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REGULATIONS GOVERNING AMBULANCE SERVICES IN THE WESTERN CAPE
IN THE WESTERN CAPE

THE MINISTER OF THE PROVINCIAL DEPARTMENT OF HEALTH HAS, BY VIRTUE OF THE POWERS VESTED IN HIM BY THE CONSTITUTION OF SOUTH AFRICA SCHEDULE 5 PART A MADE THE FOLLOWING REGULATIONS:

General:

“Any reference to the one gender shall be deemed to include the other, and the singular to include the plural and vice versa, unless the context indicates otherwise”
2. **DEFINITIONS:**
For the purpose of these regulations, unless the context otherwise indicates:

"Accredited Ambulance Service" means an ambulance service accredited by the Minister as suitable for the medical management of persons in an emergency care situation.

"Accredited Emergency Medical Training Institution" means an institution or service accredited by the Health Professions Council as suitable for the experiential practical training of emergency care students.

"ACLS" means Advanced Cardiac Life Support ®

"ALS" means Advanced Life Support which is the skills attributed to a person registered as a Paramedic with the Health Professions Council and includes equipment which would be used by such person in the execution of such skills.

"ATLS" means Advanced Trauma Life Support ®

"Ambulance" means an appropriately equipped vehicle, waterborne, airbone or land-based, designed or adapted to treat and convey a patient in an emergency care situation, marked in such a way as to indicate the category of medical care and transportation of the said vehicle and staffed with a minimum of two registered ambulance service personnel.

“Ambulance Service” means any private or state organisation which is solely dedicated, staffed & equipped to offer:

a) the pre-hospital medical treatment and/or,

b) the inter-hospital medical treatment and/or,

c) the transport of the ill and/or injured and/or

d) the medical rescue of patients from an emergency care situation.

"BLS" means Basic Life Support which is the skills attributed to a person registered as a Basic Ambulance Assistant with the HPC and includes the equipment which would be used in the execution of such skills.

“BTLS” means Basic Trauma Life Support ®

“Director” means the Head of the Emergency Medical Services of the Provincial Administration of the Western Cape.

“Disaster” means a progressive or sudden, widespread or localized occurrence, due to natural or human causes resulting in a catastrophic situation whereby the day to day patterns of life are, or are threatened to be, disrupted and people are, or are threatened to be, plunged into helplessness and suffering;
“EMS” means an emergency medical service.

"Emergency Care" means the rescue, evaluation, treatment and care of an ill or injured person in an emergency care situation and the continuation of treatment and care during the transportation of such person to or between medical facilities.

“Emergency Care Situation” means circumstances during which a person is injured or is for some other reason in mortal danger and in need of emergency care;

“Emergency Medical Service Communications System” means any system established, which serves as a central communications system to co-ordinate the personnel, facilities and equipment of an emergency medical service and which;
    a) utilises emergency medical telephonic screening
    b) utilises a publicised emergency telephone number
    c) has direct communications with personnel, facilities and equipment

"Emergency Care Personnel" means persons registered under section 17 of the Health Professions Act as paramedics, Ambulance Emergency Assistants, Basic Ambulance Assistants, Operational Emergency Care Orderlies, Emergency Care Assistants and/or persons who hold a valid first aid certificate issued by a first aid organization accredited by the Professional Board for Emergency Care Personnel;

“HPCSA” means Health Professions Council of South Africa.

"ILS" means Intermediate Life Support which is the skills attributed to a person registered as an Ambulance Emergency Assistant with the HPCSA and includes equipment which would be used by such person in the execution of such skills.

"Inspecting Officer" means an appropriately qualified registered medical practitioner or registered Paramedic appointed by the Minister for the purposes of inspecting the emergency medical service in question, with regards to compliance with these regulations.

"Medical Rescue" is defined as access and the release and/or extrication of a person requiring, or who may require, medical attention or treatment from a confined position or from a position of entrapment or other situation which threatens the health of an individual or community.

“Medical Rescue Vehicle” means a vehicle, waterborne, airborne or land-based designed and adapted to convey specialist rescue personnel and equipment to release a patient from a medical rescue situation, and which is staffed by a minimum of two emergency care personnel, both trained at least in basic medical rescue, and of which at least one member shall be registered as
an Ambulance Emergency Assistant, Paramedic or Medical Practitioner.

"Medical Response Vehicle" means an appropriately equipped non-patient carrying vehicle, waterborne, airborne or land-based, designed and adapted to convey specialist medical equipment and respond to a patient in an emergency care situation and which is staffed with a minimum of two emergency care personnel, of which at least one member shall be registered as an Ambulance Emergency Assistant, Paramedic or Medical Practitioner.

"Minister" means the Provincial Minister of Health;

"National Minister" means the Minister of the National Department of Health.

"PALS/ APLS" means Advanced Paediatric Life Support ®

“PHTLS” means Pre-Hospital Trauma Life Support ®

“Professional Board” means the Professional Board for Emergency Care Personnel established in terms of the Health Professions Act, 1974 (Act no. 56 of 1974).

“Provincial Control Medical Practitioner” means a registered medical practitioner employed by a Provincial Ambulance Service, appointed by the Minister, in a clinical audit and control capacity, and who is responsible to ensure quality patient care.

"Responsible person" means the person, or the nominee in the case of a company or an association of persons (whether corporate or not) or governmental organisation, who establishes, extends, conducts, maintains or renders an Ambulance Service.

“Scope of Practice” means regulations published by the National Minister in terms of section 33(1) of the Health Professions Act, 1974 (Act no. 56 of 1974) defining the scope of the profession of Emergency Care Personnel.

"Supervising medical practitioner" - means a registered medical practitioner who is employed by an Ambulance Service or volunteers his services in a supervisory clinical control capacity, who is consulted by paramedics on a regular basis and who ensures compliance with the capabilities and protocols of HPCSA approved levels of pre-hospital care personnel. The supervising medical practitioner is responsible to the Provincial Control Medical Practitioner for ensuring compliance with the clinical aspect of these regulations;

“Training institution” means a training institution accredited by the Professional Board for Emergency Care Personnel to offer accredited emergency care courses.
3. REGISTRATION

No person or organization shall establish, extend, conduct, maintain, manage, control or render an Ambulance Service or permit or arrange for such a service to be provided unless such an Ambulance Service has been registered in accordance with the provisions of these regulations and the responsible person is in possession of a valid certificate and token of registration issued to him in respect thereof by the Provincial Minister of Health. Each such certificate and token of registration issued in terms of regulation 1.4(a) and 1.4 (c) shall be effective from the date of issue up to and including the next succeeding 31st day of December, when it shall lapse, or for such portion of the said period as may be specified in the certificate or token of registration. An application for renewal of such certificate or token of registration shall be made in accordance with regulation 1.3, not less than 90 days before the date of expiry: Provided that whenever such registration certificate or token is issued after 30th September in any year, such registration certificate or token shall be valid for a period up to and including 31 December of the year following the year of issue.

