) For the purpose of subregulation (1)(a):
 - (a) "spouse" means a person with whom the member lives as if they were married or with whom the member habitually cohabits; and
 - (b) "immediate family member" means a parent, child, brother, sister, brother-inlaw, sister-in-law, whether or not such a relationship results from birth, marriage or adoption.

- (3) A person may not, while he or she is a member of the Committee, accept any form of employment, gift or reward from a person who has a direct or indirect financial interest in an Emergency Medical Service, or a person who has applied for a licence in terms of Regulation 4.
- (4) Where a member of the Committee has a current or potential financial or other conflict of interest, such member must declare such conflict of interest to the chairperson of the Committee timeously and recuse himself or herself from any proceedings where such a conflict of interest may arise.

DECLARATION BY COMMITTEE MEMBERS

- 9. (1) A person who is appointed to the Committee in terms of Regulation 7(1) must, within 14 days of receiving notice of his or her appointment, submit a written declaration to the Head of Department, which must contain:
 - (a) any financial or other interest which is or may be related to, or is in conflict with, such an appointment; and/or
 - (b) relevant information about any conviction for an offence listed in Schedule1 to the Criminal Procedure Act, 1977 (Act No. 51 of 1977).
 - (2) Failure to submit the declaration referred to in subregulation (1)(a) will result in the appointment being suspended for a period not exceeding 60 days until the declaration is received.
 - (3) If a member of the Committee:
 - (a) experiences a change in financial or other interests which may affect his or her ability to consider any matter impartially, such a member must, within 10 days from the date of the changed circumstances and within a reasonable period prior to consideration of an affected matter, submit a written notice of such change of financial or other interests to the Head of Department; and
 - (b) fails to comply with paragraph (a), his or her appointment as a member may be revoked.

- (4) A declaration submitted must be for the sole purpose of determining whether such financial or other possible conflicts of interest may preclude the appointment of the person as a member or preclude his or her continued membership of the Committee.
- (5) The Head of Department must ensure that a declaration submitted is confidential and is not publicly disclosed.
- (6) A member of the Committee may not use his or her appointment as a member of the Committee to promote the financial or other interest of another person in relation to Emergency Medical Services.
- (7) A member of the Committee who:
 - fails to give truthful answers or provide the full declaration of financial or possible conflicts of interest;
 - (b) uses his or her appointment as a member of the Committee to promote the financial or other interest of any person; or
 - (c) fails to recuse himself or herself as contemplated in Regulation 8(4),

is guilty of an offence and liable, on conviction, to a maximum fine of R25 000.00 and must forthwith cease to be a member of the Committee.

TERMINATION OF MEMBERSHIP

- 10. (1) A member of the Committee may, at any time, resign as a member of the Committee by giving not less than 30 days written notice to the Head of Department.
 - (2) The Head of Department may terminate the appointment of a member of the Committee with immediate effect if the member:
 - (a) is or becomes an un-rehabilitated insolvent;
 - (b) fails to:
 - declare his or her financial interest or other conflicts of interests;

- (ii) recuse himself or herself where he or she or an immediate family member has an interest in the outcome of any decision to be made or made by the Committee.
- (c) is suffering from an infirmity of mind or body which prevents him or her from properly discharging his or her duties as a member of the Committee;
- (d) has engaged in conduct, which brings or could bring the Committee into disrepute or threatens the integrity of the Committee;
- fails to attend two consecutive meetings of the Committee without having been granted leave of absence by the chairperson;
- fails to carry out duties and functions of the Committee to the best of his or her ability;
- (g) contravenes Regulation 8(3).

CONSIDERATION OF APPLICATION FOR LICENCE

- 11. When considering an application for a licence, the Committee must consider the comments and responses received in respect of the application in order to determine whether there is a justifiable need for the proposed Emergency Medical Service and may take into account the following:
 - (a) the need to ensure consistency of health service development at national, provincial and local levels and the need to promote equitable distribution and rationalisation of health services with a view to correcting inequities based on racial, gender, economic and geographical factors and taking into account:
 - the demographic and epidemiological characteristics of the populations to be served;
 - (ii) the total and target population in the area;
 - (iii) the age and gender composition of the population;
 - (iv) the morbidity and mortality profiles of the population;
 - (b) the availability of existing Emergency Medical Services;
 - (c) the need to promote quality services which are accessible, affordable, cost-effective and safe:
 - (d) the potential advantages and disadvantages of the application for any affected communities;

- (e) the need to advance persons or categories of persons designated in terms of the Employment Equity Act, 1998 (Act No. 55 of 1998), the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003), the Cooperatives Act, 2005 (Act No. 14 of 2005) and the emerging small, medium and micro-enterprise sector, including cooperatives;
- (f) the potential benefits of training and research and development with a view to the improvement of health service delivery;
- (g) the need to ensure that ownership of Emergency Medical Services does not create perverse incentives for service providers to over service patients or refer them inappropriately;
- (h) where applicable, the quality of health services rendered by the applicant in the past.

RECOMMENDATIONS OF THE COMMITTEE

- **12.** Following an analysis of the application, the Committee may make the following recommendations to the Head of Department:
 - (a) that the licence be granted;
 - (b) the licence be granted subject to conditions which the Committee considers appropriate, including but not limited to the nature or extent of services to be provided by the Emergency Medical Service;
 - (c) that the application be refused.

DECISION OF THE HEAD OF DEPARTMENT

- 13. The Head of Department may make the following decisions:
 - (a) confirm the recommendation of the Committee;
 - (b) reject the recommendation of the Committee;
 - (c) confirm the recommendation to grant the licence and amend the conditions recommended by the Committee.

ISSUING OF LICENCE AND LICENCE TOKENS

- 14 (1) Upon an application for an Emergency Medical Service being granted, or conditionally granted, the Head of Department must:
 - (a) issue a licence to operate the service concerned; and
 - (b) issue a licence token for each vehicle to be used by that service as an ambulance, medical rescue vehicle or medical response vehicle.
 - (2) A licence contemplated in subregulation (1) (a) must contain the following:
 - (a) the name of the owner of the Emergency Medical Service;
 - (b) the name of the Emergency Medical Service;
 - (c) the geographical location of the base/s within the health district of the Emergency Medical Service;
 - (d) the type of service to be rendered by the Emergency Medical Service;
 - (e) the type and number of vehicles the Emergency Medical Service will operate;
 - (f) any other information which the Head of Department may consider necessary.
 - (3) A licence token contemplated in subregulation (1)(b) must contain the following:
 - (a) the name of the Emergency Medical Service;
 - (b) the registration number of the vehicle;
 - (c) the date on which the licence token was issued;
 - (d) the date on which the licence token expires;
 - (e) the type of vehicle.

DISPLAY OF LICENCE AND LICENCE TOKEN

- 15. The Emergency Medical Service Manager must ensure that:
 - (a) the licence referred to in Regulation 14(1)(a) is displayed in a conspicuous position at the primary base of head office of the Emergency Medical Service;
 - (b) the licence token referred to in Regulation 14(1)(b) is displayed in a conspicuous position on every vehicle that is licensed.

ANNUAL RENEWAL OF LICENCE AND LICENCE TOKEN

- **16.** (1) The licence and licence tokens of an Emergency Medical Service must be renewed every twelve (12) months.
 - (2) The renewal application must be submitted at least ninety (90) days prior to expiry of the licence.
 - (3) The annual renewal is subject to the successful inspection of such service in terms of Regulation 6.
 - (4) The inspection for annual renewal is subject to the payment of fees determined by the Minister in terms of Regulation 24.
 - (5) Upon the satisfactory inspection for the purpose of the annual renewal as provided for in Sub-regulation (2), the Head of Department must issue a licence and licence tokens compliant with regulations 14(1)(b) and 14(1)(b) respectively.

