

Emergency Medical Team (EMT) Initiative

Regional Chair Asia Pacific 2017



NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

Surge capacity in healthcare during emergencies



Groups of health professionals providing **direct clinical care** to populations affected by disasters or outbreaks

- ✓ surge capacity to support the local health system
- ✓ government (civilian & military) and non-government
- ✓ national and international teams

Equipped. Prepared. Ready.



Global EMT Initiative



Reducing the loss of lives & prevention of long-term disabilities
in sudden onset disasters & outbreaks through the rapid
deployment & coordination of quality assured

Emergency Medical Teams

- ✓ Preserving Health
- ✓ Protecting Dignity
- ✓ Saving Lives



**Expand
Global/Regional
Coordination &
Partnerships**



**Set Standards,
Collect Best
Practices &
SOPs & Create
Knowledge
Hub**



**Implement
Capacity
Building &
Training**



**Provide Quality
Assurance &
Classification**



**Deliver
Response
Coordination &
in field Quality
Assurance**

Global Minimum Standards



CLASSIFICATION AND
MINIMUM STANDARDS
FOR FOREIGN MEDICAL
TEAMS IN SUDDEN ONSET
DISASTERS

Emergency



In clinical care & health responses “*good intentions*” are not enough

Principles, standards and quality count, even in “mega-disasters”/ complex emergencies

Operations support & logistics are as important as technical skill

National leadership & coordination is key and may need additional support

Global governance system required







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Equipped. Prepared. Ready.

EMT Classification Types



Type		Description	Capacity
1 Mobile		Mobile outpatient care Primary & Emergency care remote area access teams for the smallest communities	>50 outpatients a day Hub & Spoke model
1 Fixed		Temporary structure Outpatient care Primary & Emergency care clinics	>100 outpatients a day
2		Temporary structure Emergency Surgical & Inpatient care, Outpatient Primary & Emergency care clinic	>100 outpatients and 20 inpatients 7 major or 15 minor surgeries daily
3		Temporary structure Referral level Emergency Surgical & High- Dependant Inpatient care, Outpatient Primary & Emergency care clinic	>100 outpatients and 40 inpatients Including 4-6 intensive care beds 15 major or 30 minor surgeries daily
Specialist Cell		Teams that can join national facilities or EMTs to provide supplementary specialist care services	Any direct patient care related service can be termed a specialist cell EMT when given in emergency response by international providers/clinicians



