

الإسعاف National
الوطني Ambulance

2022

Audit and Inspection Preparation Guide

Audit and Inspection Preparation Guide
April 2022

Restricted Document وثيقة محفوظة

QHP106
Version 5

Intent of this guide

This Book is a resource for staff facing internal and external audits and inspections from QHSE and other groups. More importantly it provides guidance for audits from Joint Commission International (JCI) and the International Organization for Standardization (ISO).

This guide is updated annually to reflect periodic changes of requirements that have occurred.

We expect all staff to be familiar with the contents of this guide and review it each year in preparation for upcoming audits/inspections.

As this book is an overview, additional reading such as policies, procedures, clinical guidelines, ISO standards, JCI standards etc. can be accessed via :

HEAD OFFICE

- Internal Reference Library
- e-library Folder
- Head Office Notice Board

EXTERNALLY

- Company Web Portal
(www.nationalambulance.ae <Controlled Documents >)
- Learning Management System (training.nationalambulance.ae)
- Upon request to qhse@nationalambulance.ae
- Site Notice Board

It is the responsibility of all staff to be fully prepared for audits & inspections



Who is responsible for QHSE

“ We are all responsible “

Why Audits and Inspection

National Ambulance conduct regular audits, reviews and investigations of the current operations, contracts and clinical care.

This aims to:

- Find ways to improve processes, programs, functions and clinical outcomes;
- Provide information that supports effective decision making;
- Identify real or potential misuse of National Ambulance resources; and,
- Educate, reward, and improve clinical care.

Internal Audits and Inspections

Internal Audits and inspections are regularly conducted by QHSE or a member of the leadership group.

They aim to identify improvement, assist, teach and help make things better.

It is always better to identify and fix any problems with an internal audit/investigation than an external audit / investigation.

The internal auditor is often seen as your best friend.

Station / General Safety

* 52. Station cleaning record is maintained with one clean recorded in the past week?

- Yes
- No
- Not applicable
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

53. The lighting levels are appropriate?

- Yes
- No
- Not Applicable

* 54. There is visible pest control?

- Yes
- No
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

* 55. All electrical cables and equipment are correctly arranged (Laptop, Mobile phones etc.)

- Yes
- No
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

* 56. There is no overloading of power points?

- Yes - there is no overloading at all
- No - there is overloading of sockets
- No - there is incorrect use of power points
- No - there is both overloading or underloading
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

Site QHSE Noticeboard

QHSE Noticeboard

Whenever there is a Staff Rest Area there should be a QHSE Noticeboard. The reason we have it at each site is the following:

- 1) when staff are resting they have more time to look at the noticeboard and read and know the content on it. Hence why we keep the latest version of the various QHSE communications and Strategic Plan.

- 2) Every site has unique risks. As a result the Risk Assessments for that particular site must be known and read by all staff working at that site.

Infection Control

* 42. The staff rest area has an adequate supply of hand disinfection product available for regular staff use and within expiry date?

- Yes
- No
- N/A
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

The layout of this noticeboard is as follows:

When looking at the sleeves, make sure the pins are removed from those sleeves. As a result:
1) the pin isn't also used on the rest area
2) one corner pin is only used on the reference material.

This should be done on the Strategic Committee Communications, Emergency blank team member salute card.

We will look at different parts of the noticeboard to ensure everything is correct. It is presented correctly.

QHSE Noticeboard Template

* 43. "Healthy Hands Start Here" products are located?

- Yes
- No
- N/A
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

Healthy Hands Start Here Reminder

* 44. Does the bathroom have a door?

- Yes
- No
- No bathroom this location
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

* 45. Does the bathroom or toilet have a window?

- Yes
- No
- No bathroom this location
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

Stores Area Audit Page

* 27. Is the storeroom arranged correctly? (refer description below)

- Yes - No change required
- Yes - but after I made some changes
- No
- Not applicable
- CANCEL THE AUDIT

* 28. Is one foot kept clear at the top of any storage to ensure fire safety controls are not blocked?

- Yes
- No
- Not applicable
- CANCEL THE AUDIT

* 29. Is there visible and effective pest control in the stores area?

- Yes
- Partially - No visible pest activity BUT pest controls not visible
- No - Visible pest activity can be seen and INEFFECTIVE pest controls are visible
- No - Visible pest activity can be seen and NO pest controls are visible
- CANCEL THE AUDIT

Pest control is important as:

- 1) pests spread bacteria and
- 2) can also break protective seals and packaging exposing the elements and additional bacteria to those supplies

* 30. Appropriate temperature control monitoring and controls exist?

- Yes
- Partially - as it is missing the "Temperature Monitoring" label
- No
- CANCEL THE AUDIT
- Other (please specify in the comment box at the end of this section)

Sample pages of National Ambulance Site Inspection Checklists

External Auditor's - ISO/JCI

Many external audits are conducted within National Ambulance. This guide focus on two external auditors in particular: International Organizations for Standardization (ISO); and Joint Commission International (JCI).

International Organization for Standardization (ISO)

The International Organization for standardization provides internationally recognised guidelines the organisation must follow to achieve a recognized standard.

National Ambulance currently satisfies the following ISO Standards:

ISO 9001 sets out the criteria / standards for **quality management**. Key Elements include:

- a. Use of controlled documents.
- b. Continuous Improvement.
- c. Internal and external audit.
- d. Preventive and Corrective actions.
- e. Compliance with legal requirements.
- f. Quality service for stakeholders.

ISO45001 helps in identifying and controlling **health and safety risks** and maintaining a safe workplace. Key Elements include:

- a. Health & Safety Risk Assessments & Risk Reduction Management.
- b. Health & Safety training and awareness.
- c. Emergency preparedness, Fire Safety & Emergency Evacuation Plans.
- d. Identification of the work hazard.
- e. Health and safety of staff.

ISO 14001 sets out **environmental standards** which aims to reduce the environmental impact of our operations on the environment. Key Elements include:

- a. Reduce potential environmental accidents in the workplace.
- b. Handle waste and energy consumption.
- c. Promote the conservation of natural resources e.g. energy, water & paper.
- d. Reduce the impact of the organization's activities on the environment

For further reading, the following ISO Standards can be found within the National Ambulance e-library under

- ISO 9001:2015 Quality Management Standard
- ISO 14001:2015 Environment Standard
- ISO 45001:2018 Health & Safety Standard

JCI Quality and Safety Oversight

Joint Commission International (JCI) inspects an organization against a set of minimum standards for medical transport.

