



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



**National Ambulance Service (NAS)**  
**Ambulance Operations (Fleet) Procedure**  
**Vehicle Evacuation Procedure**

<b>Document reference number</b>	<b><i>NASOF009</i></b>	<b>Document developed by</b>	<b>Operational Support and Resilience Manager</b>
<b>Revision number</b>	<b>4</b>	<b>Document approved by</b>	<b>NAS Leadership Team</b>
<b>Approval date</b>	<b>7<sup>th</sup> August 2013</b>	<b>Responsibility for implementation</b>	<b>Chief Ambulance Officers/Area Operations Mgrs</b>
<b>Revision date</b>	<b>31<sup>st</sup> December 2019</b>	<b>Responsibility for review and audit</b>	<b>National Fleet Group (NFG)</b>

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## **1.0 POLICY**

- 1.1 The policy of the National Ambulance Service (NAS) is to ensure that all staff are provided with and are aware of safe systems of work.

## **2.0 PURPOSE**

- 2.1 To provide staff with evacuation instructions in the event of a:
  - A. Vehicle Collision
  - B. Potential or Actual Vehicle Fire
- 2.2 To specify managerial, supervisory and individual responsibilities relating to safety equipment checks, frequency of checks and attendance at training and maintenance of training records.

## **3.0 SCOPE**

- 3.1 This Procedure applies to all NAS staff while operating any NAS vehicle.

### **4.1 LEGISLATION/OTHER RELATED POLICIES**

- A. Sections 8 & 13, Safety, Health and Welfare at Work Act 2005
- B. Procedure – NASOF002 - Daily Vehicle Inspection & Inventory Check
- C. National Ambulance Service Safety Statements

## **6.0 ROLES AND RESPONSIBILITIES**

- 6.1 It is the responsibility of the National Ambulance Service Leadership Team to ensure the dissemination of this Procedure to all staff in their area of responsibility
- 6.2 Supervisors report directly to the Operations Resource Managers who are responsible for the Area.
- 6.3 Each staff member is responsible for ensuring compliance with these evacuation procedures and attending annually at Fire Safety training.

- 6.4 Line Supervisors/Line Managers with immediate responsibility for vehicles, are responsible for ensuring that all preventative servicing and maintenance of vehicles, equipment and safety devices is carried out as per manufacturer's instructions and that appropriate, accurate and accessible records of same are maintained on Fleetwave.
- 6.5 Supervisors are responsible for communicating this Procedure to all staff within their area of responsibility.
- 6.6 Operations Resource Managers will monitor the performance of Supervisors within their areas of responsibility.
- 6.7 The Education and Competency Assurance Team are responsible for ensuring that scheduled People Moving and Handling Training includes vehicle evacuation and that appropriate, accurate and accessible training records are maintained.
- 6.8 Line Supervisors/Line Managers are responsible for ensuring that all staff within their area of responsibility are released and attend training, scheduled by the Education and Competency Assurance Team

## **7.1 PROCEDURE**

### **7.2 VEHICLE EVACUATION – COLLISION**

- 7.2.1 No two collisions are the same. The sequence suggested here may not be the same for every collision. Good common sense must be used.
- 7.2.2 The staff's primary responsibility is to the patient(s). Therefore, it is imperative to remain calm and provide leadership.
- 7.2.3 Following a crash situation :
  - A. Turn off engine, use portable lights if necessary and inspect patients and vehicle, in this order. One crew member to carry out steps B to E and one crew member to complete steps F and G.
  - B. Check for ruptured fuel tank and fuel lines
  - C. Look for smoke
  - D. Check for electrical fire
  - E. Check for hot tyres which may catch fire
  - F. Evacuate patients If appropriate
  - G. Ensure all patients are accounted for
  - H. Use a warning triangle if possible
- 7.2.4 If evacuation is required, see Section 7.2. For specific instructions on different egress routes, see Appendix II.

7.2.5 Do not use a mobile phone in the vicinity of a damaged petrol vehicle.

7.2.6 Once the patient(s) are safe, contact Ambulance Control:

- A. State your name
- B. Vehicle Call sign
- C. Current location
- D. Description of emergency
- E. Request Fire Service, Gardai and backup vehicle(s). The clearer the description, the quicker the rescue response

7.2.7 Provide support to patient(s) and keep them calm. The Fire Service on arrival will take charge of the incident. Cooperate with the Fire Service and provide them with all appropriate information.

7.2.8 Remove patients to a place of safety until assistance arrives.

### **7.3 VEHICLE EVACUATION - FIRE**

7.3.1 In the event of a suspected vehicle fire, confirm vehicle fire, evacuate the vehicle and attack the fire if safe to do so using the appropriate fire extinguishers. Contact Ambulance Control/Fire Service where possible.

7.3.2 In an existing or imminent fire or smoke condition, EVACUATE IMMEDIATELY using the following procedures:

- A. Quickly compose yourself, assume a leadership role.
- B. Inform any patient(s) on board that the emergency is under control, that you are in control of the emergency and that help is on the way.

7.3.3 Visually assess the situation quickly:

- A. Fire/Smoke condition
- B. Patient(s) condition
- C. Number of patients (recumbent/wheelchair/sitting)
- D. Availability of help
- E. Vehicle condition
- F. Available exits

7.3.4 Initially, do not fight a vehicle fire unless you are confident of immediate suppression using the vehicle Fire Extinguisher. You are primarily responsible for the evacuation of patients, your crew members and yourself.