FERRINO



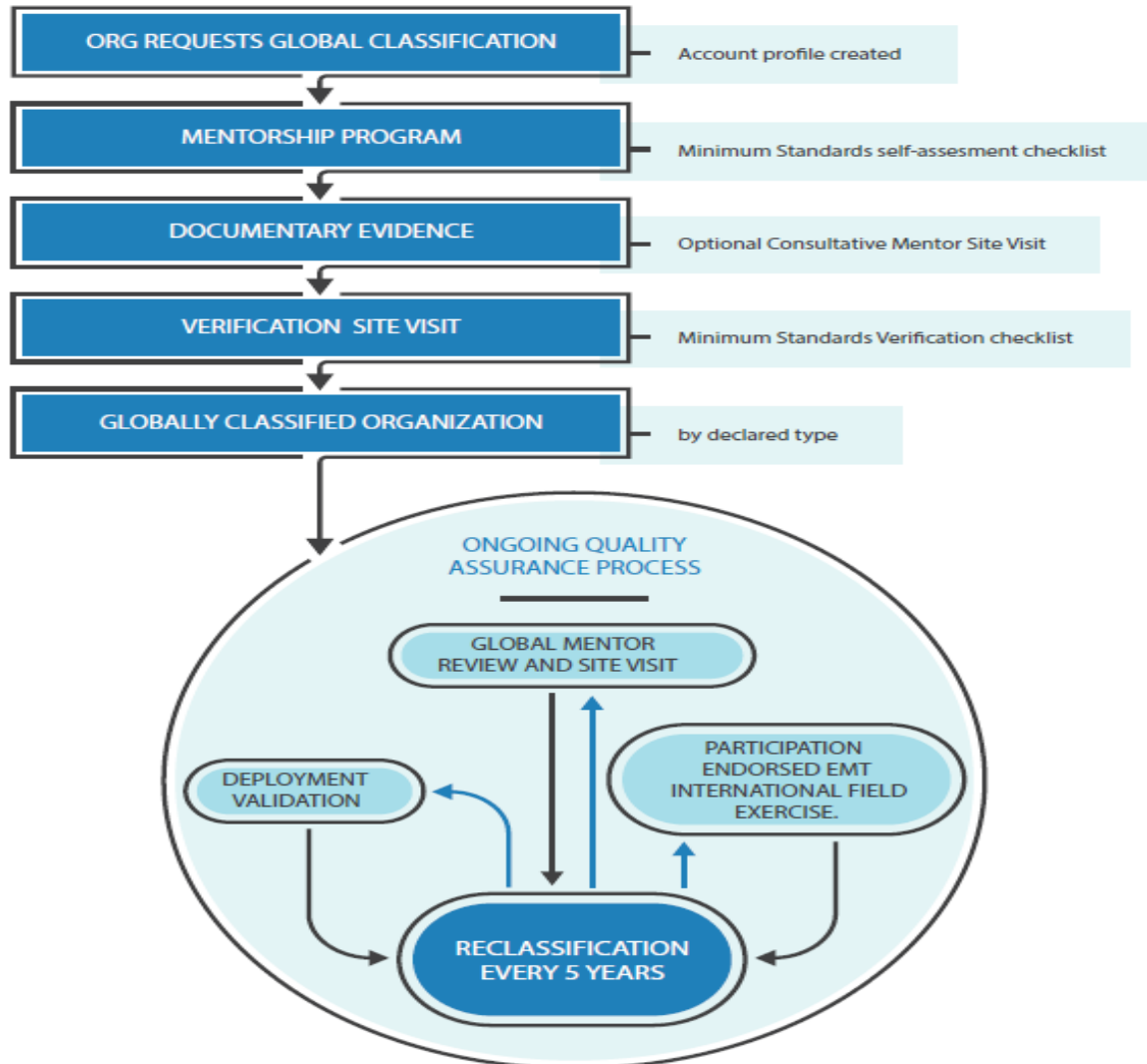


2015/03/18 19:11





Global Classification process



Status:
Classified EMT

↓
WHO Directory of
classified teams

*Ongoing support from mentors,
technical experts & EMT secretariat;
online resources*



NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

Globally Classified EMTs



Principles & standards



Guiding
principles



Core
standards



Technical
standards

Applicable to all
EMTs

Applicable by EMT
type

Equipped. Prepared. Ready.



NATIONAL CRITICAL
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Guiding Principles



“safe, timely, effective, efficient, equitable and patient-centred care...”

- ✓ needs based
- ✓ human rights based approach accessible to all sections of the population
- ✓ treat patients in a medically ethical manner
- ✓ accountable to patients, communities & host MOH
- ✓ coordinated response under the national health emergency management authorities



Equipped. Prepared. Ready.

Core standards



- ✓ Registration, coordination & regular reporting to national health system
- ✓ Adherence professional guidelines/criteria
- ✓ Appropriately trained
- ✓ Minimum hygiene, sanitation & waste management
- ✓ Self sufficiency
- ✓ Keep confidential records of treatment performed
- ✓ Adherence to international quality standards & drug donation guidelines for pharmaceuticals
- ✓ Care of team members & malpractice insurance

Equipped. Prepared. Ready.



Technical standards



- ✓ Triage & initial Assessment
- ✓ Resuscitation
- ✓ Stabilization & referral
- ✓ Emergency care of;
 - Communicable disease
 - Chronic disease
 - Obstetrics
 - Paediatric
- ✓ Wound care
- ✓ Fracture management
- ✓ Anaesthetics
- ✓ Surgery
- ✓ Intensive care
- ✓ Rehabilitation
- ✓ Lab & Blood transfusion
- ✓ Radiology
- ✓ Pharmacy & Drug supply
- ✓ Sterilization
- ✓ Logistics
- ✓ Capability
- ✓ Capacity
- ✓ Size

Equipped. Prepared. Ready.