INSPECTION OF REGISTERED EMERGENCY MEDICAL SERVICE

- 17 (1) The Head of Department must ensure that every Emergency Medical Service is reinspected within 30 days of its licence being granted in order to determine whether the service complies with Annexures A and B and is suitable and adequate for the purpose of providing the service for which it is licensed.
 - (2) The Head of Department must, at least once in every calendar year in addition to the inspection in terms of subregulation (1), inspect or cause to be inspected, by a duly authorised inspecting officer, every Emergency Medical Service registered in terms of these Regulations in order to determine whether the service complies with Annexures A and B and is suitable and adequate for the purpose of providing the service for which it is licensed.
 - (3) The Head of Department may, whenever it is considered necessary, in writing instruct the Licensing and Inspection Authority to carry out any additional inspections in order to determine whether the service complies with Annexures A and B and is

suitable and adequate for the purpose of providing the service for which it is licensed.

MANAGEMENT OF AN EMERGENCY MEDICAL SERVICE

- 18 (1) An Emergency Medical Service must appoint, in a full time capacity, an Emergency Medical Services Manager who is qualified and registered with the Health Professions Council of South Africa, as at least an Ambulance Emergency Assistant, to manage the service.
 - (2) Volunteer Emergency Medical Services must appoint an Emergency Medical Services Manager who is qualified and registered with the Health Professions Council of South Africa, as at least an Ambulance Emergency Assistant, to manage the service.
 - (3) The Emergency Medical Service Manager must:
 - ensure that the number of patients conveyed in an ambulance does not exceed the maximum number permitted in terms of its design and safety constraint provisions;
 - (b) ensure that the Emergency Medical Service is operated in a way that provides quality care and does not compromise the safety of the public, patient or personnel;
 - (c) keep patient records confidential, as required by law and the ethical rules of the HPCSA;
 - (d) inform the Head of Department within 30 days of any change in the particulars furnished by or on behalf of the licence holder in terms of these Regulations;
 - (e) ensure that a patient is not refused emergency care by the Emergency Medical Service because of the patient's inability to pay, or on any other grounds;
 - (f) ensure that protocols exist for immediate intervention in the event of the exposure of personnel to situations of a hazardous, biological, chemical, psychological or physical nature;
 - (g) maintain a formal set of standard operating procedures that staff members shall adhere to;

- (h) promote safe driving techniques as well as awareness of defensive driving techniques;
- ensure that every vehicle operated by the Emergency Medical Service is fitted with a satellite tracking device that is capable of live satellite tracking, including current location, speed and route travelled and shall be capable of generating historic reports;
- ensure that the Emergency Medical Service maintains valid calibration certificates for the relevant equipment in use by the Emergency Medical Service as prescribed in Annexure B;
- (k) ensure that every ambulance manufactured on, or after, the implementation date of these Regulations is in compliance in terms of the South African National Standards (SANS) Regulations by a registered vehicle manufacturer;
- ensure that every vehicle is in a road worthy condition as per the relevant Road
 Traffic legislation;
- (m) ensure that the Emergency Medical Service maintains copies of each of the following documents for every ambulance manufactured on, or after, the implementation date of these Regulations:
 - (i) Manufacturer / Importer / Builder (MIB) Certificate of the manufacturer, importer or builder of the ambulance;
 - (ii) Builder's Certificate for each ambulance:
 - eNaTIS Certificate for each ambulance as issued by the manufacturer of the ambulance.
- ensure that scheduled medication is stored and recorded as per the Medicines and Related Substance Act,1965 (Act No. 101 of 1965) and Pharmacy Act; 1974, (Act No. 53 of 1974);
- ensure that all Emergency Care Personnel are registered with the HPCSA and practise within the HPCSA's scope of practice and that patients should not be over serviced for financial gain;
- (p) must ensure and maintain good conduct and high levels of professionalism;
- (q) must comply with the provisions for emergency driving in accordance with the Road Traffic Bylaws;
- (r) must ensure that in multiple patient situations, patients are treated and transported according to the triage priority and comply with the carrying capacity of the ambulance; and

(s) shall retain ultimate responsibility for ensuring ethical behaviour of Emergency Care Personnel.

INFORMATION CONCERNING THE EMERGENCY MEDICAL SERVICE

- 19 (1) The Emergency Medical Service Manager must ensure that an individual patient care record is kept for every patient treated or conveyed by the service.
 - (2) The Emergency Medical Service Manager must ensure that the following information is captured on a monthly basis, properly secured and readily available to be provided at the request of an Inspecting Officer or the Head of Department:
 - (a) response time performance appropriately categorised into the response categories for urban and rural areas;
 - (b) the names, qualifications, relevant HPCSA registration details and number of hours worked per month of employees, contractors and volunteers;
 - (c) a file for each staff member employed by the service with the following, as a minimum:
 - (i) copy of the identity document for each staff member;
 - (ii) copy of Drivers Licence and Professional Drivers Permit;
 - (iii) copy of a pay slip for each month;
 - (iv) copy of completed IRP 5 forms;
 - (d) proof of registration for every staff member with:
 - (i) Compensation for Occupational Injuries and Diseases Fund;
 - (ii) Pay As You Earn;
 - (iii) Skills Development Levy;
 - (iv) Unemployment Insurance Fund;
 - (e) proof of the number of ambulances and response vehicles in the service;
 - (f) a record of the number and nature of adverse patient incidents;
 - (g) the monthly staff shift rosters; and
 - (h) a record of complaints received and the resolutions thereof.

SUSPENSION AND/OR CANCELLATION OF LICENCE

- 20 (1) If an Emergency Medical Service contravenes or does not comply with these Regulations, the Head of Department must give written notice of the non-compliance to the licence holder.
 - (2) The notice must state:
 - (a) the nature and extent of the non-compliance which must be rectified;
 - that failure to rectify the non-compliance within a period specified in the notice may lead to the cancellation or suspension of the licence;
 - (c) that the licence holder is entitled to make written representations to the Head of Department, within a period specified in the notice, regarding the proposed cancellation or suspension of the licence.
 - (3) If, at the expiry of the period specified in terms of subregulation (2)(b), the non-compliance has not been rectified to the satisfaction of the Head of Department, he or she may, having regard to all the relevant facts, including the report of the inspection officer and any representation by the licence holder, cancel or suspend the licence of the Emergency Medical Service.
 - (4) If the licence is cancelled or suspended, the Head of Department must within 10 days inform the licence holder in writing of:
 - (a) the decision;
 - (b) the reasons for the decision; and
 - (c) the right of appeal.

REINSTATEMENT OF LICENCE AND LIFTING OF SUSPENSION

- 21 (1) An Emergency Medical Service whose licence has been cancelled or suspended may, at any time, apply for the reinstatement of the licence or the lifting of its suspension.
 - (2) The provisions of Regulation 4 apply, with the changes required by the context, in respect of the application for the reinstatement of a licence.

- (3) Before the Head of Department reinstates a licence or lifts its suspension, an inspecting officer must inspect the Emergency Medical Service concerned in order to determine whether the service complies with Annexures A and B and is suitable and adequate for the purpose of providing the service for which it is licensed and make a recommendation to the Head of Department.
- (4) The Head of Department may submit the representation for the reinstatement of the licence or the lifting of the suspension to the Committee for further consideration and recommendation.

AMENDMENT OF LICENCE

22. In order to change the level of service provision for which a licence has been issued, a licence holder must apply to the Head of Department to amend the licence accordingly. The provisions of Regulations 4 and 5 apply, with the changes required by the context, in respect of the application for the amendment of a licence.

CHANGE OF OWNERSHIP

- 23. (1) A licence for an Emergency Medical Service may not be transferred.
 - (2) If an Emergency Medical Service is transferred or sold to a new owner:
 - (a) the new owner must submit an application in terms of Regulation 4.
 - (b) the new owner shall not be permitted to operate until a new licence or temporary licence has been issued.

FEES

- 24. (1) The Minister must from time to time determine the applicable fees and publish such fees by notice.
 - (2) An applicant may make representations to the respective Head of Department for a waiver of the applicable fees.

- (3) The fee for renewal of a licence is payable each year on completion of the annual inspection contemplated in Regulation 6.
- (4) The renewal licence and licence tokens must not be issued until proof of payment of the relevant fee is submitted.

APPEAL

25. (1) A person who:

- (a) has applied for a licence for an Emergency Medical Service or for the renewal of such licence, and whose application has been refused; or
- (b) whose licence has been cancelled or suspended,

may lodge an appeal, in writing, to the MEC within 30 days of being notified of the refusal, cancellation or suspension, and give reasons for the appeal.