3.1 Competency

AMBULANCE SERVICES seeking registration in accordance with these regulations, shall apply to the Minister in writing for an inspection to be undertaken.

3.2 Conditions of application

An Ambulance Service shall not be registered as such, and no certificate or token of registration shall be issued in respect thereof, unless the following have been complied with;

(a) The Ambulance Service has been inspected by an inspecting officer and has been found to be suitable and adequate for the purposes of providing an Ambulance Service in terms of these regulations.

(b) The vehicles, equipment and staff comply with the minimum requirements as per category of care per vehicle as laid down in the regulations.

(c) The vehicles are clearly marked as to the specific minimum category of emergency care that will be provided by the unit with regard to vehicle, staff, & equipment.

(d) The vehicles are all road-worthy and have been modified, adapted and configured according to the minimum category of emergency care that will be provided by the unit with regard to vehicle, staff, & equipment.

(e) All the relevant legal requirements regarding health and traffic have been adhered to.

(f) Proof of adequate liability insurance cover must be available for the said emergency medical service.
(g) All requirements according to the schedules of basic, intermediate or advanced patient care are met as per regulations laid down.

(h) An Ambulance Service shall be medically supervised by an appropriately qualified and registered medical practitioner with the HPCSA, appropriate to the level of care offered. The supervising medical practitioner designated by each Ambulance Service shall give written notice to the Minister of the intention to serve in this capacity. A contractual relationship must exist between the medical practitioner and the services’ operational Manager, details of which will be included in the medical practitioner’s written notice to the Minister. This relationship shall not be considered terminated until and unless the medical practitioner informs the Minister’s office of such termination.

(i) The Ambulance Service Manager supervising an emergency medical service shall be registered with the HPCSA as an Ambulance Emergency Assistant or higher.

3.3 Application for registration or renewal of registration

(a) Every application or renewal of registration of an Ambulance Service shall be made to the Minister.

(b) The responsible person shall apply for the renewal of such registration, not later than 90 days before the date on which a certificate or token of registration expires.

3.4 Handling of application

When applying for registration to operate an Ambulance Service, the responsible person shall complete the necessary application form in full and shall furnish any further information required by the Minister in order to consider the application.

Upon the receipt of an application for registration or renewal of registration, the Minister shall decide either -

(a) to register the proposed Ambulance Service and issue a certificate and token of registration in respect thereof
(b) to refuse registration, in which event he shall not issue any certificate nor token of registration
(c) to renew the registration of the Ambulance Service and issue a certificate and token of registration thereof
(d) to refuse the renewal of registration, in which event no certificate nor token of registration shall be issued

The Minister may for the purposes of regulation 1.4 carry out or cause to be carried out by an inspecting officer, an inspection of the premises and the vehicles in respect of which the application was made before such an
application will be considered by the minister.

3.5 Inspection

The Minister will appoint inspectors who will undertake inspections of AMBULANCE SERVICES applying for accreditation. The inspection will take place within 3 months of a valid application being received.

The respective inspection form will be duly completed and a copy provided to the responsible person of the said service. The original inspection form, once completed, will be returned to the Minister for appropriate registration purposes. The decision of The Minister is final.

No person shall in any way obstruct any inspecting officer carrying out his inspection or refuse to furnish to the best of his knowledge any information requested by such officer or to show any apparatus or vehicle.

A service shall be inspected at least every 3 years, within 3 months of the anniversary date of the registration being granted.

Notwithstanding the above, the Minister may at any time, without notice, and as often as he/she may deem necessary, inspect or have inspected by an inspecting officer the Ambulance Service at no cost to the service.

The Minister may also, at any time, direct an Inspecting Officer and/or the Provincial Control Medical Practitioner to review the medical care standards and protocols and clinical care compliance data with the service’s supervising medical practitioner.

3.6 Registration Fee

Every Ambulance Service, whether private or public, as a condition of maintaining a valid registration shall pay an annual registration fee in an amount determined by the Minister. The amount of the registration fee may be periodically revised by the Minister. Said registration fee shall become due and payable upon the initial issuance and each year thereafter on the anniversary date of the initial registration issuance.
3.7 Re-application for registration

Any person who has applied for registration of an Ambulance Service and whose application has been refused or any person whose application for renewal of registration has been cancelled in terms of regulation 1.9 or any person who failed to apply timeously for renewal of registration and whose certificate or token of registration has expired or any person who lodged an appeal against the refusal by the Minister of registration or renewal of registration or against the cancellation by the Minister of a certificate or token of registration and whose appeal has been dismissed, may at any time re-apply for registration or renewal of registration of the same Ambulance Service: Provided that, if registration or renewal of registration has been refused or the certificate or token of registration has been cancelled because of failure by the applicant to comply with all the conditions and requirements imposed by the Minister in terms of regulation 1.4 (a) or 1.4 (c), such further application shall not be made until and unless all such conditions and requirements have been complied with as determined by the Minister. Such re-inspection will take place within 6 weeks of receipt of a valid re-application.

3.8 Change of Ownership

Change of ownership of an Ambulance Service shall require a new application and a new license issued in conformance with the requirements of these regulations.

3.9 Exemption from requirements in respect of registration

The Minister may at any time, on such conditions and for such period as he/she may determine but not longer than 2 years, grant a responsible person exemption from any requirements in respect of registration in terms of these regulations.

3.10 Cancellation of registration

3.10.1 A certificate or token of registration may at any time be cancelled by the Minister, if the proprietor;
(a) fails to comply with any conditions and requirements imposed in terms of 1.4 (a) or 1.4 (c), or
(b) fails to furnish the returns, particulars or information which he is required to furnish in terms of these regulations
(c) is found guilty of an offence in terms of the provisions of these regulations

3.10.2 by the Minister if he deems it to be in the best interests of public safety that the specific said Ambulance Service in respect of which such certificate or token of registration has been issued should
cease to operate.

3.10.3 Whenever the Minister cancels a certificate or token of registration in terms of regulation 1.9, he shall give notice in writing to the proprietor that he is so cancelling the certificate or token of registration and that the Ambulance Service in respect of which it was issued shall cease to operate on or before a date specified in such notice.

3.10.4 Upon the cancellation of a certificate or token of registration in terms of regulation 1.9 the registration of the Ambulance Service in respect of which such certificate or token of registration was issued shall lapse on the date specified in the written notice.

