

Abstract

The presented master thesis tries to solve the problem of poor administration of providing emergency care in the IZS (Integrated Rescue System) by the RZP and LSP. The first part is literary and deals with concepts such as the IZS, the IZS divisions, the ambulance, explanation of the term „patient“, describing the relationship between patient and physician and with the components of the IZS and the relevant legislative and ethical codes that are associated with providing care in the ZZS IZS.

The second part is practical. The content of the practical work is the emergency services and rescue services in the IZS, which in the past 20 years was and still is undergoing a significant number of ongoing changes. In the context of these changes has been newly created the complex IZS, which concentrates the potential of rescue forces and non-medical resources in our country.

The work concerns with incorrect indication of the IZS trips during providing emergency services in the city of Prague. The IZS proposed some editions to the current state. The research has partially been interested in the complexity of position and classification of the IZS in the czech legislative. The actual research was conducted on a territorial unit of an emergency rescue services unit within the city of Prague by the technique of quantitative and qualitative research, interviewing and observation on the ground in the emergency unit of the RZS, in addition to studying the materials available to the IZS. The aim was to determine whether or not there is that RZS has been used in the IZS as well as a „slow“ emergency service and if so, what did the replacement of the service cause. The results clearly demonstrate the deliberate provision of emergency medical services by the RZP departments, while the process is being organized by the central dispatching rescue services throughout Prague. The result is a design of the solution to the problem. When talking to the IZS employees, other themes emerged: lack of communication between the service providers in the IZS-112, also based on the dissatisfaction of health workers' little sense of prestige and ranking within the IZS, ignorance of competencies within the IZS trips and many others, mostly internal problems within IZS communications.

The last problem that significantly appeared in the interview with the IZS staff is the integration of various components of the IZS under different ministries and the resulting problems with salaries and IZS funding. General recommendations outlined the possibility of change, the change plan has been prepared in a particular workplace. The topic was thickened of the ethical issues that resulted from the research.

Keywords: Magna charta libertatum, protection of personal data, the Convention on human rights and biomedicine, Integrated Rescue System, operational centers, call centers, transportation services, emergency dispatching services, fast medical service, ambulance, medical first aid, air ambulance, patient, client, ethical aspects of the work.