Global Minimum Standards & Technical Guidance



CLASSIFICATION AND MINIMUM STANDARDS FOR FOREIGN MEDICAL TEAMS IN SUDDEN ONSET DISASTERS



Emergency Medical Team Coordination Cell (EMTCC)

COORDINATION HANDBOOK

June 2017
Version 0.12



EMT-MDS DAILY REPORTING

ORGANIZATION NAME: TEAM NAME: CONTACT PERSON: PHONE: EMAIL: DEPARTURE DATE:		DATE OF ACTIVITY: TIME OF REPORTING: LOCATION: STATE: CITY: VILLAGE: FACILITY NAME: COORDINATES: (LAT) (LONG)																																																																																																																																																																																																																																					
<small>*1 Report to EMTCC until ... *2 Submit one form per one activity day and location.</small>																																																																																																																																																																																																																																							
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* To be the listed and named in the EMTCC with MDS reporting form. Use list for production in contact specific. *4 Abbreviations used for contact dependent counting following guidelines from the EMTCC/MDS, e.g. for infectious diseases: Malaria / Dengue / TB / Lepthospirosis / Botulism, e.g. for hazard: Choking / Haemorrhage / Injury, e.g. for population: Chronic diseases for elderly etc.

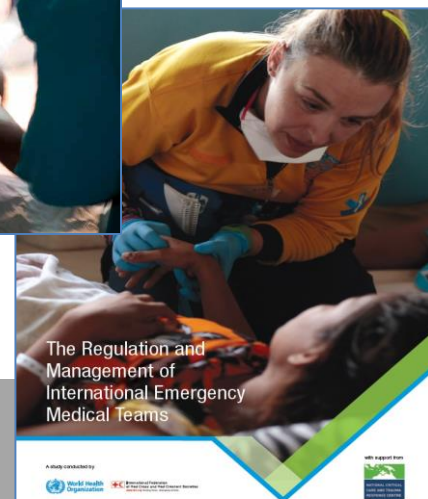
MINIMUM TECHNICAL STANDARDS AND RECOMMENDATIONS FOR REHABILITATION

Emergency Medical Teams



MANAGEMENT OF LIMB INJURIES

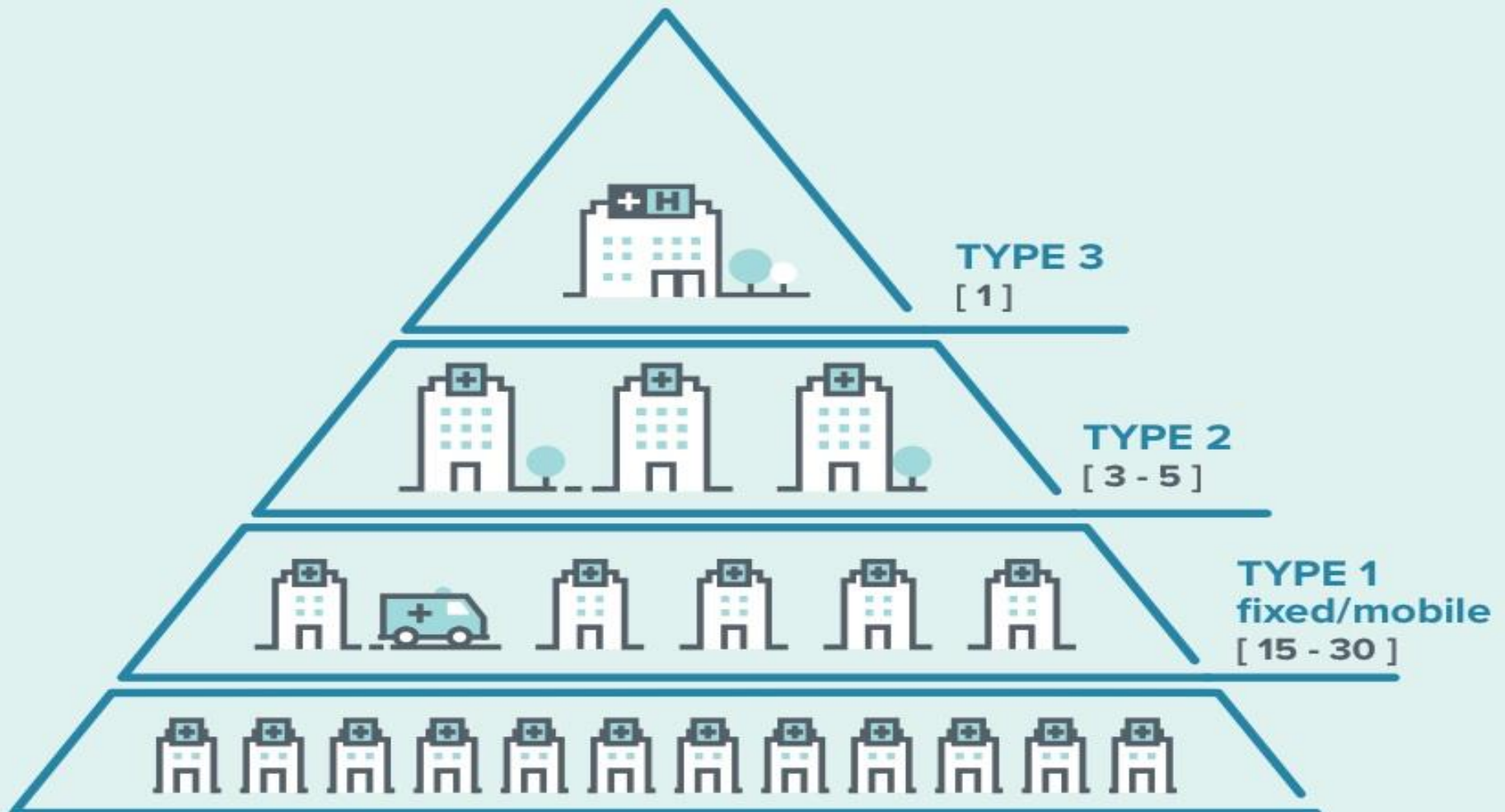
During disasters and conflicts



The Regulation and Management of International Emergency Medical Teams



Local Health Systems & EMTs



Health System impact & response



Early response:
“saving life and limb”