### 7.3.5 Lead and participate in evacuation:

- A. Evacuation should be carried out by all members of the crew working together.
- B. Instruct all patients, if capable, to release their seat belts. For those who can't, release them or cut them with the belt cutter.
- C. For patients using wheel chairs only, the safety belt should be released or cut. Wheel chairs and other assistive devices should be left on the vehicle. They may be recovered later.
- D. Lead to the most usable exit.
- E. Assist mobile patients first. (Ambulant Patients that can self evacuate)
- F. Assist immobile patients. This will take additional planning, time and physical movement.
- G. Verify all patients have been evacuated and moved to a safe distance from the vehicle and other traffic (preferably 35 metres).

### 7.3.6 Once the patients are safe, contact Ambulance Control:

- A. State your name
- B. Vehicle Call sign
- C. Current location
- D. Description of emergency
- E. Request Fire Service, Gardai and backup vehicle(s). The clearer the description, the quicker the rescue response

### 7.3.7 Provide support to evacuated patients and keep them calm. Once the Fire Service arrives, they assume responsibility for the evacuation process. Cooperate with the Fire Service and provide them with all appropriate information.

## **8.0 IMPLEMENTATION PLAN**

- 8.1 This Procedure will be circulated electronically to all Area Operations Managers.
- 8.2 This Procedure will be circulated electronically to all Officers, all Supervisors and Staff by the AOMs.
- 8.3 This Procedure will be available electronically in each Ambulance Station and Ambulance Control for ease of retrieval and reference
- 8.4 Each Supervisor will return the Confirmation Form to each Area Headquarters to confirm document notification to all staff.

## 9.0 REVISION AND AUDIT

- 9.1 This Procedure will be reviewed whenever circumstances, changes in vehicle engineering/procedures and/or operational practices or a relevant event dictate.
- 9.2 Due to the nature of the services provided, unforeseen situations may arise that may not be addressed by this Procedure. If such an event should occur, common sense, teamwork and professionalism will ensure that staff overcome the problem.

**10.0 Revision History:** (This captures any changes that are made to a SOP when it has been revised. This may be placed at the back or close to the front of the document according to local preference.)

No	Revision No	Date	Section Amended	Approved by
1	4	01/01/2017	No Amendments	Fleet Logistics & Support Mgr

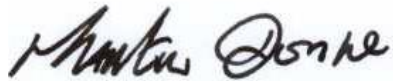
## 11.0 Appendices:

- I. Left side and Rear Door Evacuation
- II. Acknowledgement Form for Policy/Procedure

(All forms to be attached to Master Document)

## 12.0 Signatures of Approval

All persons must sign and date this page after they have read and understood the Standard Operation Procedure/Policy.



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Martin Dunne  
National Ambulance Service Director  
On Behalf of the National Ambulance Service

Date     **3<sup>rd</sup> January 2017**



## **Appendix I**

### **Procedures in an Emergency Evacuation Situation**

- Shut off the engine and set the parking brake
- Place the gearbox in first or reverse gear
- Remove the ignition key
- Evacuate mobile patient(s) first
- Where time allows stand at the door, face the patient(s), and get their attention
- Evacuation should take place either through the left side door/rear door or both if available for use.
- Use other alternative emergency exits as appropriate
- Give the command: "Evacuate - remain calm"
- Explain to the patient(s) what order they are to leave or are being physically moved
- Physically assist immobile patients on a sheet or patient sling.  
Do not waste time using other patient handling devices
- Where the vehicle is fitted with an external tail lift and the vehicle is upright on it's wheels, use the manual override to lower the ramp and allow the second rear door to open.

**Document Control No. 1 (to be attached to Master Copy)**

## **NASOF009 Vehicle Evacuation Procedure**

**Reviewer:** The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation in the HSE is circulated to a peer reviewer (internal or external), in advance of approval of the PPPG. You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have reviewed and agreed the content and recommend the approval of the following Policy, Procedure, Protocol or Guideline:

**Title of Policy, Procedure, Protocol or Guideline:**

## **NASOF009 Vehicle Evacuation Procedure**

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read Policy, Procedure, Protocol or Guideline document.
- I agree with the Policy, Procedure, Protocol or Guideline and recommend its approval by the committee developing the PPPG.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature (Block Capitals)

\_\_\_\_\_  
Date

**Please return this completed form to:**

**Name:** Niamh Murphy  
**Contact Details:** Corporate Office  
National Ambulance Service  
Rivers Building  
Tallaght Cross  
Dublin 24  
email [niamhf.murphy1@hse.ie](mailto:niamhf.murphy1@hse.ie)

**Document Control No. 2 (to be attached to Master Copy)**

## **Key Stakeholders Review of Policy, Procedure, Protocol or Guidance Reviewer Statement**

**Reviewer:** The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation in the HSE is circulated to Managers of Employees who have a stake in the PPPG, in advance of approval of the PPPG. You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have seen and agree to the following Policy, Procedure, Protocol or Guideline:

**Title of Policy, Procedure, Protocol or Guideline:**

### **NASOF009 Vehicle Evacuation Procedure**

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read Policy, Procedure, Protocol or Guideline document.
- I agree with the Policy, Procedure, Protocol or Guideline and recommend its approval by the committee developing the PPPG.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature (Block Capitals)

\_\_\_\_\_  
Date

**Please return this completed form to:**

**Name:** Niamh Murphy  
**Contact Details:** Corporate Office  
National Ambulance Service  
Rivers Building  
Tallaght Cross  
Dublin 24  
email [niamhf.murphy1@hse.ie](mailto:niamhf.murphy1@hse.ie)