- (2) The MEC must, within 30 days of receipt of an appeal, submit a copy of the appeal to the Head of Department.
- (3) The Head of Department must, within 30 days of receipt of a copy of an appeal, submit a response to the appeal to the MEC.
- (4) The MEC may appoint up to three independent and suitable persons, who are not employees of the Department or members of the Committee, to advise the MEC on the appeal.
- (5) The MEC may uphold or refuse an appeal and may, in the event that the appeal is upheld, replace the decision of the Head of Department and grant the application.
- (6) An appeal must be finalised within 60 days of the date on which the Head of Department submits a response to the MEC in terms of subregulation (3).
- (7) The MEC must communicate the decision on the appeal to the appellant in writing and, if the appeal is refused, give the reasons for the refusal of the appeal:

- (a) if the MEC upholds an appeal, this decision, together with the reasons for the decision, must be communicated to the Head of Department in writing;
- (b) the Head of Department must make the necessary entry in the register for Emergency Medical Services.

EXEMPTIONS

26. The Head of Department may, at any time and on such conditions and for such period as he or she may determine, but not longer than three months, grant in writing an organization or body an exemption from any requirements of these Regulations, provided the exemption would not adversely impact on patient care. Any exemption granted in terms of this Regulation and reasons for granting the exemption must be reflected in the Register of Emergency Medical Services.

POWERS OF EMERGENCY CARE PERSONNEL

- 27. Emergency Care Personnel may, whenever they regard it necessary or expedient in order to perform their functions of saving life or preventing bodily harm, perform any act reasonably necessary in order to enable them to perform their functions, and may also, subject to the applicable law:
 - (a) close any road or street;
 - (b) enter or break into any premises;
 - (c) damage or destroy any property;
 - (d) cause to be removed from the scene any person who is dangerous, or in danger, or who obstructs the Emergency Care Personnel in the performance of his or her duties; and
 - (e) cause to be removed from the scene any Emergency Care Personnel that refuses appropriate levels of care to a patient that requires higher qualification intervention.

OFFENCES AND PENALTIES

28. A person who:

- establishes, operates, extends, manages, controls, changes ownership, renames, temporarily or permanently relocates the resources, or alters the services of an Emergency Medical Service without a licence;
- (b) fails to renew a licence to provide an Emergency Medical Service;
- (c) is the responsible person for, or is employed by an Emergency Medical Service and who:
 - obstructs or refuses to allow the inspection officer or a person acting on its behalf, access to such Emergency Medical Service for the purpose of an inspection in terms of these Regulations;
 - (ii) fails to comply with the provisions of these Regulations;
 - (iii) obstructs or prevents access of Emergency Care Personnel to a patient in a situation requiring emergency care;
 - (iv) behaves, or allows staff members to behave (in the case of a responsible person), in a manner that shall be fairly deemed to be bringing the industry into disrepute;
 - (v) conducts clinical procedures that are not within the scope of practice for the relevant Emergency Care Personnel as defined by the Health Professions Council of South Africa;
 - (vi) has knowledge of a situation requiring emergency care and wilfully or negligently withholds relevant information from (an) Emergency Medical Service(s);
- (d) abuses or summons a service while he or she knows that there is no reason to do so;
- (e) displays on, or fits an unlicensed vehicle in terms of these Regulations with:
 - (i) a siren;
 - (ii) red flashing lights;
 - (iii) the "star of life" symbol or other symbols, emblems, logos, heraldic devices, marks, words or phrases in a way associated with Emergency Medical Services:
 - (iv) the phrases, "Paramedic", "Emergency Medical Services", "Emergency Care Practitioner", "ECP", "Advanced Life Support", "ALS", "Intermediate Life Support ", "ILS", "Emergency Care Technician", "ECT", "Emergency Care Assistant", "ECA", "ambulance", "Emergency Medical Response",

- "Basic Ambulance Assistant", "BAA", "Basic Life Support", "BLS", or a derivative thereof.
- (f) displays the word "Paramedic", "Intensive Care Unit", "ICU", or the phrase "Advanced Life Support", "ALS" or "Emergency Care Practitioner", "ECP", on a vehicle where such vehicle is not:
 - staffed by at least one person registered as a medical practitioner, emergency care practitioner or paramedic with the HPCSA;
 - (ii) equipped to provide an Advanced Life Support service;
 - (iii) licensed in terms of these Regulations as an ambulance, medical response vehicle or medical rescue vehicle;
- (g) impersonates Emergency Care Personnel;
- (h) obstructs Emergency Care Personnel in the performance of their functions in terms of Regulation 27;

is guilty of an offence and liable, on conviction

- to a fine not exceeding R500 000.00; or imprisonment for a period not exceeding five (5) years; or both such fine and imprisonment for a period not exceeding five (5) years; or
- the penalties as may be determined by the Minister that may be imposed in terms of the National Health Act, 2003 (Act No. 61 of 2003).

DELEGATIONS

- 29. The Head of Department may delegate a power or function conferred or imposed upon her or him in terms of these Regulations to an official, except:
 - (a) the power to decide on an application in terms of these Regulations;
 - (b) the power to cancel or suspend a licence in terms of Regulation 20(3);
 - (c) the duty to respond to an appeal in terms of Regulation 25(3).

AMENDMENT OF SPECIFIC REQUIREMENTS

30. The Minister may by notice in the gazette, amend the requirements contemplated in Annexures A, B, C and D.

TRANSITIONAL PROVISIONS

- 31. (1) An Emergency Medical Service which is operational before the commencement of these Regulations must be allowed to continue to provide services for a maximum period of one year after the commencement of these Regulations.
 - (2) The Emergency Medical Service referred to in sub-regulation (1) must be licensed in terms of these regulations before it may continue to operate after the period of one year following the commencement of these Regulations.
 - (3) Failure to licence an Emergency Medical Service referred to in subregulation (1) constitutes an offence as provided for in Regulation 28(a).

REPEAL

32. The Emergency Medical Services Regulations, 2015, published in Government Notice No. R413, Government Gazette No. 38775 dated 8 May 2015 are hereby repealed.

SHORT TITLE

33. These Regulations are called the Emergency Medical Services Regulations, 2016.

Annexure A



REQUIREMENTS FOR EMERGENCY MEDICAL SERVICES

1) SERVICE LEVELS

- a) An Emergency Medical Service will operate in accordance with its licence, and the infrastructure shall be capable of supporting it over the period of its intended operation.
- b) Emergency Medical Services must be registered to provide services within the following categories:

 - i) basic life support andii) intermediate life support and/or
 - iii) advanced life support and/or
 - iv) aeromedical service and/or
 - v) event medical service and/or
 - vi) education institution Emergency Medical Service and/or
- c) Where such service requires in addition to provide medical rescue services it shall ensure that it has personnel trained in accordance with courses approved by the HPCSA and be in possession of the appropriate specialised rescue equipment.

2) GENERAL REQUIREMENTS

- a) The service must be supervised by an Emergency Medical Service Manager who is qualified in at least Ambulance Emergency Assistant and registered with the HPCSA.
- b) The service must have a base or station that:
 - i) has rest facilities:
 - ii) is available 24 hours per day;
 - iii) has permanent, plumbed, clean and hygienic ablution facilities.
- c) There must be available:
 - i) sluice facilities with which to clean contaminated equipment and linen; and
 - ii) vehicle washing facilities which have the appropriate medical waste traps built in that comply with Local Municipal By-laws.
- d) There must be an adequate medical waste management system and the Emergency Medical Service must have contractual proof of a current agreement with a registered waste management disposal company for the disposal of such medical waste.

- e) Medical store room that complies with the requirements for the safe storage of medicines and pressurised vessels as per the relevant legislation.
- f) The Emergency Medical Service must be registered in accordance with the appropriate legislation:
 - in the case of private sector services, the applicant must be registered as a company in terms of the Companies Act, 2008 (Act No. 71 of 2008); and registered with the Board of Healthcare Funders;
 - ii) In the case of a Volunteer Emergency Medical Service the applicant must be registered as a Non Profit Organisation, as well as a Public Benefit Organisation as per the relevant Act or Regulation.
- g) Proof of adequate liability insurance must be available for the said Emergency Medical Service.
- h) An Emergency Medical Service must operate according to the Ethical and Professional Rules of the HPCSA and the Ethical Guidelines for good practice in the health care professions. The Responsible Person, Supervising Medical Practitioner and Emergency Service Manager must at all times be in good standing with the HPCSA.

