

Ambulances to be improved

AMBULANCE services would be upgraded — within reasonable cost — the Secretary for Security, Mr David Jeaffreson, said in winding up the adjournment debate on the service.

Earlier, just as the debate had got into their rhetorical stride, the Governor, Sir David Wilson, left the chamber for two minutes — a rare occurrence since it is traditional for the president to stay rooted to his throne until a recess is called.

Mr Jeaffreson, while joining councillors in applauding all ambulancemen and the Order of St John, which dates back to the Crusades, said the service was adequate — and improving.

The councillors, led by Dr Henrietta Ip, concluded that Hongkong's ambulance service should receive increased public funds with which to obtain more vehicles, have the whole fleet air-conditioned, train paramedics, equip more mobile medical units and reach the patients quicker.

They suggested using ordinary vehicles for non-emergency operations — such as transporting the elderly between convalescent homes — and taking the service from the Fire Services Department's jurisdiction and putting it under the Medical and Health Department.

vehicles that would be replaced over the next three years through attrition.

The secretary added that two ambulancemen had been sent to Britain to study the work of paramedics.

However, he would not guarantee that more mobile medical units would be introduced, pointing out that the sole existing unit had been summoned only 52 times since its establishment in 1985.

The debate was prompted by a Legislative Council special committee set up to review the ambulance service, currently manned by 1,700 staff, to see whether and where improvements were needed.

After questioning the St John's Ambulance Brigade and poring over the Health Operational Research Unit (HORU) Consultancy Report, the six councillors concluded that with commitment and more funds the service could be improved.

Senior Legislative Councillor and Chairman of the Regional Council Mr Cheung Yan-lung was disturbed that on average it took an ambulance more than half an hour to reach a patient in the New Territories. That is 20 to 25 minutes longer than recommended by the British medical authorities and substantially slower than in the city where the crew could get to the patient within 15 minutes of an emergency call.

Said Dr Ip: "Ninety-five per cent of the emergency calls in urban areas and new towns must be met within 10 minutes."

But Mr Jeaffreson said it

Councillor Dr Chiu Hin-kyong, acknowledging that such a switch might be too abrupt, stressed "the Medical and Health Department should increase its involvement in the provision of a quality ambulance service".

Professor Poon Chung-kyong said his colleagues at the Hongkong University Medical Department thought ambulances were not properly equipped and the crews not adequately trained.

He said ambulances, besides being equipped with direct radio links to emergency wards, should also have portable electrocardiogram (ECC) machines and defibrillators ... portable incubators, monitors, ventilators and air-conditioners".

Mr Jeaffreson said that of the 228 ambulances in the Government fleet, 133 were already air-conditioned while the rest were vintage

ity of the ambulance is to provide first aid to patients ... and to transfer them to nearby hospitals."

Since hospitals were few and far between in the northern New Territories, the councillors suggested providing more ambulances, depots and mobile medical units staffed by doctors.

They also recommended enlarging the existing seven-man motorcycle ambulance unit, in which motorcyclist medics are rushed to traffic-congested areas or to the stranded ambulances to apply first aid.

was not possible to send instant help to remote villages and stranded trekkers even by helicopter. He added that in 71 per cent of emergency cases in the New Territories, ambulances arrived at the scene within 20 minutes.

The secretary, however, agreed with Dr Chiu who proposed upgrading the emergency care facilities at rural and district hospitals and training ambulance crews to handle critical cases — especially those involving cardiac arrest.

Dr Chiu, who represents the medical constituency, said: "The main responsibility

But, said Dr Ip, any new equipment for the ambulance service would be worth nothing if the crew were not better trained.

She said the 14-week training period — once lowered to eight weeks in 1979 — was too brief and suggested it be extended to 24 weeks as recommended by the Health Operational Research Unit report.

The councillors also asked for penalties against those who called ambulances needlessly.

Though acknowledging that some residents were lit-

erally taking ambulances for a ride, Councillor Mr Tam Yiu-chung said the Government ought to distinguish between "misuse and abuse".

Cases in which the elderly were whisked to and from hospitals for regular check-ups, he labelled "misuse" and those in which able-bodied folk feigned injury for a lark or a free ride he called "abuse".

While fines for miscreants should be considered, the councillors, like the Government, were against charging patients for the ambulance service.

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