National response:
critical in the 1st hours

Resilient health
system/structures:
vital for early response

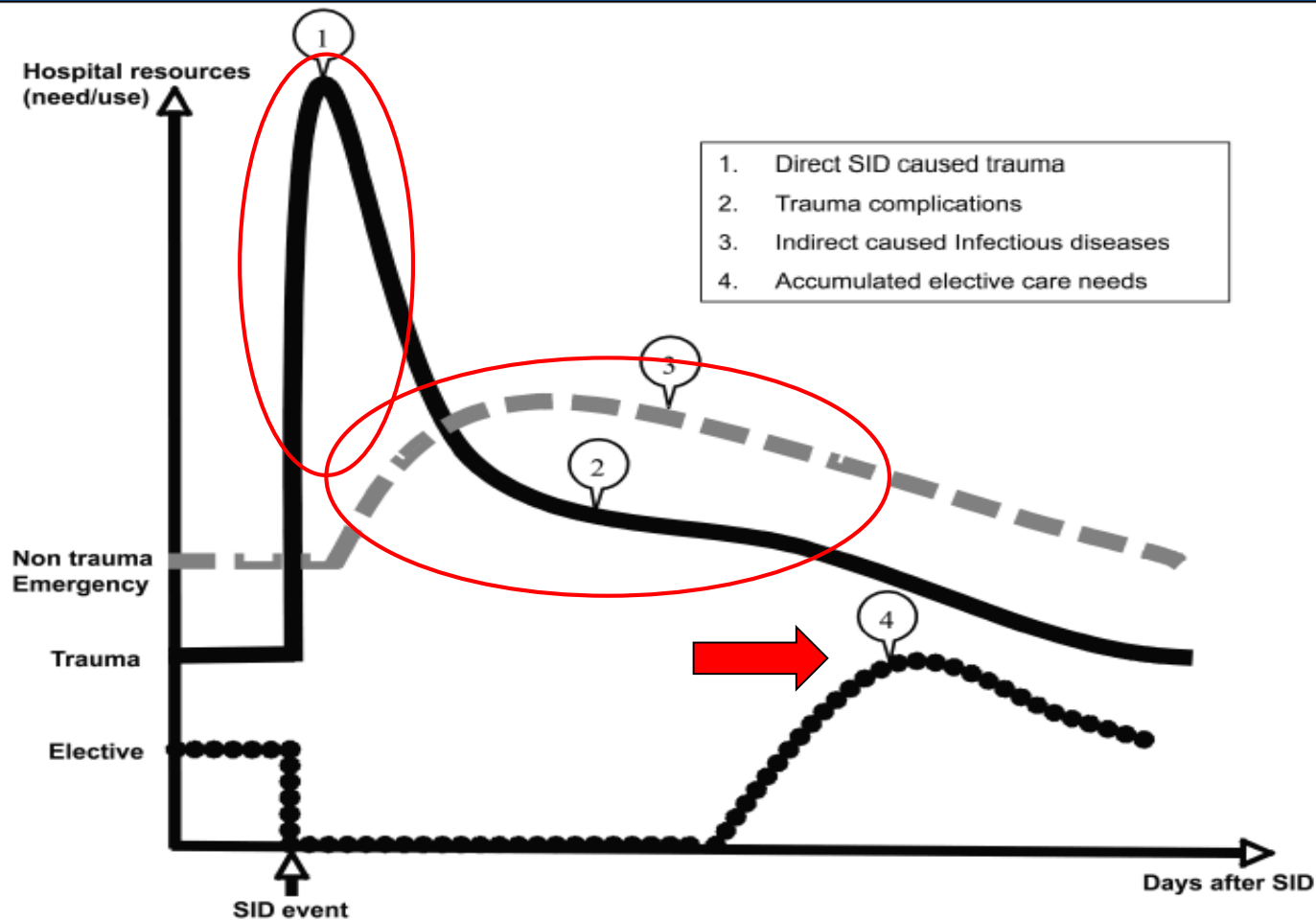


Transition to non
trauma cases :
Need for Business
continuity

Equipped. Prepared. Ready.