3) PERSONNEL

- a) A minimum of two persons shall staff an ambulance or medical rescue unit, and a minimum of one person shall staff a medical response vehicle.
- b) Personnel shall be registered with the HPCSA as determined by the level of service offered and shall be as follows:

i) Basic Life Support

(1) Personnel shall be registered as a Basic Ambulance Assistant.

ii) Intermediate Life Support

(1) The patient attendant shall be registered as an Ambulance Emergency Assistant, whilst the second crew shall hold a minimum registration of Basic Ambulance Assistant.

iii) Advanced Life Support - Ambulance

(1) The patient attendant shall hold a minimum registration of Paramedic whilst the second crew shall hold a minimum registration of Basic Ambulance Assistant, though it should preferably be a person holding a minimum registration of Ambulance Emergency Assistant.

iv) Medical Response Unit

(1) This unit shall be staffed with at least one staff member, who shall hold a minimum registration with the HPCSA of Ambulance Emergency Assistant.

v) Medical Rescue

- (1) Both personnel shall be registered with the HPCSA and at least one of the personnel shall hold a minimum registration of Ambulance Emergency Assistant.
- (2) In addition to this both personnel shall hold a minimum qualification of Basic Medical Rescue, as approved by the HPCSA.

vi) Aeromedical Service

- (1) The senior medical staff member on the air ambulance shall be registered in the category of at least a Paramedic with the HPCSA, who shall hold valid CAT 138, Aviation Health Care Provider, Advanced Cardiac Life Support, Intermediate Trauma Life Support or Advanced Trauma Life Support and Paediatric Advanced Life Support certificates.
- c) The crew of an ambulance, medical response unit or medical rescue unit shall hold an appropriate valid driver's licence and, in the case of a patient carrying vehicle both the second crew as well as the patient attendant shall also be in possession of a valid professional driving permit which shall be in the category "Passengers".
- d) All personnel shall be dressed in appropriate uniform protective clothing, with their first name or initial, surname and registration category clearly depicted on the said clothing.
- e) Emergency Care Personnel shall at all times, remain in the company of the patient while he/she is in the care of the Emergency Medical Service or until hand over at a health establishment.
- f) Emergency Care Personnel must not exceed the maximum working hours as per the regime of shift workers as guided by the Basic Conditions of Employment Act, 57 of 1997 and the Public Service Regulations, 2001 as amended and as applicable.

4) MINIMUM STAFF REQUIREMENTS

a) An Emergency Medical Service shall employ the following, minimum number of operational staff members:

i) Advanced Life Support

- (1) In a health district where the total population is more than 150 000 persons as described by Statistics South Africa in the most recently published "Census" report, an Emergency Medical Service licensed at Advanced Life Support level shall ensure that a Paramedic registered with the HPCSA, is staffing at least one vehicle per operational shift at all times.
- (2) In a health district where the total population is less than or equal to 150 000 persons as described by Statistics South Africa in the most recently published "Census" report, an Advanced Life Support service should employ at least one registered Paramedic.

ii) Intermediate Life Support

(1) An Emergency Medical Service should employ a minimum of one Ambulance Emergency Assistant per ambulance licensed to the respective Emergency Medical Service at all times for all ambulances that are intended to be operated at intermediate life support level. (2) This shall be in addition to the Emergency Medical Service Manager.

iii) Second Staff Member on an Ambulance

(1) The minimum staffing requirement for the second staff member on an ambulance shall be a person registered in the category Basic Ambulance Assistant with the HPCSA.

iv) Nurses

- (1) A nurse may assist a fully staffed ambulance with a minimum of two ambulance crew members that are registered at a minimum level of Basic Ambulance Assistant.
- (2) The nurse shall not be considered to be one of the two staff members required to staff the ambulance, unless the nurse in question holds dual registration with both the Health Professions Council of South Africa (HPCSA) as well as South African Nursing Council (SANC).

v) Supervising Medical Practitioner

- (1) One Supervising Medical Practitioner with suitable emergency medical qualifications and experience must be appointed to or contracted by the service for each health district in which it operates.
- (2) A Supervising Medical Practitioner must not be contracted to more than three Emergency Medical Services simultaneously.
- (3) The Emergency Medical Service must hold a current, written, service level agreement with the supervising medical practitioner that confirms that the supervising medical practitioner is available to assist with clinical governance, medical advice as well as supervision and training, where necessary.

5) VEHICLES

- a) All Emergency Medical Service vehicles utilised shall comply with the National Road Traffic Act or the relevant vehicle registration and safety legislation, as applicable.
- b) Ambulances shall:
 - be configured in such a way that the medical personnel have complete access to a patient in order to begin and maintain life support;
 - be fitted with a two way radio and/or cellular communication system which allows for communication at all times with the dispatch centre;
 - iii) be fitted with red warning lights that shall be visible from the front, rear and both sides of the vehicle at all times, and siren in accordance with the relevant vehicle registration and safety legislation;
 - iv) display the word "Ambulance" on the front and rear of all ambulances and shall adhere to the following minimum dimensions: 600mm X 150mm; or large as possible proportionate to make of the vehicle.

- v) be configured in such a way that the interior of the patient compartment, excluding the driver's cab section, shall be a minimum of-
 - (1) height 1222mm;
 - (2) width 1333mm;
 - (3) length 1900mm;
- vi) be configured in such a way that adequate, permanently installed lighting is provided in the patient compartment:
- vii) have installed within the ambulance a minimum of a 2 000 watt electrical inverter, capable of providing a 220 volt power supply to the patient treatment compartment of the vehicle:
- viii) have an adequate entry that allows for the loading/off loading of the patient without compromising the condition of the patient;
- ix) be configured in such a way that a patient can be carried in the supine position with specialised medical equipment fitted;
- x) have an approved restraining device fitted for all patients and emergency care personnel;
- xi) have a stretcher restrained with a restraining device, approved by the manufacturer of the stretcher, which shall be permanently fitted to the vehicle and shall restrain both the front and rear of the stretcher;
- xii) have a stretcher that is secured in such a way that it allows medical personnel clear view of, and access to, the patient and specialised medical equipment;
- xiii) have a stretcher that is fitted in such a way that it does not block the entry or emergency exits of the vehicle;
- xiv)have a stretcher that is fitted in such a way that it does not block access to the airway of the patient and in such a way that the performance of advanced airway techniques will not be hindered;
- xv) be configured in such a way that medical equipment and medical gas cylinders are secured in brackets that are attached to the body of the vehicle and do not allow any vertical or horizontal movement of the medical equipment or medical gas cylinders within the compartment of the ambulance;
- xvi)be configured in such a way that medical equipment and medical gas cylinders are fitted in such a way that they do not obstruct the entry or emergency exits of the vehicle or pose a potential threat to personnel or patients;
- xvii) have medical gas cylinders and outlets marked in accordance with SANS Codes of Practice and that have been subjected to visual and hydrostatic inspection by a Department of Labour approved testing facility;

- xviii) have an adequate supply of convenient hanging devices that are fitted for intravenous therapy - such shall be fitted in such a way as not to inflict injury to patients or medical personnel;
- xix)have a patient compartment that is lined with a non-porous material to avoid blood and other body fluids from contaminating the area, and allows for the cleaning of the compartment;
- xx) have surfaces and equipment within the ambulance free from the visible appearance of any and all contaminants including but not limited to: dust, dirt, blood, faeces, urine, vomit, human tissue or any other bodily fluid;
- xxi)have a patient compartment separated from the driver compartment in such a way that the patient, treatment of the patient, and actions of the patient shall in no way interfere with the driving of the vehicle;
- xxii) in the case of a vehicle with a gross vehicle mass which exceeds 3 500kg, be fitted with retro-reflective red and retro-reflective yellow chevron strips on the rear of the vehicle, as required by the relevant National Road Traffic Act;
- xxiii) in the case of a vehicle with a gross vehicle mass which exceeds 3 500kg, be fitted with yellow, retro-reflective strips to both the sides of the vehicle as well as the rear of the vehicle, in addition to the chevron, which shall be fitted no more than 600mm from the lower part of the body of such vehicle, as required by the relevant National Road Traffic Act;
- c) The number of emergency medical response vehicles registered to an Emergency Medical Service may not exceed the number of ambulances registered to that Emergency Medical Services;
- d) The vehicles included on the licence for the Emergency Medical Service must be listed as being owned by the applicant of an Emergency Medical Service and registered in the category "Owner" on the "Certificate of Registration" as per the National Road Traffic Act or other relevant vehicle registration and safety legislation.
- Each vehicle operated as an ambulance, medical response vehicle or medical rescue vehicle must be clearly marked, licensed, registered as per the National Road Traffic Act or relevant vehicle registration and safety legislation and in accordance with nationally approved livery.
- f) Livery that is not reflective of the functions of an emergency medical service will not be approved.