National Ambulance commenced the JCI journey in early January 2013

National Ambulance must satisfy these criteria to be considered a world class Medical Transport organization. Unlike ISO which is more generic across all industries, JCI is very focused on what standards are required to be considered a world class medical transport service.

Achieving and maintaining JCI accreditation is the highest priority for the NA Board of Management as it signals excellence and best practice both locally & internationally.

JCI Audit Methodology

JCI uses an audit process called the tracer methodology. This uses information from the organization to follow the experience of care, treatment or service through the entire delivery process. This includes:

- A. Individual tracing of individual patient experience from beginning to end.
- B. System tracing to ensure the systems are working. There is particular focus is data management, infection control and medication management.
- C. Accreditation tracing looking at organizational risk points and safety across all programs.

Staff and patients or customers have the opportunity to report a quality and safety issue directly to JCI if they feel it is not being handled correctly by National Ambulance. Quality and safety issues can be reported via jciquality@jcrinc.com

Tips when speaking to internal or external auditors

To assist you whenever speaking to auditors, we have provided some tips below:

- Answer the questions completely if you are confident of your answer.
- If you don't know how to answer a specific question, know where the answer can be found or who to ask. It may be your manager, colleague or by looking up the policy/procedure .
- Answer only what is asked for - say what you know. You are not expected to know everything.
- Give direct answers to questions that are asked.
- If you don't understand a question, ask for clarification.
- Don't lie or offer information or evidence that you are not sure of.
- When answering a question, avoid certain phrases like "We do this most of the time". Instead sound sure of yourself and say "It is a standard we adhere to".
- Say "I don't know " if you don't know an answer but also say who would you ask to find the answer.
- Help your colleagues out, if you see the auditor asking a colleague a question, go stand with the person and help to answer the question if you know the right answer. Show that you are friendly, helpful and willing to participate in the audit.
- Do not disagree with your colleagues in front of the auditors or highlight personal differences in opinions or practices.

National Ambulance Vision and Mission

You may be asked by the auditor if you know the National Ambulance Vision, Mission or Values.

It is OK if you cannot remember them but you must know where to find them. Usually they are at your notice board but also can be found on our National Ambulance website.

The National Ambulance Vision is:

To be the region's top provider of pre-hospital emergency medical services and the leader of strategic changes in ambulance services in the UAE

The National Ambulance Mission is:

To deliver quality pre-hospital emergency medical services to communities across the UAE

To provide a better clarity to this Mission Statement, NA has provided an enabling statement .

The National Ambulance Enabling Statement is:

To Deliver Quality Pre-hospital services to customers in the UAE, ensuring excellence and continuous improvement in patient outcomes by working collaboratively with partners and stakeholders by providing:

- Public and Private Pre-Hospital Emergency Medical Services
- Helicopter Emergency Medical Services (HEMS)
- Event Emergency Medical Cover
- Non-Emergency Patient Transfer
- Pre-Hospital Medical Education and First-Aid training

National Ambulance Values

The values of NA are the key drivers for our corporate culture and behavior. You may also be asked what these values are by the internal / external auditor. The values are:

Respect Involves:

- Treating people equally, with fairness and respect as we would want to be treated
- Recognising every opinion and contribution as valuable
- Showing respect and understanding of different cultures
- Being Professional in all dealings with others
- Celebrating each other's successes and achievements

Integrity Involves:

- Living our values and being honourable in everything we do
- Being open, honest and ethical in everything we do
- Always doing the right thing even when not being watched
- What we say is what we do and we do what we say

Excellence Involves:

- Providing first class and consistent service
- Encouraging feedback from your peers and customers and learning from that feedback
- Being the best we can be
- Always giving 100%
- Continually striving for improvement

Mutual Support Involves:

- Responding and operating as a team in all that we do
- Providing assistance and support to others and seeking help when needed
- Motivating and communicating well with each other
- Transferring knowledge and skills
- Unifying efforts to optimize the performance of the organisation



WHO is responsible for living the company mission, vision and values?

" We are all responsible "

National Ambulance Strategic Plan 2020 - 2025

The national ambulance Strategic Plan describes how as an organization we are delivering our vision and mission. It is split into four key priority areas and is summarized on the QHSE notice board in the following laminated poster:

National Ambulance

STRATEGIC PRIORITIES 2020-2025

Quality Patient Care and Safety	Constructive Partnerships and Compliance	Sense of Ownership and Engagement	High Performing Competitive Organization
Ensure efficient response and provide timely care to critical cases	Gain support from stakeholders	Ensure the safety, physical and psychological wellbeing of staff	Streamline and align processes to achieve organizational goals
Provide quality care which meets patients' needs	Align performance to client requirements and agreed KPIs	Develop a culture of continual engagement and ownership	Embed quality management based on business analytics of valid data
Interact professionally and show compassion every time	Comply with regulations and maintain ISO and JCI accreditations	Empower Emirati Clinicians	Explore business opportunities to increase revenue and strengthen our financial position
Maintain patient safety		Implement a successful leadership model	Promote efficiencies to ensure financial stability and competitive edge

Strategic Priorities
January 2022
QEP-108-Version 3



Quality Patient Care and Safety

By recognizing the appropriate standards to provide the best emergency pre-hospital care to patients via innovative service delivery models.



Constructive Partnerships and Compliance

Maintain a strong relationship with stakeholders with the aim of achieving common goals, whilst partnering with the community through relationship building and providing education



Sense of Ownership and Engagement

Focus efforts on staff to increase their engagement and provide a positive work culture to deliver effective and efficient services.



High Performing Competitive Organization

Maintain and enhance cost and fee recovery opportunities to take into account current and future demands on our services

KPIs that are relevant to each department are reported on quarterly basis in performance dashboards.

These KPIs provides staff an update on how National Ambulance is performing against dome of the Strategic Priorities.

The QHSE Policy Statement

Achieving and maintaining ISO accreditation is one of the highest priorities for the NA Board of Management as it signals both locally & internationally our commitment to quality of service, that we ensure a safe environment and we continually work to reduce risk to patients & staff.

One example of this commitment is the Quality, Health, Safety and Environment Policies statement signed off by the CEO. This QHSE Policy Statement is posted on all staff noticeboards at all operational locations. It is also available through the controlled documents process.

*All staff must have read and know where to access the
QHSE Policy Statement if asked*

National Ambulance staff and management are committed to our Quality, Health, Safety and Environment (QHSE) Management System and maintaining a healthy and safe workplace, with minimal impact of our operations on the environment.