SOD Burden of Disease



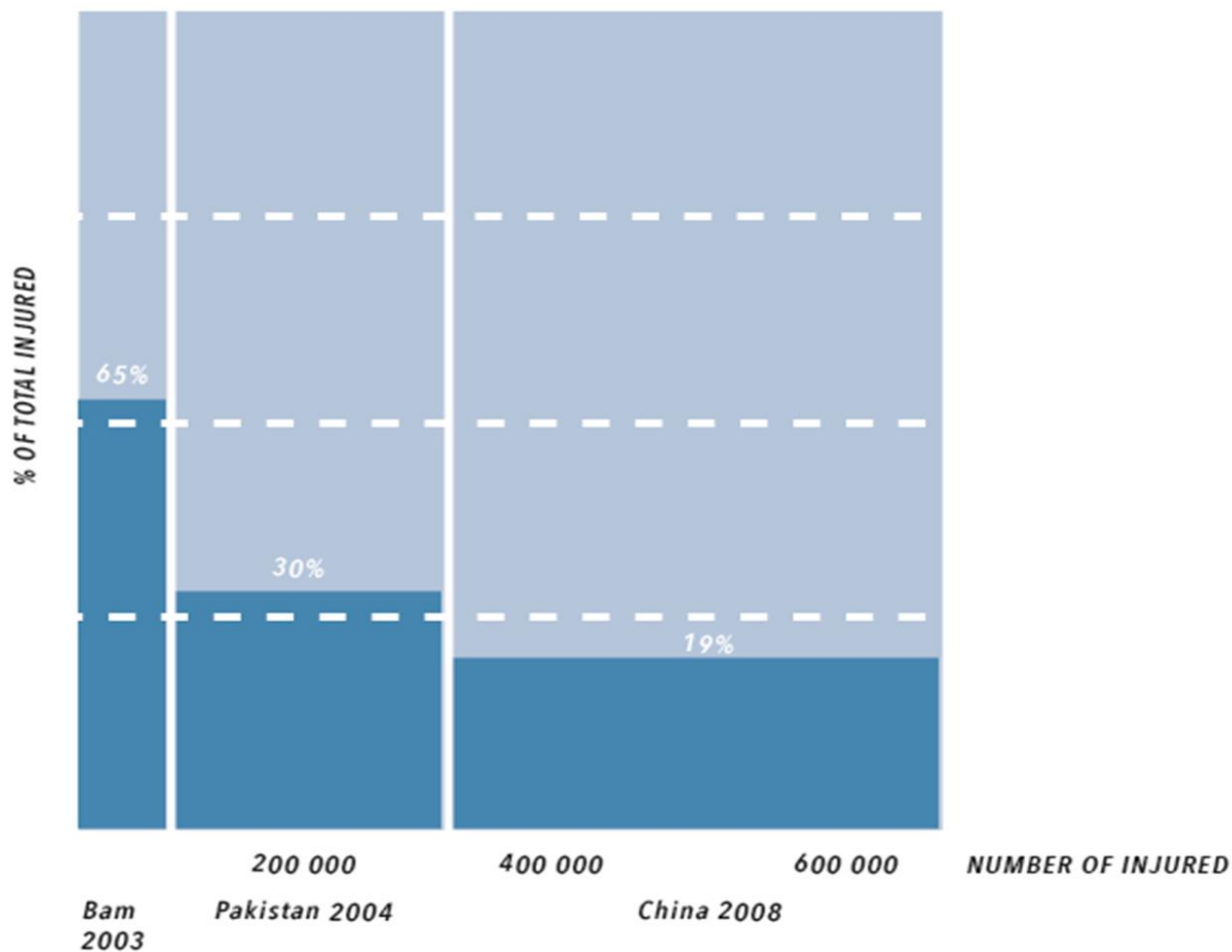
vonSchreeb © 2008 Prehospital and Disaster Medicine

Equipped. Prepared. Ready.