6) EMERGENCY TELEPHONE NUMBER

a) Every emergency vehicle operated by the emergency medical service shall display the 24 hour emergency telephone number of the respective ambulance service on the rear and both sides of the respective emergency vehicle and shall adhere to the following minimum dimensions:

- i) ambulance: 600mm x 150mm;
- ii) medical response vehicle: 300mm x 90mm;
- iii) medical rescue vehicle: 300mm x 90mm.

7) LICENCE TOKEN

a) All ambulances, medical response vehicles and medical rescue vehicles operated by the Emergency Medical Service should display a valid licence token in a prominent position on the windscreen of the ambulance where it is easy to view in terms of the National Road Traffic Act.

8) AEROMEDICAL SERVICE

a) In the case of an aero-medical service, the aircraft operator shall hold the appropriate G7 licence and CATS/Part 138 accreditation as specified by the Civil Aviation Authority of South Africa.

9) COMMUNICATION SYSTEM

a) All Emergency Medical Services must have an appropriate communication system that allows for easy communication between the base or station and vehicles.

10) COMPLAINTS MECHANISM

a) All Emergency Medical Services must have an appropriate complaints mechanism that aligns with the National Complaints Management Protocol for the Public Health Sector of South Africa, 2014 the details of which must made available to EMS users, including by the clearly visible posting of such details in each vehicle and at each EMS base or station.

11) EQUIPMENT

 a) All ambulances, medical response vehicles and medical rescue vehicles shall have, as a minimum, the equipment as listed in Annexure B.

Annexure B



EQUIPMENT REQUIREMENTS FOR EMERGENCY MEDICAL SERVICES

Airway Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Oropharyngeal Airway Nos. 00,0,1,2,3,4	2 each	2 each	2 each	2 each	2 each	2 each	2 each
Hard Suction Catheter (Paediatric)	2	2	2	2	2	2	2
Neonatal Suction Catheters Size No. 5 FG	2	2	2	2	2	2	2
Neonatal Suction Catheters Size No. 6 FG	2	2	2	2	2	2	2
Neonatal Suction Catheters Size No 8 FG	2	2	2	2	2	, 2	2
Paediatric Suction Catheter Size No. 10 FG	1	1	1	1	1	1	1
Adult Suction Catheter Size No. 12 FG h	1	1	1	1	1	1	1
Adult Suction Catheter Size No. 14 FG	1	1	1	1	1	1	1
Neonatal Suction Catheters Size No. 5 FG	1	1	1	1	1	1	1
Neonatal Suction Catheters Size No. 6 FG	1	1	1	1	1	1	1
Neonatal Suction Catheters Size No 8 FG	1.	1	1	1	1	1	1
Paediatric Suction Catheter Size No. 10 FG	0	1	OPTIONAL.	1	1	OPTIONAL	OPTIONAL
Adult Suction Catheter Size No. 12 FG	0	0	1	0	0	1	1
Adult Suction Catheter Size No. 14 FG	2	2	2	2	2	2	2
Portable Suction Apparatus (Combination of Battery and Electrically Operated)	2	2	2	2	2	2	2
Manual Hand Operated Portable Suction Apparatus (As a back up device)	2	2	2	2	2	. 2	2
Stethoscope (Combination of diaphragm and bell type head)	1	1	1	1	1	1	1

Endotrachael Intubation Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Laryngoscope set for adult and paediatric including the following:							
Handle with batteries in full working condition	0	0	1	0	0	1	1
Batteries - spare for laryngoscope	0	0	2	0	0	2	2
Size 0 blade	0	0	1	0	0	1	1
Size 1 blade	0	O	1	. 0	0	1	1
Size 2 blade	0	0	1	0	0	1	1
Size 3 blade	0	0	1	0	0	1	1
Size 4 blade	0	0	1	0	0	1	1
Size 5 blade	0	0	OPTIONAL	0	0	OPTIONAL	OPTIONAL
Disposable, sterile ET tubes including the following:							
Size 2.5 mm ID ET tube	0	0	2	0	0	2	2
Size 3 mm ID ET tube	0	0	· 2	0	0	2	2
Size 3.5 mm ID ET tube	0	0	2	0	0	2	2
Size 4 mm ID ET tube	0	0	2	0	0	2	2
Size 4.5 mm ID ET tube	0	0	2	0	0	2	2
Size 5 mm ID ET tube	0	0	2	0	0	2	2
Size 5 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 5.5 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 6 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 6.5 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 7 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 7.5 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 8 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Size 8.5 mm ID ET tube (cuffed, high volume, low pressure)	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 1	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 1.5	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 2	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 2.5	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 3	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 3.5	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 4	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 4.5	0	0	2	0	0	2	2
Sub-glottic Laryngeal Mask (LMA), size 5	0	0	2	0	0	2	2
Small ET tube introducer	0	0	1	0	0	1	1

Large ET tube introducer	0	0	1	0	0	1	1
Gum Elastic Bougie	0	0	1	0	0	1	1
Magill forceps - Adult	0	1	1	1	1	1	1
Magill forceps - Paediatric	0	1	1	1	1	1	1
10ml syringes	0	0	1	0	0	1	1
20ml syringes	0	0	2	0	0	2	2
Pair sharp, clean scissors	0	0	1	0	0	1	1
1m Tape / ET tube securing device	0	0	2	0	0	2	2
Water soluble lubricant gel	0	0	2	0	0	2	2
Xylocaine spray	0	0	1	0	0	1	1
Heimlich type Flutter valves	0	. 0	2	0	0	2	2
Heat moisture exchanger valve for ventilated patients	0	0	1	0	0	1	1

		- 1					
Breathing / Ventilation Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Adult oxygen masks providing 40% inhaled oxygen with tubing	4	4	4	4	4	4	4
Adult non-rebreather masks providing 100% inhaled oxygen with tubing	2	2	2	2	2	2	2
Adult oxygen nebuliser masks including tubing and fluid reservoir	2	2	2	2	2	2	2
Nasal cannula with tubing	2	2	2	2	2	2	2
Paediatric oxygen masks providing 40% inhaled oxygen with tubing	2	2	2	2	2	2	2
Paediatric non-rebreather masks providing 100% inhaled oxygen with tubing	2	2	2	2	2 .	2	2
Paediatric oxygen nebuliser masks including tubing and a fluid reservoir	2	2	2	2	2	2	2
Oxygen T-Piece with tubing	2	2	2	2	2	2	2
Adult Bag-Valve-Mask with Reservoir and adult mask (size 4)	1	1	1	1	1	1	1
Paediatric Bag-Valve-Mask with Reservoir and paediatric mask (size 1)	1	1	1	1	1	1	1
Neonatal Bag-Valve-Mask with Reservoir and neonatal mask (size 0)	1	1	1	1	1	1	1
Oxygen Humidification Device	1	1	1	0	0	1	1

Specific requirements: Unless otherwise stated, all equipment listed below is per vehicle and not per operational base.