3.11 Display of certificate of registration of AMBULANCE SERVICES and of token of registration

The holder of a valid certificate of registration shall display or cause to be displayed in a conspicuous place on the premises to which such certificate relates the certificate of registration mentioned in regulation 1.4(a) or 1.4(c) and shall display or cause to be displayed the token of registration in a conspicuous place on the vehicle to which such token relates.

The certificate of registration shall have displayed on it the date of registration and the date until which it is valid.

3.12 Information

(a) The person responsible for the management or control of an Ambulance Service shall render to the inspecting officer all information which is necessary for the purposes of registration and continued registration of the said Ambulance Service.

(b) Should any relevant information not be available nor made available due to medical or financial confidentiality, the Minister shall give notice in writing to the said emergency medical service to have such confidential information made available to the Inspector and the Inspector shall keep such confidential information confidential unless such information is in conflict with these regulations.
3.13 Conditions

The Minister may at any time direct the proprietor of such Ambulance Service by notice in writing to effect, within a reasonable period stated in the notice, such alterations or such improvements in regard to the organization, management, operations or medical performance of the said emergency medical service or to acquire or replace such equipment or vehicle or to remedy such defects as may be specified in the said notice.

The Minister’s designated Provincial Control Medical Practitioner may at any time that inadequate and/or irresponsible medical supervision of a service is found, recommend termination of such Ambulance Service.

3.14 Appeals

The responsible person of an Ambulance Service may appeal in writing to the Minister against any decision made by the Inspectorate in terms of any provision of these regulations.

(a) An appeal to the Minister shall be lodged within 30 days of the decision appealed against having come to the knowledge of the responsible person or prospective responsible person, as the case may be, and shall clearly state:

(i) against which decision such appeal is lodged, and
(ii) the ground on which such an appeal is lodged.

(b) Any appeal in terms of these regulations shall be lodged with the Minister’s Inspectorate who shall submit it to the Minister together with the reasons for the decision against which the appeal is being lodged.
4. MANAGEMENT OF AMBULANCE SERVICE

4.1 An Ambulance Service shall consist of at least the following:

(1) an ambulance
(2) communications system
(3) an Ambulance Manager
(4) a supervising medical practitioner
(5) appropriate emergency care personnel

4.2 Minimum standards for AMBULANCE SERVICES vehicles are contained in Addendum A

4.3 An Ambulance Service shall provide for a standardized patient data collection system which covers all phases of the Ambulance system, as determined by the Minister.

4.4 The responsible person of an Ambulance Service shall -

(i) not permit more ill or injured persons in a vehicle than the number of persons which it is registered to convey except in disaster situations, or in the case where no other appropriate transport vehicle is available to someone in a life or limb threatening state.

(ii) not permit the treatment or conveyance of an ill or injured person without his written / implied consent; except where circumstances prevent the obtaining of such consent. This includes people with altered mental status, children who are incapable of understanding such consent, and those in need of immediate evacuation from a dangerous environment.

(iii) ensure that the Ambulance Service is not managed or will not be managed in a manner which will be detrimental to the physical, psychological or moral welfare and well being of the ill or injured patient under the said services’ care.

(iv) the service shall conform to the local emergency response time plan, as determined by the Minister.

(v) keep adequate, confidential patient records for a period as required by the National Archives of South Africa Act. Have such records reviewed by the supervising medical practitioner at frequent and regular intervals for both appropriate documentation and care.
(vi) within 21 days advise the Minister in writing, of any change in the particulars furnished by him in terms of regulation (1.4) as indicated on the current certificate or token of registration issued in terms of these regulations

(vii) immediately report to the Minister in writing any change in the particulars furnished by him in terms of regulation (1.4) or indicated on the current certificate or token of registration issued in terms of regulation 1.4(a) or 1.4(c) of these regulations.

(viii) rely upon and defer to the judgement of the service’s supervising medical practitioner or in all matters clinical for the health protection of all emergency care personnel and for the appropriate administration of medical care given to any ill or injured persons attended by that Ambulance Service.

(ix) ensure that no ill or injured person needing or requesting emergency medical care is ever refused care or transport on the basis of their ability to pay for such.

(x) ensure that emergency care personnel always transport patients to the closest medical facility which is appropriate for the patient’s clinical needs and condition. If the patient, the patient’s medical practitioner or relative disagree with service’s destination recommendation, that service’s supervising medical practitioner shall be consulted immediately for final arbitration of the patient’s receiving facility destination.

(xi) any emergency care personnel who, during the normal course of their duty, may be exposed to hepatitis B shall be vaccinated against hepatitis B. The cost for such vaccination program shall be borne by the employer.

4.5 Ambulance Services Development Plan

The Minister shall develop a comprehensive Ambulance Services plan, which should be completed not later than one year from the effective date of these regulations, and of which the plan should include;

(1) an inventory of Ambulance Service resources

(2) an assessment of the effectiveness of existing services and a determination of the need for additional services

(3) a statement of goals and specific measurable objectives for delivery of Ambulance Services

(4) methods to be used in achieving the stated objectives
(5) a schedule for achievement of the stated objectives
(6) a method for evaluating the stated objectives
(7) estimated costs for achieving the stated objectives
(8) methods for publishing comprehensive annual reports

5. **OFFENCES AND PENALTIES**

Any person who -

(a) establishes, extends, conducts, maintains, manages, controls or renders an Ambulance Service which is not registered in terms of the provisions of these regulations; or

(b) extends or makes unacceptable alterations to the vehicles of an Ambulance Service after accreditation without the prior written approval of the Ministerial Inspectorate; or

(c) is the responsible person of/ or is employed by an Ambulance Service and who -

(i) fails or refuses to allow the Ministerial Inspectorate or any person acting on his behalf, access to such Ambulance Service for the purpose of an inspection in terms of regulations; or

(ii) fails to comply with the provisions of regulation 1 or

(iii) obstructs or hinders the Ministerial Inspectorate or any person acting on his behalf in the performance of his duties in terms of regulations 1 or

(iv) who contravenes or fails to comply with such provisions shall be liable to cancellation of certification or token registration until corrections have been made to correct the offence under consideration.