To fulfil our commitment National Ambulance will:

- Meet and exceed customer and stakeholder expectations by designing and delivering the Middle East's best pre hospital care delivery;
- Develop, monitor and report against critical Quality, Health, Safety and Environmental objectives and targets;
- Continually improve the QHSE Management System and the effectiveness and efficiency of our service delivery as a key component of our Excellence journey;
- Ensure that all relevant industry standards, applicable legislation and other key requirements are captured and implemented within our service delivery;
- Ensure that all components of the QHSE Management System are documented, communicated, implemented, reviewed and maintained;
- Prevent pollution, conserve natural resources and minimize the effects of our operations on the environment;
- Provide safe and healthy working conditions to prevent injury and ill health to our employees, customers and society as a whole;
- Eliminate hazards and reduce OH&S risks;
- Ensure the consultation and participation of employees in Occupational Health and Safety matters; and
- Ensure our QHSE Management System is appropriately scaled and resourced to match the needs of our operations.

The National Ambulance Board of Directors and its management assume full responsibility for implementing this QHSE Quality System, delegating the appropriate responsibilities and reviewing the system and its performance annually.

Policies procedures, forms and clinical guidelines

We are always audited against the policies, procedures and guidelines which we work on. These are controlled documents within the National Ambulance quality management system. Wherever you print a document, or save it to a different location then it is no longer controlled.

It is important staff always refer to
the most current version of a controlled document.

Whenever any policy, procedure, guideline or form is changed, QHSE may advise through:

- E-Mail

Policies

National Ambulance issues policies to cover all parts of the NA business. They provide clear direction on how NA intends to conduct its services, actions or business.

All staff must know the Policies relevant to their area
and where to locate the current version when required.

Procedures or Standard Operating Procedures (SOPs)

Procedures or standard Operating Procedures are a sequence of activities that must be followed in the same order to perform a task. The majority of SOP's are embedded at the back of the relevant Policy Document that it relates to, how charts may also be included to assist you.

It is important that staff are aware of the policy that supports the procedure and where to locate the most current version of both.

Forms

Forms are documents that are filled out by staff, customers and patients.

It is important that staff know where to find the most current version of forms.

Clinical Practice Guidelines

Clinical practice guidelines are recommendations for the best clinical care for patients with specific conditions. These are based upon the highest level of research evidence available. Where an agreed evidence base is not available then best clinical practice is employed.

The guidelines should be used to assist in making the best decision for caring for patients in combination with policies, procedures, training, judgement and common sense.

The Policies cover subjects such as Patient Transport, Ethics, Transportation of Specialty Patient Populations, Infection Prevention & Control, etc.:

- Guidance on all elements of assessment, treatment and transportation of patients to help you make the best possible decision in your daily work.
- Security and safety for patients and professionals as they are developed in accordance with regulatory requirements, including from Department of Health (DOH).

Our main Clinical Practice Guidelines Clinical Protocol should be used in association with:

- Patient Care Protocols and training resources;
- All relevant NA Manuals, Policies and Procedures ; and ,
- Your own clinical judgement.



Patient Rights and Responsibilities Charter

The purpose of the National Ambulance Patient Rights and Responsibilities Charter is to ensure that all patients receive the best care possible in order to achieve the best possible outcomes.

The patient charter should be displayed on all locations in English and Arabic where a patient is treated including the patient treatment area in the ambulance / and our First Aid Posts.

If any staff do not see the Patient Rights and Responsibilities Charter in a patient treatment area they must notify their supervisor or qhse@nationalambulance.ae so this can be addressed.

Staff must have a full understanding of the principles and elements of the latest version of CGP103 Patient Rights and Responsibilities Policy.

Please read the patient charters in your patient treatment area





Patient Consent

One of the most important patient rights is to receive information to make a decision about any care or treatment given, using a consent process. Verbal consent must always be obtained . For high risk procedures formal written consent is mandatory.

Consent is required for all interventions, procedures or treatments, except where authority to treat is granted under appropriate legislation e.g. mental health act or a court order.

For ambulance services the majority of situations will involve implied or verbal consent using the definitions contained in CGP105 Consent Policy and Procedure. However good communication with our patients and family will ensure that patients are informed of the intended care and treatment you wish to give.

Staff must have a full understanding of the latest version of CGP105 Consent Policy & Procedure.

Patient Assessment & Reassessment

National Ambulance has very clear policy on how Patient Assessment is to be conducted.

Patient assessment is the very first part of the emergency care process. It includes the identification of a patient's condition and forms a basis of their management.

- Every decision made regarding patient management (including treatment) is based on the findings of a patient's assessment.
- Wherever treatment is provided there must be at least 2 discrete assessments performed and documented in the Patient Care Record.

Treatment is considered any action involving active patient care and should be tailored to the specific patient needs. For example, a trauma patient must have continuous vital signs assessed; for routine blood pressure checks at least two measurements should be provided from erect and supine reassessments for every 15 minutes for stable patients, and every 5 minutes for unstable patients, etc.

All persons that are assessed and treated are considered as patients irrespective of how brief the interaction was or how minor the intervention was.

National Ambulance Clinical Policy CGP110 for Patient Assessment/Reassessment and Triage should be read and understood and should be used in association with the appropriate sections in Clinical Practice policies, protocols and other National Ambulance reference material.

Clinical Education

All clinical staff are required to complete a assigned number of Continuing Professional Development (CPDs) /Continuous Medical Education Hours (CMEs), based on their DOH/MOH license renewal cycle.

There are three categories of CPDs, category 1: Includes open live activities targeting participants from national, regional and international organizations. These include training courses, symposia, specialized workshops, conferences, congress, and non – recurring educational activities. Usually scheduled once in a year & included large groups. category 2: Includes live internal activities limited to small groups within a particular organization like practice based activities, case studies, grand rounds, journal clubs, general workshops, seminars, departmental scientific meetings, recurring educational activities which are regularly scheduled, take place on weekly or monthly basis. category 3: Distance learning activities accredited& licensed by the concerned authorities locally or internationally. For further information on your CPD requirements you should refer to the NA Policy for Continuing Medical Education (CME) / Continuing Professional Development (CPD) - CGP 146

Health Professional	Overall Minimum requirement per year	Minimum Requirement per year by Continuing Education Category	Minimum Requirement per year for CE in one's specialty
Physicians	40 hours	Minimum of 20 Category 1 hours out of 40 per year	All hours obtained must be relevant to the field of specialty
		Maximum of 20 Category 2 hours out of 40 per year	
Pharmacist	20 hours	Minimum of 10 Category 1 hours out of 20 per year	All hours obtained must be relevant to the field of specialty
		Maximum of 10 Category 2 hours out of 20 per year	
Allied Health (EMT A, EMT I, EMT B)	10 hours	Minimum of 5 Category 1 hours out of 10 per year	
		Maximum of 5 Category 2 hours out of 10 per year	