Oxygen Supply	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Minimum of a portable oxygen cylinder. Size "D"	2	2	2	2	2	2	2
Portable oxygen cylinder gauge with flow meter	1	1	1	1	1	1	1
Fitted oxygen cylinder/s, size "F" capable of supplying a minimum of 30 minutes of oxygen at a flow rate of at least 15 litres per minute.	2	2	2	0	0	0	2
Fitted oxygen cylinder gauge with flow meter	1	1	1	0	0	0	1

EQUIPMENT REQUIREMENTS FOR EMERGENCY MEDICAL SERVICES

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Ventilator	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Mechanical volume cycled ventilator with PEEP valve & pressure relief valve, with appropriate fitting allowing connection to fitted oxygen supply within the ambulance, including the following features (requires annual calibration certification):	0	0	1	0	0	1	1
Volume and pressure control:							
• Volume							
Inspiratory Pressure							
• PEEP							
• Fi02							
• Rate		}		8			
Alarms (Peak Inspiratory Pressure, Low Pressure)							
Anti-bacterial ventilation circuit filter for use with both manual as well as mechanical ventilation methods.	0	2	2	2	2	2	2

	Appendix 18	ope	rational base.				
Diagnostic /Therapeutic Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Sphygmomanometer including adult, paediatric and neonatal cuffs	1	1	1	1	1	1	1
Pupil torch	1	1	1	1	1	1	1
Glucometer and blood glucose monitoring strips	1	1	1	1	1	1	1
Pulse Oximeter (if not included as a feature of an ECG monitor or electronic patient monitor)	0	1	1	1	1	. 1	1
Automated External Defibrillator (AED) (annual calibration not required due to self-testing and self-calibration of the unit)	1	0	0	0	0	0	0
Automated External Defibrillator (AED) that is approved by the manufacturer for use in a moving vehicle, To be used in combination with a Vital Signs Monitor that includes visual 3 lead ECG Monitoring and a ECG rhythm printer/recorder feature (Vital Signs Monitor requires annual calibration certification)	0	1	0	1	.1	O	0
OR							
ECG monitor and defibrillator featuring 3 lead ECG monitoring capability, 3 lead cable, AED capability, AED pads, manual defibrillation, recorder / printer with paper and hard defibrillation paddles (requires annual calibration certification)	0	1	0	1	1	0	0
ECG monitor and defibrillator featuring 3 lead ECG monitoring capability, external cardiac pacing, cardioversion, pacing/AED pads, manual defibrillation, recorder / printer with paper and hard defibrillation paddles (requires annual calibration certification)	0	0	1	0	0	1	1
Defibrillation gel	0	1	1	1	1	11	1
End Tidal CO2 Monitor – Capnograph (if not included as a feature of an ECG monitor or electronic patient monitor)	0	0	1	0	0	1	1

		ope	rational base	•			
Miscellaneous Disposable Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Boxes of disposable examination gloves (S,M,L)	1 each	1 each	1 each	1 each	1 Each	1 each	1 each
Wound dressings 100mm x 100mm	5	5	5	5	5	5	5
Wound dressings 100mm x 200mm	4	4	4	4	4	4	4
Hydrogel Burn Dressing 100mm x 100mm	2	2	2	2	2	2	2
Hydrogel Burn Dressing 200mm x 200mm	1	1	1	1	1	1	1
Hydrogel Burn Dressing 200mm x 450mm	2	2	2	2	2	2	2
Gauze swabs (100mm x 100mm)	20	20	20	20	20	20	20
Roll of 25 mm adhesive tape (zinc oxide)	1	1	1	1,	1	1	1
Roll of 10 mm adhesive tape (hypo- allergenic)	1	1	1	1	1	1	.1
75mm elasticised bandages	4	4	4	4	4	4	4
100mm elasticised bandages	4	4	4	4	4	4	4
Sealed maternity pack (including 2 x sealed & sterile surgical blades, 4 x sealed sanitary pads, 2 x sealed space blankets, 4 x sealed & sterile umbilical cord clamps, 1 x sealed & sterile mucous extractor)	1	1	. 1	1	1	1	1
Regurgitation bags Or	4	4	4	0	. 0	0	4
Large kidney bowl / receiver (may not be a bedpan)	1	1	1	0	0	0	4
Sealed space blanket	4	4	4	4	4	4	4
Clear safety goggles	2	2	2	2	2	. 2	2
Range of nasogastric tubes, including:	0	0	1	0	0	1	1
Size 5 French	0	0	1	0	0	1	1
Size 8 French	0	0	1	0	0	1	1
Size 10 French	0	0	1	0	0	1	1
Size 12 French	0	0	1	0	0	1	1
Size 14 French	0	0	1	0	0	1	1
Size 18 French	0	0	1	0	0	1	1
Urine drainage bag	0	0	2	0	0	2	2
Foleys catheters FG5, 8, 10, 12, 14, 16, 18	0	0	1	0	0	1	1

		ОРО	Tational base.				
Intravenous Therapy Equipment	BLS Ambulance	ILS Ambulance	AL.S Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Alcohol Swab (30mm x 30mm)	0	30	30	30	30	30	30
14 gauge intra-venous catheters	0	2	2	2	2	2	2
16 gauge intra-venous catheters	0	2	2	2	2	2	2
18 gauge intra-venous catheters	0	2	2	2	2	2	2
20 gauge intra-venous catheters	0	2	2	2	2	2	2
22 gauge intra-venous catheters	0	2	2	2	2	2	2
24 gauge intra-venous catheters	0	2	2	2	2	2	2
60 micro drops / ml – Administration Sets	0	2	2	2	2	2	2
Intraosseous needle or device with needle	0	0	1	0	0	1	1
15 drops / ml or 20 drops / ml- Administration Sets	0	2	2	2	2	2	2
10 drops / ml – Blood Administration Set	0	2	2	2	2	2	2
High Capacity 10 drops / ml Administration Set	0	0	1	0	0	1	1
Volume Control Administration Set (eg. Buretrol, Dosifix)	0	0	1	0	0	1	1
200ml Normal Saline - IV Fluid	0	2	2	2	2	2	2
1000ml Ringers Lactate – IV Fluid	0	2	2	2	2	2	2
Or 1000ml Balsol – IV Fluid	0	2	2	2	2	2	2
500ml Synthetic Colloid e.g. Haemacell / Haes-sterile	0	1	1	1	1	1	1
Transparent, waterproof, IV securing dressing (e.g. Tegaderm or similar) minimum of 10cm x 12cm dimensions	0	8	8	8	8	8	8
Infusion flow regulators (eg Dial-a- Flow, Dosi Flow)	0	2	2	2	2	2	2
3 Way Stopcock	0	1	2	1	1	2	2
Spencer Wells Artery Forceps	0	2	2	2	2	2	2
Pressure Infusion Bags	0	0	2	0	0	2	2

Drugs and Drug Therapy Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Medication cooler bag for drugs requiring refrigeration	0	, 0	1	0	0	1	1
Activated Charcoal	1	1	1	1	1	1	1
Glucose powder or gel	1	1	1	1	1	1	1
Entonox with demand value and regulator	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL.	OPTIONAL	OPTIONAL	OPTIONAL
50 ml syringes	0	0	1	0	0	1	1
20 ml syringes	0	2	2	2	2	2	2
10 mt syringes	0	2	2	2	2	2	2
5 ml syringes	0	2	2	2	2	2	2
2 ml syringes	0	2	2	2	2	2	2
1 ml syringes	0	0	2	0	0	2	2
16 gauge needles	0	4	4	4	4	4	4
20 gauge needles	0	4	4	4	4	4	4
Aspirin	0	10 x 150 mg	10 x 150 mg	10 x 150 mg	10 x 150 mg	10 x 150 mg	10 x 150 mg
Dextrose 50%	0	Min 60 ml	min 100 mi	Min 60 ml	Min 60 ml	min 100 ml	min 100 m!
Fenoterol	0	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's
Ipratropium Bromide	0	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's
Salbutamol	0	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's	5 x UDV's
Adenosine	0	0	min 10 x 6mg/2ml glass ampoule	0	0	min 10 x 6mg/2ml glass ampoule	min 10 x 6mg/2ml glass ampoule
Adrenaline	0	0	min 20 x 1mg/1ml glass ampoule	0	0	min 20 x 1mg/1ml glass ampoule	min 20 x 1mg/1ml glass ampoule
Amiodarone Hydrochloride	0	0	min 4 x 150mg/3ml glass ampoule	0	0	min 4 x 150mg/3ml glass ampoule	min 4 x 150mg/3ml glass ampoule
Atropine Sulphate	0	0	min 20 x 1mg/1ml glass ampoule	0	0	min 20 x 1mg/1ml glass ampoule	min 20 x 1mg/1ml glass ampoule
Calcium Chloride 10%	0	0	min 4 x 1g/10ml glass ampoule	0	0	min 4 x 1g/10ml glass ampoule	min 4 x 1g/10ml glass ampoule
Clopidogrel	0	0	min 8 x 75mg tablets	0	0	min 8 x 75mg tablets	min 8 x 75mg tablets