(d) obstructs or prevents access of emergency care personnel to a patient in an emergency medical care situation; or

(e) who has knowledge of an emergency medical care situation and willfully or negligently with-holds information from Ambulance Services; or

(f) who abusess or summons a service while he knows that there is no reason to do so,
(g) who fits a vehicle with a siren, red flashing beacon and/or displays:

(i) the Star of Life symbol or any other symbols, emblems, logos, heraldic devices, marks, words and/or phrases in any way associated with Ambulance Services; and/or

(ii) the term “paramedic” or any other derivative thereof; and/or

(iii) the term “medical” or any other derivative; and/or

(iv) the phrases “advanced life support, “intermediate life support” and “basic life support”

(h) Any person belonging to a registered Ambulance Service who displays the word “paramedic”, or any derivative thereof, and or the phrase “advanced life support” where such vehicle is not;

(i) staffed by at least one person registered as a Medical Practitioner or Paramedic with the Health Professions Council of South Africa; and/or

(ii) equipped to provide an advanced life support service;

whilst not registered as a bona fide Ambulance Service; or

(2) impersonates any emergency care personnel;

shall be guilty of an offence and, on conviction, liable to penalties as determined by the Minister.

6. POWERS OF EMERGENCY CARE PERSONNEL:

6.1 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, and may also:

(i) close any road or street;

(ii) enter or break and enter any premises;

(iii) damage, destroy or pull down any property;

(iv) cause to be removed from the scene any person who is dangerous, or in danger, or who obstructs that practitioner in the performance of his duties;
take material or equipment provided that the owner of the material or equipment so taken shall be compensated therefore by the Ambulance Service concerned to an amount agreed upon by the Ambulance Service and the owner, or in the absence of such agreement, an amount determined by arbitration in accordance with the provisions of the Arbitration Act, 1965 (Act No. 42 of 1965).

6.2 Definitive medical management of mass casualties in a disaster situation, will be undertaken by emergency care personnel under the direction of the Head of the Provincial Emergency Medical Services in conjunction with other emergency services in terms of the existing Disaster Management Act.

6.3 During a mass casualty situation the Head of the Emergency Medical Services of the Provincial Government of the Western Cape shall assume responsibility for the co-ordination of such situation with regards to the medical rescue, treatment and distribution to appropriate medical facilities of all patients.

6.4 In an emergency care situation in the public environment the Head of the Emergency medical Services of the Provincial Government or his delegate assume responsibility.

7. TRAINING INSTITUTIONS:

7.1 The National Minister may in consultation with the Professional Board for Emergency Care Personnel established in terms of the Health Professions Act, 1974 (Act no. 56 of 1974);

(a) permit persons in training to qualify themselves in Emergency Care provided that they receive such training only at training institutions accredited and registered by the Professional Board for Emergency Care Personnel, and that practical and experiential training may only be performed at Ambulance Services/Institutions accredited by the Professional Board.

(b) permit such steps or cause such steps to be taken as deemed necessary or expedient for the proper control, management, fiscal resources & development of, or for the extension of the training facilities at, such training institution.

7.2 Emergency care students attached to a service for practical “in-course” training are to be personally supervised at all times by a qualified person registered at a higher qualification level than the student, whilst treating & conveying a patient or whilst undertaking medical rescue. Furthermore whilst on an operational unit, the student will at all times be additional to the allocated operational crews so that adequate supervision of the student may be attained.
7.3 A student undertaking training as part of an Health Professions Council of South Africa accredited qualification, will be registered as a student with the training institution, and / or the HPCSA if required.

7.4 Each Ambulance Services training institution shall retain a supervising medical practitioner for the purposes of:

(1) reviewing the contents of all teaching material for its medical appropriateness

(2) written approval that such teaching material meets the standards of care compatible and consistent with those of the HPC

(3) regularly supervises classroom and field training to ensure its medical appropriateness

8. FEES:

(1) An Ambulance Services Manager determines the fees payable by a person on whose behalf the service is applied for-

(a) the attendance of the service;

(b) the use of the service and equipment; or

(c) any material consumed.

9. MINISTER MAY AUTHORISE PERSONS.

The National Minister may, after consultation with the Head of Health, by notice in the Gazette declare that a category of persons in the service of the State or a controlling authority may, by virtue of their offices, perform the prescribed functions in order to ensure that the objects of the Regulations are achieved.

10. URGENT CASES

1. Not withstanding anything to the contrary contained in any other law, the Minister or his appointed designate may, in any case where, in his opinion, urgent action is necessary in the public interest order any person, including a controlling authority, to make available his service, or equipment or material under his control, to a particular service or to employ it in a particular way;
2. A person who has acted in terms of an order referred to in subsection 1., shall be compensated therefor by the Minister to an amount agreed upon between the Minister and the person concerned, or in the absence of such an agreement, an amount determined by arbitration in accordance with the provisions of the Arbitration Act, 1965 (Act No. 42 of 1965).

11. FAILURE TO COMPLY WITH REQUIREMENTS.

1. If a person, including a local authority and a department of State, fails to comply with a requirement, standard or direction determined or issued under these Regulations the Premier may by written notice direct a local authority, and the Minister may by written notice direct any other person, to comply with the requirement, standard or direction within the period mentioned therein.

2. If such a person fails to give effect to such a notice, the Premier or Minister, as the case may be, may cause steps to be taken in order to comply with the requirement, standard or direction on behalf of the person concerned and to recover the costs in connection therewith from that person.

3. A direction referred to in subsection 9.1 shall not be issued before consultation with the local authority or person concerned, as the case may be.

12. DELEGATION.

(1) A responsible person may-

   (a) delegate any power granted to him by or under these Regulations, excluding the power referred to in this section, to a member of the service concerned; and

   (b) grant authority that a duty so assigned to him may be performed by such a member.

(2) A power so delegated and a duty so authorized shall be exercised or performed subject to the directions of the Ambulance Service Manager, who may at any time withdraw such delegation or authority. Exercise of this power shall be in concert with the supervising medical practitioner whenever ill/injured patients well-being are at issue.

(3) A delegation under subsection 10.1 does not prevent the EMS Manager from exercising the power in question himself.

13. INDEMNITY.
Subject to the proviso of section 10.1, the Minister, Ambulance Service Manager, member of an Ambulance Service or an inhabitant referred to in section 5.1 shall not be liable for any damage or loss as a result of bodily injury, loss of life or loss of or damage to property which is caused by or arises out of or in connection with anything done or performed bona fide in the exercise or performance of a power, function or duty conferred or imposed in terms of these Regulations.

14. REPEAL OF LAWS AND SAVINGS.

15. SHORT TITLE.

These Regulations shall be called the AMBULANCE SERVICES Regulations Western Cape 2003.
ADDENDUM A:

MINIMUM STANDARDS OF AMBULANCE SERVICES:

The following minimum standards of AMBULANCE SERVICES incorporate the vehicle, the minimum equipment at the various category levels and the personnel qualifications at the various category and functional levels:

(a) Basic life support
(b) Intermediate life support
(c) Advanced life support
(d) Advanced Life Support Response vehicle
(5) Rescue Standards
   (1) Confined Space Rescue
   (2) Hazardous Materials Rescue
   (3) Motor Vehicle Rescue
   (4) Mountain, Cave and High Angle Rescue
   (5) Swift Water Rescue
   (6) Diving Rescue
   (7) Sea Rescue
   (8) Industrial Rescue
   (9) Building and Trench Rescue
BASIC LIFE SUPPORT SERVICE

This level of care involves the transportation of patients who may require medical assistance up to and including Basic Ambulance Assistant level.