Title	Qualifications	Experience
Ambulance Nurse	Bachelor degree in Nursing And Valid PHTL, ACLS and PALS Certification	Two (2) years' experience as RN of which one is as Advanced (Paramedic) EMT-P or in ICU or in the Emergency department
Emergency Medical Technician - Advanced (Paramedic) EMT-P	<p>Internationally recognized EMT-P course or equivalent (Minimum two (2) years course duration) or minimum of two (2) years Associate degree in EMT And Hold a valid ACLS ,PALS, PHTLS Certification</p> <p>Bachelor's degree or equivalent in emergency medical technology or Emergency applied science or UK paramedic Science And Valid ACLS ,PALS, PHTLS Certification</p>	Two (2) year experience post registration/certification
Emergency Medical Technician Intermediate (EMT-I)	Internationally recognized EMT-I course or equivalent, minimum eight weeks duration And Valid ACLS , PALS, PHTLS Certification	One (1) year experience post registration/ certification. Current ACLS, PALS, and PHTLS
Emergency Medical Technician – Basic (EMT-B)	Internationally recognized EMT-Basic course or equivalent with minimum four (4) weeks duration And Valid BLS and BTLS Certification	Minimum of one (1) year experience post registration/ certification



Licensing Category	Minimum CME / CPD Required
Physicians	40
Nurse	20
Pharmacist	20
Allied Health	10

The screenshot shows the user profile of Maisan Al Wattar. The top navigation bar includes links for Home, Profile, My Activity, Courses, Learning Paths, and Help. The main content area displays the user's activity summary: 20 Completed Courses, 12 Courses in Progress, 4 Completed Programs, 0 Leaderboard, and 5 Certificates. Below this, the 'Current Learning' section lists six courses: Basic Airway Management, Fire Safety, Information Security Policies, Iv / IO Therapy and Cardiac Arrest Care, Kronos Staff Guides v1, and NA Staff Cyber Security Awareness. A sidebar on the right promotes the 'Heart For Women Campaign' with a red heart graphic and a 'SAVE THE DATE' button.

Hi, Maisan

What do you want to learn today?

Search here...

My Activity

Completed Courses: 20

Courses in Progress: 12

Completed Programs: 4

Leaderboard: 0

Certificates: 5

Current Learning

- Basic Airway Management (0%) Course
- Fire Safety (0%) Due on 27 May Certification
- Information Security Policies (0%) No update
- Iv / IO Therapy and Cardiac Arrest Care (0%) Course
- Kronos Staff Guides v1 (0%) Course
- NA Staff Cyber Security Awareness (0%) Due on 10 May Certification

Displaying 1 - 6 of 9 results

Heart For Women Campaign

It is our pleasure to invite you to our Heart for Women event at Ajman Civil Defence GHQ Auditorium from 10 am to 2 pm on 8 March 2022.

SAVE THE DATE

HEART FOR WOMEN

Look after your health, #HealthForAll

NAFCI invites you to our Women's Health Awareness Program on 8 March 2022 at Ajman Civil Defence GHQ Auditorium. This program will focus on women's health issues and provide practical information and resources to support women's health and well-being.

You can check your category 2 ,1 and 3 CPD compliance for the calendar year, by clicking the ‘User CME’s/CPDs’ tab in the top left hand column of your home page on the LMS.

In addition to complying with the annual National Ambulance CPD requirements, all clinical staff must maintain their required certification as per the DOH/MOH/DHA PQR. The National Ambulance Clinical Education Department is a recognized Training Centre for American Heart Association – AHA (HS, BLS, ACLS, PALS, ACLS EP), National Association of Emergency Medical Technicians – NAEMT (PHTLS, EVOS, EMS Safety, AHDR, PTEP,EPC), American Safety & Health Institute – ASHI (EMR) and Monash University (EMT B and EMT I).

Clinical Certification Required by the PQR and National Ambulance												
No.	Professional Level	PQR					NA					
		BLS	PHTLS	ACLS	PALS	EVOS	EMS Safety	AHDR	PTEP	EPC	CPM	GEMS
1	EMT Basic	x	x			x	x	x	x	x		x
2	EMT Intermediate (AEMT)	x	x	x	x	x	x	x	x			x
3	Paramedic	x	x	x	x	x	x	x	x			x
4	Specialist Paramedic (ESP)	x	x	x	x	x	x	x	x			x
5	Ambulance Nurse	x	x	x	x	x	x	x	x	x	x	
6	Physician	x	x	x	x	x		x	x			

Quote: “Tell me and I forget, teach me and I may remember, involve me and I will learn” - Benjamin Franklin

Documentation & Reporting

The patient care record (PCR) or the electronic patient care record (ePCR) are legal documents and it is important that all patient care documentation produced by NA is clear and concise.

- The PCR/ePCR must be completed whenever there is a patient contact
- Accuracy is an essential requirement of documentation.
- National Ambulance operational staff must distinguish between what they observe and what is stated by the patient.
- Written reports should be objective and should not include opinions or value judgments of the clinician.
- All pertinent information should be included on the PCR/ePCR.
- Every effort must be made to ensure that the PCR/ePCR is legible and completed in a timely manner and as close to the event as possible.

Clinician must ensure at least two patient identifiers are clearly documented

- Patient name (via National ID, passport, verbal)
- Date of Birth
- Staff should ask the patient to give their full identification details through clear questions and not to read these identification details to them for confirmation.

All PCR's are private and confidential documents that relate directly to each individual patient at all times National Ambulance staff are to ensure they are secure and unable to be seen other patients or staff.

Once treatment is completed, paper PCRs must be stored securely until they reach the station. At the station they must be stored securely until they are passed to logistics for safe delivery to National Ambulance archiving area for processing and allocating to Clinical Audit. Clinicians and logistics need to follow the process for PCR Delivery to Head Office as required.

Staff are to be familiar with the record keeping documentation requirements stated above and in CGP119 Patient Care Record Documentation.

Management of Information

As a part of document management, Information management and security is critical. National Ambulance has a Information Management Policy (COP401).

National Ambulance is committed to preserving the confidentiality, integrity, availability and safety of all forms of information used by the corporation and maintained on behalf of employees, investors, business partners, customers and government agencies. As a result, specific procedures are developed to help administer and manage the storage and processing of computer information and any noncomputer information related to the proper and lawful conduct of business. These procedures address all computer and information management activities that could constitute a risk to the ongoing proper activities of this organization in such a way that risk is minimized or otherwise accepted by the executive officers of National Ambulance.