Diazepam	0	0	min 5 x 10mg/2ml glass ampoule	0	0	min 5 x 10mg/2ml glass ampoule	min 5 x 10mg/2ml glass ampoule
Flumazenil	0	0	min 2 x 0.1mg/1ml 10ml glass ampoule	0	0	min 2 x 0.1mg/1ml 10ml glass ampoule	min 2 x 0.1mg/1ml 10ml glass ampoule
Furosemide	0	0	min10 x 20mg/2ml glass ampoule	0	0	min10 x 20mg/2ml glass ampoule	min10 x 20mg/2ml glass ampoule
Glucagon	0	0	min 1 x 1mg vial / pre drawn syringe	0	0	min 1 x 1mg vial / pre drawn syringe	min 1 x 1mg vial / pre drawn syringe
Glyceryl Trinitrate	0	0	min 1 x s/l spray bottle, or 50 x 0.5mg tabs	0	0	min 1 x s/l spray bottle, or 50 x 0.5mg tabs	min 1 x s/l spray bottle, or 50 x 0.5mg tabs
Hydrocortisone	0	0	min 4 x 100mg/2ml glass vial	0	0	min 4 x 100mg/2ml glass vial	min 4 x 100mg/2ml glass vial
Lignocaine Hydrochloride (Systemic and Local anaesthetic)	0	0	min 5 X 100mg/ml glass ampoule	0	0	min 5 X 100mg/ml glass ampoule	min 5 X 100mg/ml glass ampoule
Lorazepam	0	0	min 5 x 4mg/1m glass ampoule	0	0	min 5 x 4mg/1m glass ampoule	min 5 x 4mg/1m glass ampoule
Magnesium Sulphate	0	0	min 4 x 1g/2ml glass ampoule	0	0	min 4 x 1g/2ml glass ampoule	min 4 x 1g/2ml glass ampoule
Methylprednisolone	0	0	min 4 x 125mg/m2ml glass ampoule, or equivalent	0	0	min 4 x 125mg/2ml glass ampoule, or equivalent	min 4 x 125mg/2ml glass ampoule, or equivalent
Metoclopramide Monohydrochloride	0	0	min 5 x 10mg/2ml glass ampoule	0	0	min 5 x 10mg/2ml glass ampoule	min 5 x 10mg/ml glass ampoule
Midazolam	0	0	Min 5 x 15mg/3ml glass ampoule or equivalent	0	0	Min 5 x 15mg/3ml glass ampoule or equivalent	Min 5 x 15mg/3ml glass ampoule or equivalent
Morphine Sulphate	0	0	min 5 x 15 mg/1ml glass ampoule or equivalent	0	0	min 5 x 15 mg/1ml glass ampoule or equivalent	min 5 x 15 mg/1ml glass ampoule or equivalent
Naloxone Hydrochloride	0	0	min 5 x 0.4mg/1ml glass ampoule	0	0	min 5 x 0.4mg/1ml glass ampoule	min 5 x 0.4mg/1ml glass ampoule
Promethazine	0	0	min 5 x 25mg/ml glass ampoule	0	0	min 5 x 25mg/ml glass ampoule	min 5 x 25mg/ml glass ampoule
Sodium Bicarbonate 8,5%	0	0	min 2 x 8.5% 50ml bag	0	0	min 2 x 8.5% 50ml bag	min 2 x 8.5% 50ml bag
Thiamine Hydrochloride	0	0	min 1 x 100mg/ml ampoule	0	0	min 1 x 100mg/ml ampoule	min 1 x 100mg/ml ampoule

Drugs according to the HPCSA scope of practice for registered Emergency Care Practitioners (per ambulance / vehicle)	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Etomidate (Hypnomidate, Amidate)	0	0	min 4 x 20mg/10ml ampoule	0	0	min 4 x 20mg/10ml ampoule	min 4 x 20mg/10ml ampoule
Ketamine (Ketalar, Ketaset)	0	0	min 4 x 100mg/1ml ampoule	0	0	min 4 x 100mg/1ml ampoule	min 4 x 100mg/1ml ampoule
Succinylcholine/Suxamethonium Chloride (Scoline, Anectine) Succinylcholine/Suxamethonium Chloride	0	0	min 4 x 100mg/2ml ampoule in cold storage	0	. 0	min 4 x 100mg/2ml ampoule in cold storage	min 4 x 100mg/2ml ampoule in cold storage
Vecuronium Bromide (Norcuron)	0	0	min 6 x 4mg/1ml ampoule	0	0	min 6 x 4mg/1ml ampoule	min 6 x 4mg/1ml ampoule
Rocuronium Bromide (Esmeron, Zemuron)	0	0	min 2 x 10mg/ml in a 2ml ampoule in cold storage	0	0	min 2 x 10mg/ml in a 2ml ampoule in cold storage	min 2 x 10mg/ml in a 2ml ampoule in cold storage

Transport and Immobilization Equipment	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance		
Hard/Stiff Neck Cervical Collars – Small	2	2	2	2	2	2	2		
Hard/Stiff Neck Cervical Collars – Medium	2	2	2	2	2	2	2		
Hard/Stiff Neck Cervical Collars - Large	2	2	2	2	2	2	2		
Full set of Soft Cervical Collars (Small, Medium, Large)	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL		
Patient Extrication Device - Adult (KED)	1	1	1	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL		
Patient Extrication Device – Paediatric (KED)	1	1	1	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL		
Long spine board	1	1	1	0	0	0	OPTIONAL		
Scoop stretcher	1	1	1	0	1	0	1		
Vacuum Mattress	0	OPTIONAL	OPTIONAL	0	0	0	1		
Set Head Blocks	2	2	2	OPTIONAL	OPTIONAL	OPTIONAL	2		
Spider harness	2	2	2	OPTIONAL	OPTIONAL	OPTIONAL	2		
Lower extremity traction splint – Adult	1	1	1	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL		
Lower extremity traction splint Paediatric	1	1	1	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL		
Long splints - Leg	6	6	6	6	6	6	6		
Short splints – Arm	4	4	4	4	4	4	4		

Other	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicie	ALS Response Vehicle	ALS Air Ambulance
Pillow	2	2	2	0	0	0	2
Sheet	6	6	6	0	0	6	6
Blanket	2	2	2	0	0	0	1
Bedpan/urinal	1	1	1	0	0	0	OPTIONAL
Waste disposal facility (enclosed container)	1	1	1	0	0	0 ,	1
Red, medical waste disposal plastic bags	6	6	6	6	6	6	2
Enclosed, commercially manufactured, disposable sharps container	1	1	1	1	1	1	1
Suitably manufactured Jump Bag for safe, clean and secure storage and transportation of medical equipment	1	1	1	1	1	1	1
Suitably manufactured Drug Pouch for safe, clean and secure storage and transportation of medication and administration accessories	0	0	1	0	0	1	1
Pair rescue scissors	1	1	1	1	1	1	1
High visibility, reflective vest and / or jacket	2	2	2	1	2	1	OPTIONAL
Safety helmet	2	2	2	1	2	1	OPTIONAL
Fire Extinguisher (minimum of 2KG dry powder)	1	1	1	1	1	1	OPTIONAL
Thermometer (standard)	1	1	1	_1	1	11	1
Casebook or patient record sheet	1	1	1	1	1	1	1
Map book or fitted GPS device	1	1	1	1	1	1	1