SPECIFIC REQUIREMENTS

Vehicle type:

1. The vehicle shall be modified, adapted and configured as an ambulance, enabling accommodation of at least one stretcher patient.

2. The vehicle shall be registered as an "Ambulance" with the relevant authorities according to existing Acts, ordinances or regulations.

3. The vehicle shall be clearly marked as an "Ambulance" on the front, sides and rear.

4. Red warning lights and sirens must be fitted to the registered ambulance.

5. The vehicle shall be fitted with radio or telephonic communications so as to provide continuous communication with the ambulance's control station.

Equipment

Airway & breathing:

- 4 Adult Oxygen Masks providing at least 40% inhaled oxygen and tubing
- Bag-Valve-Mask Reservoir Resuscitator (Adult) with a range of transparent masks
- Oxygen supply, providing 30 minutes of oxygen at 15 litres per minute minimum; ie. 1 fixed 10 litre $O_2$ cylinder and gauge minimum
- 1 portable 2 litre $O_2$ cylinder and gauge minimum
- 2 x Nasal cannula for oxygen
- 1 x Nitrous oxide 50% / oxygen 50% premix apparatus complete with delivery device
- 2 x Oropharyngeal airway No. 00
- 2 x Oropharyngeal airway No. 0
- 2 x Oropharyngeal airway No. 1
- 2 x Oropharyngeal airway No. 2
- 2 x Oropharyngeal airway No. 3
- 2 x Paediatric oxygen masks providing at least 40% inhaled oxygen and tubing
- 1 x Suction apparatus (hand, foot or battery operated)
- Range of hard and soft suction catheters
Circulation:
- 2 Rolls Adhesive Tape
- 3 x 75mm Bandages Elasticised
- 2 x 100mm Bandages Elasticised
- 1 x Wound dressing - extra large
- 5 x Wound dressing - 100mm x 100mm
- 2 x Packets of 10 gauze swabs
- Gloves (disposable), various sizes
- Sphygmomanometer with adult cuff
- 1 x Stethoscope
- Blood glucose monitoring strips

Disability:
- Ambulance stretcher with straps and mattresses with "body elevation" facility with appropriate fixation device
- 1 x Blanket and/ or sheet
- 1 x Space blanket
- Full set of cervical collars
- Long Spine Board or equivalent with straps
- Short Spine Board or equivalent with straps (if vehicle involved in patient extrications)
- 6 x Splints - long (leg)} ie. rigid support material eg. cardboard, metal, vacuum, wood,
- 4 x Splints - short (arm)} plastic, etc.
- 1 x Lower extremity traction splint (eg. Trac 3/ Thomas Tarangua etc.)

Others:
- Antiseptic Solution - 100ml or equivalent
- 1 x Fire Extinguisher
- Glucose powder or gel, 25gm minimum
- 1 x Pair of scissors
- Regurgitation Bags or receiver
- 1 x Torch
- Waste Disposal Facility and Sharps Container
- Maternity Pack
- 1 x Water Bottle
- Case book or patient record sheet

Personnel
Two persons minimum, shall staff the Basic Life Support ambulance, both of whom shall be registered as Basic Ambulance Assistants and have an appropriate validated driver's licence and Public Driving Permit.
The ambulance crew should be dressed in appropriate protective clothing.
INTERMEDIATE LIFE SUPPORT SERVICE

This level of patient transfer and treatment refers to an ill or injured patient requiring limited invasive medical intervention and intermediate life support medical care.

SPECIFIC REQUIREMENTS

Vehicle

1. The vehicle shall be modified, adapted and configured to resemble an ambulance enabling accommodation of at least one stretcher patient.

2. The vehicle shall be registered as an "Ambulance" with the relevant authorities according to existing Acts, ordinances or regulations.

3. The vehicle shall be clearly marked as an "Ambulance" on the front, sides and rear.

4. Red warning lights and sirens must be fitted to the registered ambulance.

5. The vehicle shall be fitted with radio or telephonic communications so as to provide continuous communication with the ambulance’s control room which is operational and suitably staffed 24 hour per day.

Equipment

Airway & breathing:

- 4 Adult Oxygen Masks providing at least 40% inhaled oxygen and tubing
- Bag-Valve-Mask Reservoir Resuscitator (Adult) with a range of transparent masks
- Bag-Valve-Mask Reservoir Resuscitator (Paediatric) with full range of paediatric masks
- Oxygen supply, providing 30 minutes of oxygen at 15 litres per minute minimum i.e. 1 fixed 10 litre O₂ cylinder and gauge minimum
- 1 portable 2 litre O₂ cylinder and gauge minimum
- 2 x Nasal cannula for oxygen
- 1 x Nitrous oxide 50% / oxygen 50% premix apparatus complete with delivery device
- 2 x Paediatric oxygen masks providing at least 40% inhaled oxygen and tubing
- 2 x Masks + nebuliser type
- 2 x Oropharyngeal airway No. 00
- 2 x Oropharyngeal airway No. 0
- 2 x Oropharyngeal airway No. 1
- 2 x Oropharyngeal airway No. 2
- 2 x Oropharyngeal airway No. 3
• 1 x Suction apparatus (hand, foot or battery operated)
• 2 x Neonatal suction catheters No. 5
• 2 x Neonatal suction catheters No. 8
• Range of hard and soft suction catheters
• 1 x Cricothyroidotomy equipment
• Magills forceps - adult

Circulation:

• 6 x Balanced Salt Solution eg. Ringers Lactate
• Intravenous fluids: 2 x Normal Saline 200ml
• Synthetic colloid 2 x units eg. Haemacel/ HAES-steril
• Range of administration sets and cannulae:
  • 2 x 60 microdrips/ ml
  • 4 x 15 drops/ ml
  • 4 x 14G cannulae/needle
  • 4 x 16G cannulae/needle
  • 4 x 18G cannulae/needle
  • 4 x 20G cannulae/needle
• Blood glucose monitoring strips
• Drugs according to SAMDC Scope of practice for AEA
• Range of syringes and needles
• Sphygmomanometer with adult and paediatric cuffs
• 1 x Stethoscope
• Monitor/ defibrillator:
  • Defibrillation type gel or pads
  • ECG electrodes
  • ECG Paper for monitor/ defibrillator
  • 2 x 18cm Spencer Wells (straight)