All employees, contractors, and temporary and part-time workers are responsible for ensuring that company information assets are used only in proper pursuit of the company's business; information is not improperly disclosed, modified or endangered; and access to company information resources is not made available to any unauthorized person.

Medication Management

All Licensed clinicians have access to CGP211 Medication Management Manual. This explain all policies and procedures for all medications within individual clinicians scope of practice. All clinicians need to be aware of this manual which includes the following:

- Safe use of medication
- High Alert Drugs and LASA Medications
- Ordering and Handling
- Storage
- Recall and disposal of drugs
- The reporting of any adverse incidents or near misses.
- Regulatory requirements concerning Narcotics and Controlled Drugs

The 7R's of Medication:

- Right Patient,
- Right Medication,
- Right Dose,
- Right Route,
- Right Time,
- Right Documentation, and
- Right Reason

All staff are oriented on Operative IQ for the purpose of inventory management and tracking.

All staff involved in the handling or use of medication must be familiar with the Medication Management Manual and Operative IQ inventory system.

Occupational Health

All employees have a responsibility to inform their line manager and Occupational Health if they have any health issues or any issue that may affect their ability to work in compliance with the Occupational Health Policy and Program CGP102. Employees have health screening requirements and access to required immunizations.

You should comply and take responsibility for communication and management of your current health and immunisation status, taking care of yourself at work by following policies and learnings for infection control and ergonomics and notifying relevant teams such as QHSE regarding any hazards that might affect your health and any occupational health related incidents such as Body fluid exposures and contact with potential or confirmed infectious patients. There is a procedure for seeking care and support from our designated External Occupational Health provider.

Please remember that there is a Peer support group that aims to help and assist peers in handling sudden, unexpected stressful events in one's life.

Infection Control

National Ambulance is fully committed to protecting its staff, patients, and the public from potentially harmful pathogenic microorganisms.

Important elements of infection control that are addressed in CGP129 Infection Control Programme are :

- Universal precautions including use of personal protective equipment and use of Aseptic Non-Touch Technique for patient care.
- Prevention and Management of needle-stick injuries and blood borne virus exposures
- Cleaning and Disinfection procedure for all equipments and for ambulances, including deep clean
- Waste Management including Sharps.
- Incident and Infectious disease reporting and documentation.

All Staff should practice good infection control, following CGP129 Infection Control Programme and CGP124 Care of Patients with suspected or confirmed communicable disease or those who are immunocompromised.



Cleaning Equipment Color Coding

RED

Bathroom/Water Closets/washroom, toilets, basins and bathroom floors

Cleaning equipment such as mixing buckets, mop buckets and mop handles are designated with the color red.

BLUE

Patient care areas such as the ambulances, First Aid Post

Cleaning equipment such as mixing buckets, mop buckets and mop handles shall be designated with the color blue.

General areas including offices, staff rest areas and public areas

Cleaning equipment such as mixing buckets, mop buckets and mop handles shall be designated with the color available in the market excluding (Yellow, Red, Green and Blue).

Proper Use of Gloves



WHEN TO PUT ON

- Approaching a patient
- Treating a patient
- Changing between patients

Gloves are used as a barrier to yourself and your patient. They are also used as a barrier from patient to patient and clinical area to other areas.

WHEN TO DOUBLE GLOVE

- Mass Casualty Incident
- At a heavily contaminated patient or scene

Use of double gloves enables the top glove to be easily replaced as you move from patient to patient without the sweat and stickiness of the hands.

WHEN NOT TO USE

- All other times including
- In a non-patient compartment
 - Anytime driving
 - For longer than necessary without replacement and hand hygiene between use

The longer you wear gloves, the more they disintegrate and become an infection control issue. Also, if you wear them in the incorrect locations, you are potentially spreading infection outside the controlled area e.g. into the driver cabin of the ambulance.

DO NOT

- Use gloves as a notepad
- Use as balloons for paediatric patients

When you do not have time to fill out the PCR/ePCR, you may use silk tape attached to your uniform trouser leg or a disposable index card as alternative methods for temporarily recording patient observations. These methods are much safer than recording details on your glove, which may cause damage to the glove or delay proper disposal on removal, increasing the risk of exposure to infection.

Blown up gloves pose a choking risk to paediatric patients who may bite them and choke on fragments of glove.



RED COLORED BAGS

(HIGHLY INFECTIOUS - BIOLOGICAL) - any waste materials with and from the PATIENT's ANATOMICAL & PATHOLOGICAL WASTE.

That includes and applicable to:

- Bloods
- Body Parts
- Organs
- Fetus (dead)
- Tissues
- Huge amount of Excreta & Vomit.



YELLOW COLORED BAGS

(INFECTIOUS / CLINICAL) - any waste materials that are being used / contact to and from Patient with or without Communicable Diseases.

That includes and applicable to:

- Mask
- Gloves
- Linens / Sheets
- Tubes
- Catheters
- Cotton, gauze, dressings
- Gowns
- Any contaminated items in contact from patient.



BLACK COLORED BAGS (DOMESTIC / NON-HAZARDOUS / GENERAL WASTE)

- any waste materials that has not been in contact with Patient, hazardous chemicals, radioactive substances, and does not pose a sharps hazard.

That includes and applicable to and can be categorized as follows:

- (Cellulosic materials) Office papers, computer printout, newspapers, cardboard boxes.
- (Metals) aluminum beverage cans, aluminum containers, food tin cans.
- (Plastics) PET water and soft drink bottles, HDPE milk containers, plastic bottles from medications, plastic packaging / containers.
- (Glass) not broken empty glass bottles, soft drink bottles
- (Wood) shipping pallets, wood shelves, wood containers, construction debris in warehouse, sites, bases and accommodations.
- (Compostable) food waste, flowers and yard waste.



YELLOW LABELED SHARPS PLASTIC / METAL CONTAINERS (INFECTIOUS)

- any sharp waste that are being used / contact to and from patient with or without Communicable Diseases.