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Requirements for MICU transfers - the following requirements are per station, and not per vehicle (mandatory)	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance
Vital signs monitor (requires annual calibration certification) - or separate automated NIBP, SpO2, electronic capnograph	0	0	1	0	0	1	1
Infusion pump including appropriate administration sets (requires annual calibration)	0	0	1	0	0	1	1
Syringe driver including approved syringes (requires annual calibration certification)	0	0	1	0	0	1	1

operational base.												
Requirements for MICU neonatal transfers – the following requirements are per station, and not per vehicle (optional):	BLS Ambulance	ILS Ambulance	ALS Ambulance	ILS Response Vehicle	Medical Rescue Vehicle	ALS Response Vehicle	ALS Air Ambulance					
Automated neonatal ventilator (requires annual calibration certification) - or mechanical ventilator featuring neonatal, paediatric and adult ventilation modes	0	0	access	0	0	access	1					
Transport incubator with backup power and on board alarms (requires annual confirmation of servicing)	0	0	access	0	0	access	1					
Vital signs monitor with neonatal probes (requires annual calibration certification)	0	0	access	0	0	access	1					
Oxygen inspired analyser	0	0	access	0	0	access	1					
Incubator head box	0	0	access	0	0	access	1					
Neonatal SPO2 probe and monitor (if not included as a feature of the vital signs monitor)	0	0 ·	access	0	0	access	1					

RESCUE EQUIPMENT REQUIREMENTS									
EQUIPMENT	QUANTITY	EQUIPMENT	QUANTITY						
Hydraulic Pump	1	Jumper cables	1 set						
Hydraulic Spreader	1	10-litre compressed-air cylinder	1						
Hydraulic Cutter	1	Pneumatic airbags	1						
Hydraulic Hand Pump	1	Pneumatic Hoses	1						
Hydraulic Hose	3	Pneumatic Controls and Air	1						
lydraulic Rams (Short, Medium, Long)	3	Cylinder Pneumatic Chisel Set	1						
Reciprocating saw	1	Torch	1						
Generator, minimum 3,5 kW	1	Pedal cutter	1						
Lighting system	1	Tool sheet (Staging)	1						
Petrol angle grinder	1	Dry powder portable fire extinguisher	1 X 2.5kg						
Step Chocks	2	Abseil Harness with 1 Croll ascender	2						
Wedges	4	Helmets	2						
Chocks	4	Rescue gloves	2 pairs						
Road cones	20	Ropes 50 meters Main line	2						
Halligan tool	1	Ropes50 meters Safety line	2						
Hacksaw	1	Edge roller	1						
Axe	1	Ascenders	1						
Rubber hammer	1	Prusiks	4						
Hammer	1	Light-use Ascenders	2						
Bolt cutter	1	Descenders	1 set						
Toolbox	1	Figure 8 descenders	2						
Holmatro Toolbag	1	Brake Bar Racks	1						
Chain Saw	1	Petzi iD	2						
Bow Saw	1	Carabiners	14						
Crow Bar	1	Anchor plate	2						
Ratchet straps	2	Slings (S,M,L)	2 each						
Glass cutter	1	Rope grabs	2						
Spade	1	Cow Tail	6						
Broom	1	Directional pulley	4						
Duct tape	2	Haul hoist	1						
Trolley jack	1	Breathing apparatus and cylinders	2						
Bottle jack	1	Bunker kit	1						
High Lifting Jack	1	Helmets with visor	1						
Jimmy jack	1	Utility rope	1						
Soft protection	1	Tarpaulin	. 1						

			7
Hard Protection	1	Torpedo Buoys	2
Seatbelt cutter	1	PFD'S	2
Centre punch	1	Trauma board	1
Large pliers	1	Scoop stretcher	1
Barrier tape	2	SKED stretcher	1
Jerry can with appropriate fuel	1 x 10 Litre	Step Ladder	1
Stokes basket stretcher with straps	1	Head blocks	1
Scoop stretcher	1	Spider harness	1
Webbing	11	KED	1
Oxygen cylinder and gauge	1	Suction unit	1
BVM (Adult, Child, Neonate)	1each	Jump bag	1
N95	1 box	Sharps Container	1
Red Plastic Bags	5		

Annexure C



EMERGENCY MEDICAL SERVICE LICENCE APPLICATION

ALL SECTIONS OF THE FORM MUST BE COMPLETED (A - H) PROVINCE																					
PROVINCE					_							 		 							
A COMP	ANY DE	TAIL	S																		
1 Registered company n	ame																				
2 Trading as																					
3 Registered	number																				
4 Income tax registration	number																				
5 Contact	details																				
Email addre	ess																				
Postal add	ress														_						
Suburb																					
City/Town																_		pos	tal co	de	
Province																					
Physical a	ddress]													
Suburb																					
City/Town																		pos	tal co	de	
Province																					
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6 Address to mail must			ŀ	oostal						ph	ysica 					em	ail				

В	MANAGI	ER/P	RO.	XYE)ET/	VIL:	S (d	etai	s o	f re	spo	nsil	ole	pers	on fo	or co	mpan	y)			
1	Name of person																				
		-							•							•	•	•	•		
2	Identification/ passport number																				
ш	FF	L		1							I.			*		1	1	<u> </u>	·	I	
3	Country of origin foreign national)	(if																			
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4	Contact detail	İs																			
	Telephone num day	iber d	lurin	g] -									
								co	de			¬							num	ber	
	Telephone num night	iber d	lurin	g								_									
								co	de			_					τ		number		
	Facsimile numb	per										_] -									
								co	de			-					,	,	num	ber	
	Mobile (cellular number) phoi	ne																		
								co	de										num	ber	
Ema	ail address																				
Phy	sical address																				
						·															
Sub	ourb																				
City	/Town																		posta	l code	r
Pro	vince																				

C STATION applicati	NDETAILS (deta on is made)	ils of base	of operation	-to be	completed	I for each	base for w	hich
1 Name of service								
2 Location								
Physical address								
Suburb								
City/Town Province							Postal code	
3 GIS Coordinates	s			E				
4 Contact details	s					*		
Telephone num day	ber during			-				
Telephone num night	ber during	cod		-			number	
Facsimile numb	per	cod		-			number	
Mobile (cellular) number) phone	cod	le	-			number	
D TYPE OF	SERVICË (mar	k with a X)	e de la companya de l					
1	BLS EDUCATIONAL VOLUNTEER		ILS AEROMEDIO	CAL	AL	S ENT		

1 Land	
Type Class Rescue Vehicle Class	Number Response Vehicle Number
Ambulance	
Aircraft Ambulance	Number
Total number of emergency vehicles	
F EMERGENCY CARE PERSONN personnel)	IEL (number and qualification of emergency vehicles
1 BAA AEA	CCA NDIP ECA
ECT ECP	Manager Doctor
Other Specify	
2 Total number of emergency care personnel	

	G DECLARATION										
I,		, the compa	ny's m	nanaç	ger/p	roxy (do her	eby			
a)	declare that all the particulars furnished by me in this form are true and correct; and	Signature									
b)	realise that a false declaration is punishable with a fine or one year imprisonment or both.	Place									
		Date					-			-	
				Ye	ar			Mo	nth		

THE FOLLOWING APPENDICES MUST BE ANNEXED TO THE APPLICATION

Day

- Copy of the service plan for the geographic area(s) specified in the application
 Details reasons why the application should be approved with reference to Regulation 3
- 3. Tax clearance certificate
- 4. Further information in support of the application

Annexure D



EMERGENCY MEDICAL SERVICES FEES

	ITEM AS PER REGULATION AND STANDARDS (AS APPLICABLE)	SERVICE	FEE
a)	Application fees with respect to a new Emergency Medical Service	Application fee per service	R8 000.00
p)	Inspection fees with respect to a new Emergency Medical Service station	Inspection fee per station	R2 000.00
c)	Annual licensing fees with respect to a new or	Per ambulance	R 300.00
	existing Emergency Medical Service	Per response vehicle	R 300.00
		Per Rescue vehicle	R 500.00
d)	Application fees with respect to renewal of	Per Emergency	R2 000.00
	Emergency Medical Service licence	Service	
e)	Inspections fees with respect of annual renewal of existing Emergency Medical Service	Inspection fee per station	R1 000.00