Dressings:

• 2 Rolls Adhesive Tape
• 3 x 75mm Bandages Elasticised
• 2 x 100mm Bandages Elasticised
• 1 x Wound dressing - extra large
• 5 x Wound dressing - 100mm x 100mm
• 5 x Wound dressing - 100mm x 200mm
• 2 x Packets of 10 gauze swabs
• gloves (disposable), various sizes

Disability:

• Ambulance stretcher with straps and mattresses with "body elevation" facility with appropriate fixation device
• 1 x Blanket and/or sheet
• 1 x Space blanket
• Full set of cervical collars
• Long Spine Board or equivalent with straps
• Short Spine Board or equivalent with straps (if vehicle involved in patient extrications)
• 6 x Splints - long (leg) ie. rigid support material eg. cardboard, metal, vacuum, wood,
• 4 x Splints - short (arm). ie. rigid support material eg. cardboard, metal, vacuum, wood,
• 1 x Lower extremity traction splint (eg. Trac 3/ Thomas Taranga etc.)

Others:

• Antiseptic Solution - 100ml or equivalent
• 2 x Urine drainage bag
• 1 x Fire Extinguisher
• Glucose powder or gel, 25gm minimum
• 1 x Pair of scissors
• Regurgitation Bags or receiver
• 1 x Torch
• Waste Disposal Facility and Sharps Container
• Maternity Pack
• 1 x Water Bottle
• Case book or patient record sheet

Optional

• Scoop stretcher with straps
• PASG/ MAST
• Pulse oximeter

Personnel

Two persons minimum shall staff the Intermediate Life Support Ambulance, both of whom shall have an appropriate validated drivers licence and Public Driving Permit. The patient attendant shall be registered as an Ambulance Emergency Assistant and be assisted by a minimum of a Basic Ambulance Assistant.

There shall also be a supervising registered medical practitioner, available 24 hours per day, for medical control.

The staff should be dressed in appropriate protective clothing.
ADVANCED LIFE SUPPORT SERVICE

This level of patient transfer and treatment refers to a seriously ill or injured patient requiring invasive medical intervention and continuous advanced life support medical care. If required intensive care management and transportation may also be offered for the transfer by road or air from or to an intensive care unit of a critically ill or injured patient requiring continuous medical care.

SPECIFIC REQUIREMENTS:

Vehicle:

1. The vehicle shall be modified, adapted and configured to resemble an ambulance enabling accommodation of at least one stretcher patient.

2. The vehicle shall be registered as an "Ambulance" with the relevant authorities according to existing Acts, ordinances or regulations.

3. The vehicle shall be clearly marked as an "Ambulance" on the front, sides and rear.

4. Red warning lights and sirens must be fitted to the registered ambulance.

5. The vehicle shall be fitted with radio or telephonic communications so as to provide continuous communication with the ambulance's control room on a 24 hour basis.

Equipment:

Airway & breathing:

- 4 x Adult oxygen masks providing at least 40% inhaled oxygen and tubing
- 2 x Paediatric oxygen masks providing at least 40% inhaled oxygen
- 2 x Nebuliser packs (adult/paediatric)
- 2 x Nasal cannula for oxygen
- 1 x T-piece \( \text{O}_2 \)
- Bag-Valve-Mask reservoir resuscitator (adult) with a range of transparent masks
- Bag-Valve-Mask reservoir resuscitator (paediatric and neonate) with a range of transparent masks
- 1 x Positive End Expiratory Pressure valve
- Oxygen supply, providing 30 minutes of oxygen at 15 litres per minute minimum
  ie. 1 x fixed 10 litre \( \text{O}_2 \) cylinder and gauge minimum
- 1 x portable 2 litre \( \text{O}_2 \) cylinder and gauge minimum
- 1 x Suction apparatus (hand, foot or battery operated)
• Range of hard and soft suction catheters
• 2 x Neonatal suction catheters No. 5
• 2 x Neonatal suction catheters No. 8
• 1 x Oropharyngeal airway No. 000
• 2 x Oropharyngeal airway No. 00
• 2 x Oropharyngeal airway No. 0
• 2 x Oropharyngeal airway No. 1
• 2 x Oropharyngeal airway No. 2
• 2 x Oropharyngeal airway No. 3
• Batteries - spare for laryngoscope
• Cricothyroidotomy equipment - disposable
• Endotracheal tubes, disposable type - full range of paeds to adult sizes
• 1 each Endotracheal tube introducer - paediatric + adult
• 1 each Magills forceps - adult + paediatric
• 2 each x Syringe 10ml and 20ml
• 1 x pair of sharp scissors
• Tape to tie tubes - 1 metre
• Water soluble lubricant gel
• Laryngoscope set - adult and paediatric blades
• 2 x Heimlich type flutter valve and urine bags
• Nasogastric tubes - full range of sizes and urine bags
• Pulse oximeter

Circulation:

• 2 x Normal Saline 200ml
• 2 units x Synthetic colloid eg. Haemacel/ HAES-steril
• 6 x Balanced Salt Solution eg. Ringers Lactate
• 2 x 60 microdrips/ ml
• 4 x 15 drops/ ml
• 1 x High capacity set
• 4 x Infusion flow regulators
• 4 x 14G cannulae/needle
• 4 x 16G cannulae/needle
• 4 x 18G cannulae/needle
• 4 x 20G cannulae/needle
• 2 x Infusion pressure bag
• Antiseptic solution - 100ml or equivalent
• Gloves (Non-sterile), various sizes
• Sphygmomanometer with adult and paediatric cuffs
• 1 x Stethoscope
• Blood Glucose monitoring strips
• 5 x Dextrose 50% intravenous, 20ml ampoules
• Range of syringes and needles
• Drugs according to - SAMDC Scope of Practice for CCA/ Nat. Dip. AEC
(as prescribed for specific patient)

- Monitor/ defibrillator:
- Defibrillation type gel or pads
- ECG Electrodes for adults and neonates
- ECG Paper for monitor/ defibrillator
- 1 x 18 Spencer Wells (Straight)
- 1 x Pair of Scissors

**Dressings:**

- 2 x Rolls adhesive tape
- 3 x 75mm bandages elasticised
- 2 x 100mm bandages elasticised
- 1 x Wound dressing - extra large
- 5 x Wound dressing - 100mm x 100mm
- 5 x Wound dressing - 100mm x 200mm
- 5 packets x Gauze swabs, 10 swabs per packet