That includes and applicable to:

- Intravenous or other needles; auto-disable
- Syringes with attached needles
- Infusion sets
- Scalpels
- Blades
- Broken glass

Fall Risk Assessment Tool

- Staff are required to reduce the risk of falls by ensuring that the patient is transported in the appropriate manner and assessed continuously to prevent falls
- Ensure patient is appropriately packaged and secured during transportation to reduce any falls risk
- Use the Fall Risk Assessment Tool OPF251 to determine the fall risk score

National Ambulance		وثيقة محفوظة Restricted Document
Fall Risk Assessment Tool		
<p>If patient has any of the following condition, check the box and apply Fall Risk Intervention as indicated.</p> <p>High Fall Risk – Ensure patient is moved by stretcher</p> <p><input type="checkbox"/> History of more than one fall within 6-month prior <input type="checkbox"/> Patient has experienced a fall during the time crew has been with patient <input type="checkbox"/> Patient experienced a seizure</p> <p>Low Fall Risk – Patient must be moved by stretcher</p> <p><input type="checkbox"/> Complete paralysis or completely immobilized</p> <p>Do not continue with Fall Risk Score Calculation if any above conditions are checked.</p>		
Fall Risk Calculation – Select the appropriate option in each category. Add all points to calculate the Fall Risk Score. (If no option is selected, score for category is 0)		Points
Age	<input type="checkbox"/> 60-69 years (1 point) <input type="checkbox"/> 70-79 years (2 points) <input type="checkbox"/> greater than or equal to 80 years (3 points)	
Elimination, Bowel and Urine	<input type="checkbox"/> Incontinence (2 points) <input type="checkbox"/> Urgency/frequency and incontinence (3 points)	
Medications: PCA/opiates, anticonvulsants, antihypertension, diuretics, hypnotics, laxatives, sedatives, and psychotropics	<input type="checkbox"/> On one fall risk drug (1 point) <input type="checkbox"/> On two or more fall risk drugs (2 points) <input type="checkbox"/> Sedation procedure within past 24 hours (3 points)	
Patient Care Equipment: Any equipment that tethers patient (e.g. IV infusion, chest tube, indwelling catheter, etc.)	<input type="checkbox"/> One present (1 point) <input type="checkbox"/> Two Present (2 points) <input type="checkbox"/> Three or more present (3 points)	
Mobility (May select multiple and add score together)	<input type="checkbox"/> Requires assistance or supervision for mobility, transfer, or ambulation (2 points) <input type="checkbox"/> Unsteady gait (2 points) <input type="checkbox"/> Visual or auditory impairment affecting mobility (2 points)	
Cognition (May select multiple and add score together)	<input type="checkbox"/> Altered awareness of immediate physical environment (1 point) <input type="checkbox"/> Impulsive (2 points) <input type="checkbox"/> Lack of understanding of one's physical and cognitive limitations (4 points)	
Total Fall Risk Score (Sum of all points per category)		
SCORING: 6 or greater patient must be transported on stretcher		




Fall Risk Assessment
December 2021

OPF251
Version 3

QHSE Training

The majority of the QHSE training is conducted on the learning management system. Many courses are important for maintaining a healthy and safe work environment. In some cases you may have completed them previously but going forward we will be resetting them each year and have refresher courses to maintain compliance.

The screenshot shows the LMS dashboard for National Ambulance. At the top, it greets the user 'Hi, Maisan' and asks 'What do you want to learn today?'. A search bar is below. The main area is divided into sections: 'My Activity' (Completed Courses: 19, Courses in Progress: 12, Completed Programs: 3, Leaderboard: 0, Certificates: 5), 'Current Learning' (Basic Anatomy Management, Certification - Infection ..., COVID-19 Familiarization, Fire Safety, Information Security Policies, IV / IO Therapy and Cardiac Arrest Care), and 'Corpus3 Familiarization' (with an image of medical equipment). To the right is a 'My Certifications Status' section with a donut chart showing 'Expired' (blue) and 'Certified' (orange) status.

If asked by the auditor, you should be familiar with the following trainings you received online:

- QHSE Management System
- Hand Hygiene
- Fire Safety
- Safe Manual Handling
- Safety in Heat
- Waste Disposal
- Material Safety Data Sheets
- Ergonomics
- Introduction to Business Continuity
- Food Safety





Risk Assessments

Risk Assessment is an important tool used to evaluate various risks within an organization.

Categories of Risk Assessments:

- **Site Risk Assessments:** including your workplace or ambulance
- **Equipment or Asset Risk Assessments:** looks at the key equipment we may use such as stretchers etc.
- **Key Activity Risk Assessments:** looks at key activities such as an event, emergency ambulance service, airway, MCI, HEMS, use of Airwing etc.

The relevant risk assessments are provided on notice boards and are available upon request to qhse@nationalambulance.ae. If you identify new risk assessments or improvements to any Risk Assessment, please contact QHSE.

All staff should be able to read a Risk Assessment, contribute to its content to ensure it is always kept relevant and up to date.

A guidance to reading risk assessment is provided with the risk assessment cover page.



Have you recently read the
Risk Assessments relevant to your job?

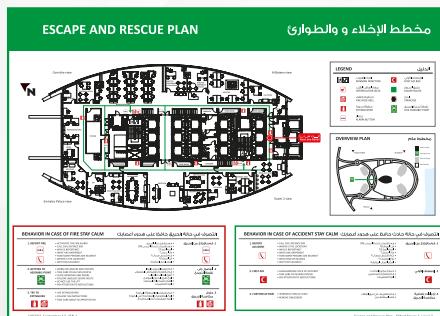
“ We are all responsible ”

Fire Safety

National Ambulance is providing Emergency Evacuation Plan and Emergency Evacuation Map in all sites and posted in QHSE Notice boards, they provide precautions, guidelines, contact number of the fire warden, floor plan of the sites and also the fire drill they had. The Fire safety is to prepare the staff in case of the fire incidents in their location.



National Ambulance conducts periodic fire drills to ensure staff are aware of their assembly point, how to evacuate safely and to ensure that they are aware of their fire warden.



A database of all fire extinguishers is maintained to ensure they are serviced semi-annually. Staff should immediately advise QHSE if they discover an extinguisher that is damaged, used or expired.

Fire Extinguisher labels identify which Extinguishers are effective in the occurrence of a Fire and the PASS label instructs how to use an extinguisher. This should already be familiar to all staff who have conducted the QHSE Fire Safety e-learning.



If any of these labels are missing from the extinguisher location, please advise your Manager or email ghse@nationalambulance.ae

Understanding Material Safety Data Sheets, Folders and Flipcharts

Chemicals can be risky and dangerous to all staff, patients or the environment. MSDS Folders & MSDS Flipcharts are an important resource to ensure safe chemical use and storage.

They provide:

- Prevention and reactive controls of accidental release.
- Instructions of handling & storage.
- Handle chemicals in a safe manner.
- Disposal & Waste instructions.
- Medical signs and symptoms.