**Disability:**

- Full set of cervical collars
- 1 x each Long spine board or equivalent with straps
- 1 x Short spine board or equivalent with straps
- 6 x Splints - long (leg) ie. rigid support material eg. cardboard, metal, vacuum,
- 4 x Splints - short (arm) wood, plastic etc.
- Ambulance stretcher with straps and mattress with "body elevation" facility with appropriate fixation devices
- 1 x Blankets and/ or sheets, pillows, pillow cases
- 1 x Space blanket

**Others:**

- 1 x Bedpan
- 1 x urine drainage bag
- Maternity pack
- Waste Disposal facility
- Sharps container
- Regurgitation bags or receiver
- Container of drinking water with cups
- Case book or patient record sheet
- 1 x Fire extinguisher
- 1 x Torch
Optional:

- Scoop stretcher with straps
- Pneumatic Anti Shock Garment
- Mechanical volume cycled ventilator, adult
- External Cardiac Pacer

Requirements for Mobile Intensive Care Unit transfers

- 1 x Urinal
- 1 x Humidification device
- 1 x Mechanical Volume Cycled Ventilator, adult
- Thermometer - standard and low reading or other patient temperature reading device
- Emergency medication cooler bag - if drug medications/ blood need to be kept cool
- Heat Moisture Exchanger valve - for ventilated patients
- Mechanical/ automatic vital signs monitor (Blood pressure, pulse, temperature)
- Mechanical infusion pump or syringe driver with appropriate administration sets
- 2 x 3 way stopcocks
- Urinary catheters - full range of sizes

Requirements for Mobile Intensive Care Unit Neonatal transfer

- Neonatal ventilator
- Incubator (transport) with backup battery power and on board alarms
- Automatic Vital Signs Monitor with neonatal probes (NIBP/ Invasive arterial pressure anometers/ SaO₂ / ETCO₂ / HR/ Respiratory/ Temperature)
- Incubator head box (optional)
- O₂ inspired analyser

Personnel for Advanced Life Support Ambulance

Two persons minimum shall staff the Advanced Life Support Ambulance. The driver, besides having a valid and appropriate Driver's Licence and Public Driving Permit for the specific type of vehicle being manned, shall also be registered as a minimum as a Basic Ambulance Assistant. The patient attendant shall be registered as a Paramedic or Medical Practitioner. It is recommended that the ALS patient attendant be assisted by a minimum of an Ambulance Emergency Assistant.

There shall also be a supervising registered medical practitioner, available 24 hours per
day, for medical control, advice or intervention by radio, telephone or on scene intervention. It is highly recommended that the registered medical practitioner hold currently valid ATLS, ACLS, PALS, APLS, BTLS or PHTLS certificates or equivalent.

The staff should be dressed in appropriate protective clothing.

**Aeromedical**

Operators of emergency medical aeromedical services must comply with Civil Aviation regulations.

All AMBULANCE SERVICES personnel in the aviation environment must have successfully completed the Aviation Health Care Providers Course, as determined by the Professional Board.
ADVANCED LIFE SUPPORT RESPONSE SERVICE

This level of patient transfer and treatment refers to a seriously ill or injured patient requiring invasive medical intervention and continuous advanced life support medical care. If required intensive care management and transportation may also be offered for the transfer by road or air from or to an intensive care unit of a critically ill or injured patient requiring continuous medical care.

SPECIFIC REQUIREMENTS:

Vehicle:

1. The vehicle shall be modified, adapted and configured to enabling accommodation and transportation of ALS response equipment.
2. The vehicle shall be registered as a “response unit” with the relevant authorities according to existing Acts, ordinances or regulations.
3. Red warning lights and sirens must be fitted to the response unit.
4. The vehicle shall be fitted with radio or telephonic communications so as to provide continuous communication with the ambulance's control room on a 24 hour basis.

Equipment:

Airway & breathing:

- 2 x Adult oxygen masks providing at least 40% inhaled oxygen and tubing
- 1 x Paediatric oxygen masks providing at least 40% inhaled oxygen
- 1 x Nebuliser packs
- 1 x Nasal cannula for oxygen
- 1 x T-piece O2
- Bag-Valve-Mask reservoir resuscitator (adult) with a range of transparent masks
- Bag-Valve-Mask reservoir resuscitator (paediatric) with a range of transparent masks
- 1 x Positive End Expiratory Pressure valve
- Oxygen supply, providing 15 minutes of oxygen at 15 litres per minute minimum ie. x portable litre O2 cylinder and gauge minimum
- 1 x Suction apparatus (hand, foot or battery operated) +
- 1 x Neonatal suction catheters No. 5
- 1 x Neonatal suction catheters No. 8
- 1 x Oropharyngeal airway No. 000
1 x Oropharyngeal airway No. 00
1 x Oropharyngeal airway No. 0
1 x Oropharyngeal airway No. 1
1 x Oropharyngeal airway No. 2
1 x Oropharyngeal airway No. 3
Batteries - spare for laryngoscope
Cricothyroidotomy equipment - disposable
Endotracheal tubes, disposable type - full range of paeds to adult sizes
1 each Endotracheal tube introducer - paediatric + adult
1 each Magills forceps - adult + paediatric
2 each x Syringe 10ml and 20ml
1 x pair of sharp scissors
Tape to tie tubes - 1 metre
Water soluble lubricant gel
Laryngoscope set - adult and paediatric blades
2 x Heimlich type flutter valve and urine bags
Nasogastric tubes - full range of sizes and urine bags

Circulation:

1 x Normal Saline 200ml
1 unit Synthetic colloid eg. Haemacel/ HAES-steril
2 x Balanced Salt Solution eg. Ringers Lactate
1 x 60 microdrips/ ml
2 x 15 drops/ ml
1 x High capacity set
1 x Infusion flow regulators
4 x 14G cannulae/needle
4 x 16G cannulae/needle
4 x 18G cannulae/needle
4 x 20G cannulae/needle
1 x Infusion pressure bag
Antiseptic solution - 100ml or equivalent
Gloves (Non-sterile), various sizes
Sphygmomanometer with adult and paediatric cuffs
1 x Stethoscope
Blood Glucose monitoring strips
5 x Dextrose 50% intravenous, 20ml ampoules
Range of syringes and needles
Drugs according to - INMDC Scope of Practice for CCA/ Nat. Dip. AEC
(as prescribed for specific patient)
Monitor/ defibrillator:
Defibrillation type gel or pads
ECG Electrodes for adults and neonates
• ECG Paper for monitor/defibrillator
• 1 x 18 Spencer Wells (Straight)

Dressings:
• 2 x Rolls adhesive tape
• 3 x 75mm bandages elasticised
• 2 x 100mm bandages elasticised
• 1 x Wound dressing - extra large
• 5 x Wound dressing - 100mm x 100mm
• 5 x Wound dressing - 100mm x 200mm
• 5 packets x Gauze swabs, 10 swabs per packet
• 1 x Pair of Scissors