MSDS sheets are usually developed by the manufacturer and can be structured in slightly different ways . To make it simpler to access we have created a MSDS Summary sheets with all the relevant emergency information on that product and also includes its picture.

MSDS folders are located in National Ambulance workplaces and the MSDS Flipcharts are located within NA Ambulances.

All Staff must know where to find an MSDS Folder/Flipchart and when to use it.



Are you familiar with the safety requirements of any chemicals in your workplace

“ We are all responsible ”

If you have witnessed any product you are using at your office/ambulance that was not included in the MSDS Folder/flipchart or you cannot locate the MSDS folder/flipchart, inform your superior or e-mail qhse@nationalambulance.ae

Sample of MSDS summary sheet

Generic Brake Fluid	ملخص بيانات المواد الكيميائية MATERIAL SAFETY DATA SHEETS (MSDS)	وثيقة محظورة Restricted Document																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Correct as of:</td> <td style="padding: 5px; text-align: right;">April 2, 2015</td> </tr> <tr> <td colspan="2" style="padding: 5px;">This product is used for:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Handling:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Storage:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Product Disposal:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Container Disposal:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Hazards Identified:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Stability:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Toxicology</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Workplace Exposure Controls:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Personal Exposure Controls</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Fire-fighting measures</td> </tr> <tr> <td colspan="3" style="background-color: #e0e0e0; padding: 5px;">  </td> </tr> <tr> <td rowspan="2" style="background-color: red; width: 15%; vertical-align: top; padding: 5px;"> في حالة الطارئ لل المادة الكيميائية </td> <td style="padding: 5px;"> Personal precautions التدابير الشخصية </td> <td style="padding: 5px; vertical-align: top;"> No special precautions are necessary, use the personal protective equipment recommended in section 8 of this health and safety. </td> </tr> <tr> <td style="padding: 5px;"> Environmental precautions التدابير البيئية </td> <td style="padding: 5px; vertical-align: top;"> Ventilate area of leak or spill. Remove all sources of ignition. Isolate hazard area. Do not flush to sewer, on the ground or into any waterway. </td> </tr> <tr> <td rowspan="2" style="background-color: red; vertical-align: top; padding: 5px;"> First Aid Measures: إجراءات الإسعاف الأولية </td> <td style="padding: 5px;"> For eye and skin exposure: For eye and skin exposure, flush with running water for 15 minutes and get medical attention immediately. </td> <td style="padding: 5px; vertical-align: top;"> لا توجد احتياطات محددة ضرورية ، استخدم عيادة العناية الشاملة الموصى بها في القسم 8 من هذه الملحقة والسلامة. </td> </tr> <tr> <td style="padding: 5px;"> For ingestion: never give anything by mouth. </td> <td style="padding: 5px; vertical-align: top;"> لا تؤخذ ملء شفوي عن طريق الفم. </td> </tr> <tr> <td rowspan="2" style="background-color: red; vertical-align: top; padding: 5px;"> Inhalation: provide fresh air and adequate ventilation. </td> <td style="padding: 5px;"> Inhalation: provide fresh air and adequate ventilation. </td> <td style="padding: 5px; vertical-align: top;"> لا تؤخذ الهواء النقي وافية التهوية. </td> </tr> <tr> <td style="padding: 5px;"> Ingestion: rinse mouth with water, get medical advice immediately </td> <td style="padding: 5px; vertical-align: top;"> شفاف الفم بالماء ، والحصول على المشورة الطبية على الفور. </td> </tr> </table>			Correct as of:	April 2, 2015	This product is used for:		Handling:		Storage:		Product Disposal:		Container Disposal:		Hazards Identified:		Stability:		Toxicology		Workplace Exposure Controls:		Personal Exposure Controls		Fire-fighting measures					في حالة الطارئ لل المادة الكيميائية	Personal precautions التدابير الشخصية	No special precautions are necessary, use the personal protective equipment recommended in section 8 of this health and safety.	Environmental precautions التدابير البيئية	Ventilate area of leak or spill. Remove all sources of ignition. Isolate hazard area. Do not flush to sewer, on the ground or into any waterway.	First Aid Measures: إجراءات الإسعاف الأولية	For eye and skin exposure: For eye and skin exposure, flush with running water for 15 minutes and get medical attention immediately.	لا توجد احتياطات محددة ضرورية ، استخدم عيادة العناية الشاملة الموصى بها في القسم 8 من هذه الملحقة والسلامة.	For ingestion: never give anything by mouth.	لا تؤخذ ملء شفوي عن طريق الفم.	Inhalation: provide fresh air and adequate ventilation.	Inhalation: provide fresh air and adequate ventilation.	لا تؤخذ الهواء النقي وافية التهوية.	Ingestion: rinse mouth with water, get medical advice immediately	شفاف الفم بالماء ، والحصول على المشورة الطبية على الفور.
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Disclaimer- This is a quick reference summary. Please refer to the attached sheets for further detail or clarification.																																												

Hazards, Non Conformance & Incident

Hazards

To ensure we have healthy and safe workplace for staff, patients and other stakeholders we must all continually look for hazards within the workplace. A Hazard is any source, situation, or act with a potential to create human injury or ill health, or harm to the environment or a combination of these.



If you identify a hazard and it is possible and safe, remove the hazard if it safe to do then report the QHSE

QHSE will send out an email to staff of hazards identified as “Hazard alerts”.

The historic hazard alerts should also be kept on your staff noticeboard. This will assist you in avoiding the hazard and identification of future hazards that may be similar.



The more we identify hazards in the workplace
the safer our workplace becomes.

Non Conformances

A non conformance is any deviation from work standards, practices, procedures, regulations etc that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment or a combination of these.

Non conformances are normally picked up during internal or external audits. But they can be identified by anyone within the organization and reported to QHSE.

The more we identify non-conformance or variances from process,
the more consistent quality and our processes will be.

Near Miss

An unplanned event, event series, or condition that has occurred which, although not resulting in any injury, illness or environmental damage, under slightly different circumstances would have.

For a serious near miss, a root cause analysis is conducted to determine what controls did not work and what improvements in our processes need to take place.

Near Miss reporting is extremely valuable to the organization as we can learn from them before they become actual incidents.

The Joint Commission also considers the frequency of reporting of 'near misses' as a key indicator of the organizations culture of safety.

The more we identify near misses and address them, the more our processes improve and the safer our workplace becomes.

How to Report Hazards, non conformances, near misses and incident

There are numerous ways to report. The easiest way is to email qhse@nationalambulance.ae. QHSE will then call you back and capture the required information.

You may also use the QHSE Reporting Form (QHF202) if you personally wish to submit

All staff must be familiar and are encouraged to report hazards, non conformances and near misses.