Disability:
• Full set of cervical collars
• 1 x Short spine board or equivalent with straps (if vehicle involved in patient extrications)
• 4 x Splints - long (leg) ie. rigid support material eg. cardboard, metal, vacuum,
• 4 x Splints - short (arm) ie. rigid support material eg. cardboard, metal, vacuum,
• 1 x Space blanket

Others:
• 1 x urine drainage bag
• Sharps container
• Maternity pack
• Case book or patient record sheet
• 1 x Fire extinguisher
• 1 x Torch

Optional:
• PASG/MAST
• Mechanical volume cycled ventilator, adult
• Pulse oximeter
• External Cardiac Pacer
Requirements for MICU transfers

- 1 x Humidification device
- 1 x Mechanical Volume Cycled Ventilator, adult
- Thermometer - standard and low reading or other patient temperature reading device
- Emergency medication cooler bag - if drug medications/ blood need to be kept cool
- Heat Moisture Exchanger valve - for ventilated patients

Optional:

- 1 x PASG/ MAST

Requirements for MICU Neonatal transfer

- Neonatal ventilator
- Automatic Vital Signs Monitor with neonatal probes (NIBP/ Invasive arterial pressure anometers/ \( \text{SaO}_2 \)/ \( \text{ETCO}_2 \)/ \( \text{HR} \)/ Respiratory/ Temperature)

Personnel for Advanced Life Support Ambulance

Two persons minimum shall staff the Advanced Life Support Response Unit. The driver, besides having a valid and appropriate Driver's Licence for the specific type of vehicle being manned, shall also be registered at least as a Basic Ambulance Assistant. The patient attendant shall be registered as a Paramedic.

If training is being undertaken on the vehicle, then the student (/s) will be supernumary to the operational crew.

There shall also be a supervising registered medical practitioner, available 24 hours per day, for medical control, advice or intervention by radio, telephone or on scene intervention. It is highly recommended that the registered medical practitioner hold currently valid ATLS, ACLS, PALS, APLS, BTLS or PHTLS certificates or equivalent.

The staff should be dressed in appropriate protective clothing.
This category refers to the medical rescue of patients by appropriately trained AMBULANCE SERVICES personnel utilising specialised rescue equipment.

SPECIFIC REQUIREMENTS

Vehicle Type

1. The vehicle shall be modified, adapted and configured for medical rescue, taking into consideration equipment storage and weight factors.

2. The vehicle shall be registered as a medical rescue vehicle with the relevant authorities, according to existing legislation.

3. The vehicle shall be clearly marked as a “Medical Rescue” unit.

4. The vehicle shall be fitted with a red light and sirens.

5. The vehicle shall be fitted with radio or telephonic communications so as to provide continuous communications with the control centre.

6. The vehicle shall be capable of carrying a crew of at least two personnel.

Equipment

As per attached lists in accordance with specific applications.

Personnel

The medical rescue vehicle shall be staffed with a minimum of two registered AMBULANCE SERVICES personnel, of which one shall be registered as an Ambulance Emergency Assistant, Paramedic or Medical Practitioner. In addition to being registered with the Professional Board all crew members shall have successfully completed at least the Basic Medical Rescue course, as determined by the Professional Board.

The crew shall be appropriately attired in protective clothing.
Hydraulic spreader, cutter and rams
A/C Generator and lighting Plant
Air lifting bags and cylinders
Chocks
Spinal immobilisation extrication device
Spider harness
Head blocks
Scoop stretchers
ILS Jump bag
Trauma Board
Stokes Basket
Portable oxygen administration set
Bolt cutters
Traffic cones
Fire Extinguisher
Helmets
Gloves
Reflective jackets
2 X 50 m Utility Ropes
2 X Abseil Harnesses
2 X Abseil Devices
4 Long slings
Eye protection
Abseil harnesses
Abseil Devices
Ascenders
Long slings
Triangular Skrewgate Karibiners
Skrew Gate Karabiners
Cows tails
Helmets
Helmet Lamps
Rescue stretcher and Bridle
Spider Harness
Pulleys
Prussik Cord
Rope protectors
Edge Rollers
Gloves
Anchor Devises
Rope Bags
ILS Jump Bag
Portable Oxygen admin. Set
Spinal Immobilisation Extrication Device
Stokes Basket
Airband Two-way Radio
Portable Simplex Radios
Back Packs
TRENCH AND BUILDING RESCUE

- Shoring Boards
- Skrew Jacks
- Spades
- Hydraulic Spreader, Cutter and Rom
- Ladders
- Chocks
- Air Lifting Bags and Cylinders
- Pulleys
- Triads
- Ropes
- Karabiners X2
- Harness X2
- Slings
- Gloves
- Helmets
- Stokes Basket
- Spinal immobilisation Extrication Device
INDUSTRIAL RESCUE

- Hydraulic Spreader Cutter and Ram
- Assorted Tools
- Petrol Angle Grinder
- Tub of Petroleum Jelly
- Air lifting bag and cylinders
- Chocks
- Hot stick
- Linesman Gloves
- Pneumatic power tools
SWIFT WATER RESCUE

- Inflatable Dinghy
- polypropylene Rope
- Life jackets
- Helmets
- Thermal Suits
- Slings
- Throw Bags
- Torpedo Buoy
- Scuba Set
- Portable Radios
- Fins
- Harnesses
- Karibiners
- Pulleys
- Rescuecenders
- Prussic Cord
- Spinal Immobilization Extrication Device
- Stokes basket
DIVING RESCUE

- Shotlines
- 50 kg Buoys
- Shotline Weights
- Line reels
- Floating Boat
- ILS Jump Bag
- Portable Oxygen Equipment
- Thermal Suits
- Scuba Cylinder, BS Harness and Regulator
- Masks, snorkels, Fins
- Weight belts
- Diving Flag
- Underwater torches
- Helms
- Surface Marker Buoys
- Lift Bags
- Utility rope

Qualification

- Class IV Emergency Diver Certificate
HAZARDOUS MATERIAL

- Encapsulated Suit
- Breathing Apparatus
- Stretcher and immobilizing devices
- Portable Oxygen Administrative set
- ILS Jump Bag
- Decontamination Shower
CONFINED SPACE

- Breathing Apparatus
- Line Reels
- Generator and Lighting
- Gloves
- Helmets
- Head lamps
- Rescue Rope
- Stings
- Abseil Harnesses
- Abseil Device
- Tripod
- Phyllis
- Stretches
- Spider Harness
- Head Blocks
- Portable Oxygen Administration set
- ILS Jump Bag
- Thermal Blanket