National Ambulance		 Restricted Document
Quality Health and Safety Reporting Form (QHSE)		
<p>This form is used to report incidents, Near Misses, Non-conformances. Incidents must be reported as soon as practical. For Urgent matters such as Sentinel Events, immediately notify the duty manager via telephone. If an enquiry, complaint or request by an external party, kindly e-mail feedback@nationalambulance.ae Please consider the information you entered carefully as this is a legal binding document.</p>		
ABOUT THE PERSON COMPLETING THIS FORM		
Name:	Date & Time Happen:	
Mobile Number:	Contract:	
Job Title:	Site/Location:	
CAS Number:	Ambulance number / Asset number:	
DESCRIPTION OF IDENTIFIED HAZARD/ NEAR MISS/ INCIDENT/ NON CONFORMANCE		
<p>*A detailed report must be written in this area.</p>		
CORRECTION ACTION		
<p>Action to eliminate a detected nonconformance or undesirable situation</p> <p>*Detail the Correction taken by the reporting individual or supervisor.</p>		
Number of Days Late		
SENTINEL EVENT DEFINITION		
<p>Sentinel Event is an event related to actions or inactions of our personnel leading to unintended death or major permanent loss of function not related to the natural course of the patient's illness or underlying condition.</p>		
<p>In addition:</p> <ul style="list-style-type: none"> • Abduction of any patient receiving care, treatment or services • Rape, assault (leading to death or permanent loss of function), or homicide of any patient receiving care, treatment or services • Death of any patient (leading to death or permanent loss of function), or homicide of a staff member, licensed independent practitioner, visitor or vendor while on site at the healthcare facility. • Unintended death during transport • Sudden death of a patient • Staff or citizen death as the result of vehicle accident 		
		QHSE22 Version 03



When was the last time
you reported a hazard, non
conformance or near miss?

“ We are all responsible ”

Incidents

An incident is an event which has caused an injury, illness, fatality or damage to assets. If an incident occurs, it should be reported to the duty manager or direct line manager immediately and a QHSE Reporting Form QHF202 completed.

For any incident, a root cause analysis may also be conducted to determine what controls did not work and what improvements in process needs to take place.

Sentinel Event is an event related to actions or inactions of our personnel leading to unanticipated death or major permanent loss of function not related to the natural course of the patient's illness or underlying condition

For example: As a result of a medication Error, a result of wrong treatment or a result of a fall.

In addition:

- Abduction of any patient receiving care, treatment or services
- Rape, assault, (leading to death or permanent loss of function), or homicide of any patient receiving care, treatment or services
- Rape, assault, (leading to death or permanent loss of function), or homicide of a staff member, licensed independent practitioner, visitor or vendor while on site at the healthcare facility.
- Unanticipated death during transport
- Suicide during transport
- Staff or citizen death as the result of vehicle accident

National Ambulance has a duty to investigate Sentinel Events within the correct time scales utilizing a Root Cause Analysis and to report to the correct authorities if a Sentinel Event occurs within our organisation.

If it is a Clinical incident or sentinel event it must ALSO be reported immediately to your duty manager for IMMEDIATE action, with serious incidents requiring reporting within 2 hours.

Continual Improvement

You may be asked by the auditor how do we continually improve within the organization or what is our quality or continual improvement program?

Continual Improvement is an ongoing effort by the organization to improve its services to the staff, customers & patients.

There are many ways Continual Improvement is implemented and measured in National Ambulance:

- From site inspection checklists.
- From Reviews of feedback forms, hazard reports or identified non-conformances or near misses.
- Captured within team meeting or QHSE discussions / blogs.
- From Customer suggestions or Feedback.
- Through the FEKRA QHSE Suggestion for Improvement Program.

Fekra is the Arabic word for a Suggestion, this terminology is used for Suggestions and Ideas.

You are encouraged to help improve the way we do things in National Ambulance with Fekra program.

You have a FEKRA? Just send an e-mail to qhse@nationalambulance.ae



A hand is pointing towards a red rectangular sign. The sign contains the following text:
Have you identified ways
we can do better?
“ We are all responsible ”

Patient and Customer Feedback

Customer and patient feedback is critical to understand how we are achieving our vision, mission and strategy. Are our customers satisfied? Are we providing a quality standard of pre-hospital care?

To understand how we are performing, we have numerous ways we ask what our customers think. This includes:

1) Patient Feedback Form

This English and Arabic form is a short survey focusing on five key quality of care/service questions. This form is primarily designed for fixed locations such as events, or bases where the patient comes to your treatment area. Upon completion the form is placed in an envelope and forwarded to QHSE.

The form is titled "PATIENT FEEDBACK FORM" and is a short survey in English and Arabic. It includes sections for rating responses on a scale from 1 to 5, and a section for comments at the bottom. A red box at the top right says "بيان سري Confidential Document".

2) Patient Feedback Card

This feedback card, also in English and Arabic is better suited for Emergency Services such as the Ambulance or other non-clinic/office environment. It asks our patients to “Tell us how we did” by e-mailing us at feedback@nationalambulance.ae.



All NA staff are encouraged to download the NA 998 App and be familiar with its content.



About the App

Name: NA998 App

Language: App is available in both Arabic and English

Main Features: Requesting an ambulance, location identification and first aid advice; All at your fingertips!

Facts:

- App is directly linked to the 998 Emergency Ambulance number.
- App provides location coordinates to staff at ACC when users request emergency ambulance.
- Emergency Ambulance feature is only available to registered users in the areas covered by NA in the UAE: Sharjah, Ajman, Umm Al Quwain, Ras Al-Khaimah and Fujairah.
- First Aid Guide, which comes with easy to follow instructions and pictures, is accessible to all users worldwide.
- App is available to the public for free and can be downloaded.
- The App is available for free under the name NA998 or الإسعاف الوطني for Android, IOS, Windows and Blackberry and can be downloaded from Apple App Store, Google Play and Windows store.

App is available as NA 998 on





3) Website Feedback Information

Patients can also be referred to our website to provide feedback. This website has the link feedback@nationalambulance.ae.

We try to recognize staff when positive feedback is received. We always love hearing a good story and sharing it with others within the RIB/NACIT.

The more feedback form/cards are given out, the more feedback we will receive and the more great work we can recognize.



If you need more supplies of the feedback card or forms please contact Logistics@nationalambulance.ae.

Improvements for this book

QHSE encourages suggested improvements for this book. Any idea or suggestions for future improvement can be sent to QHSE@nationalambulance.ae