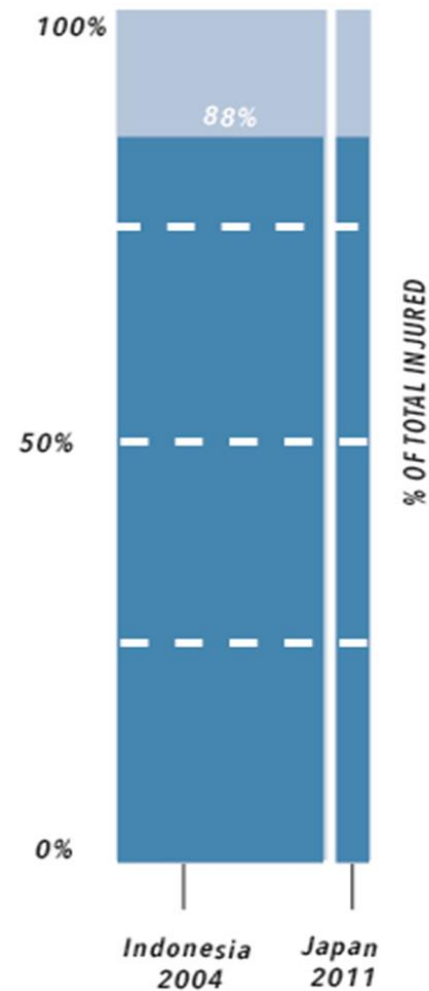


NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

RELATIONSHIP BETWEEN KILLED AND INJURED
IN THREE RECENT EARTHQUAKES

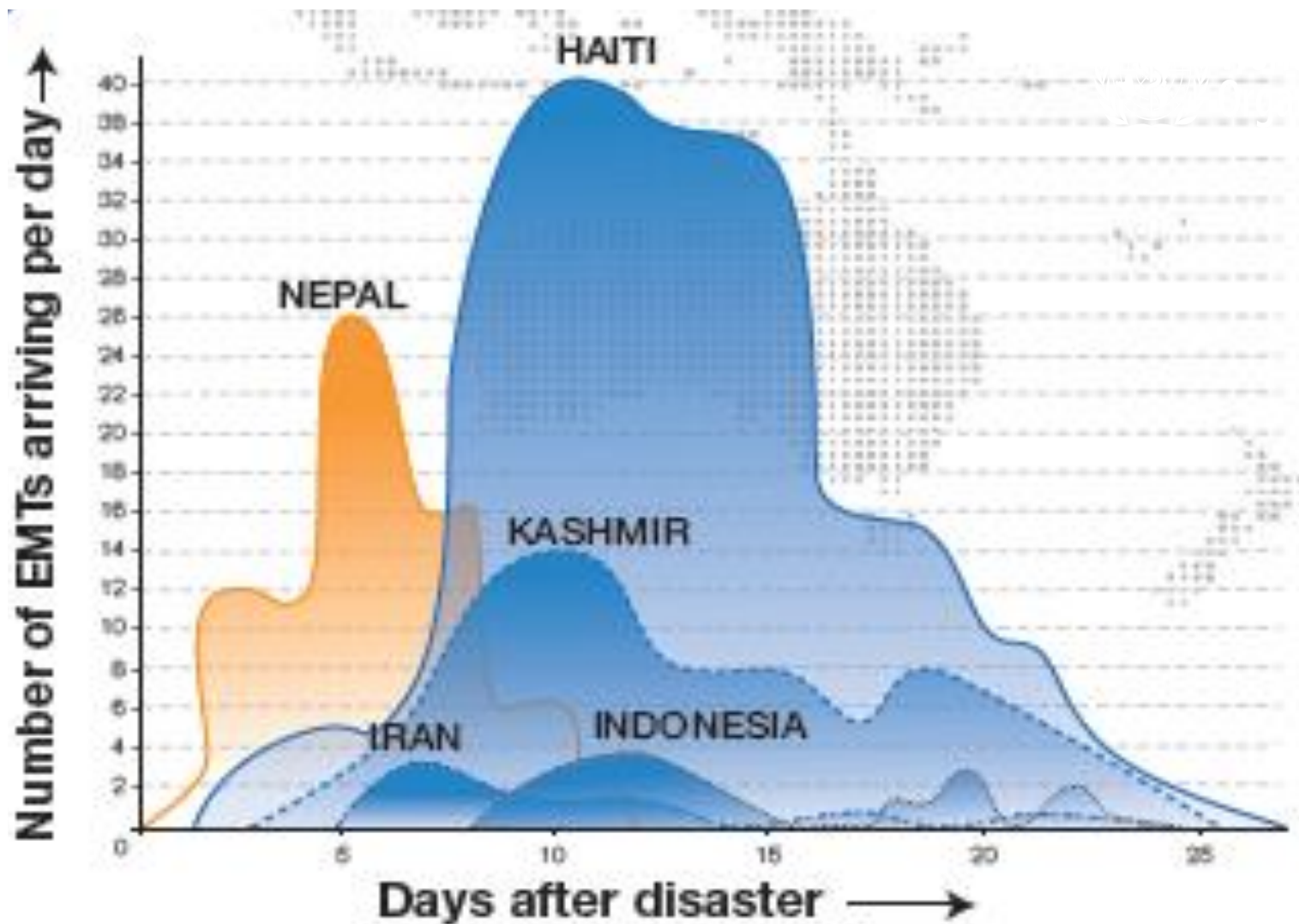


RELATIONSHIP BETWEEN KILLED AND INJURED
IN TWO RECENT TSUNAMIS



NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

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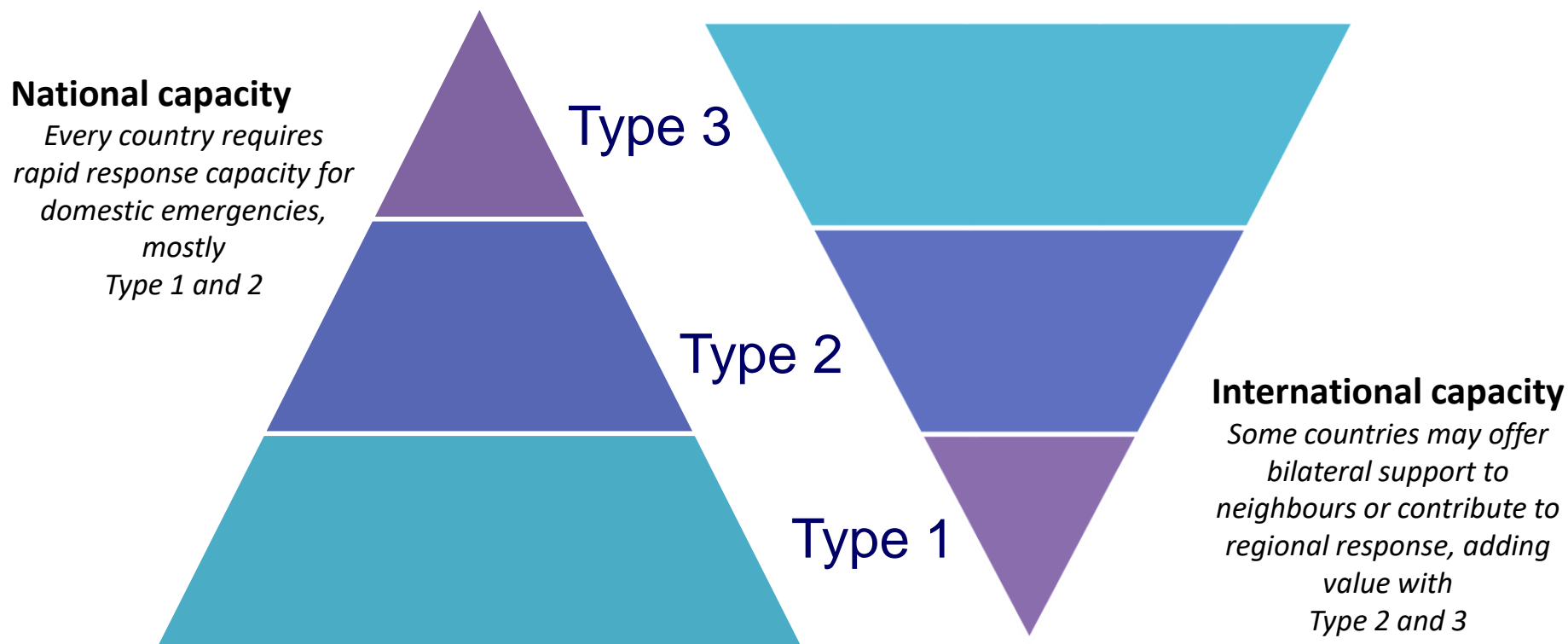


Equipped. Prepared. Ready.



NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

Capacity building & future needs



Support national capacity strengthening including through design of national accreditation process based on the international standards for EMTs



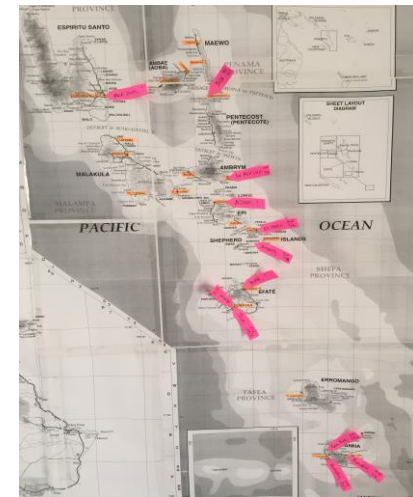
NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

Equipped. Prepared. Ready.

EMT Coordination Cell

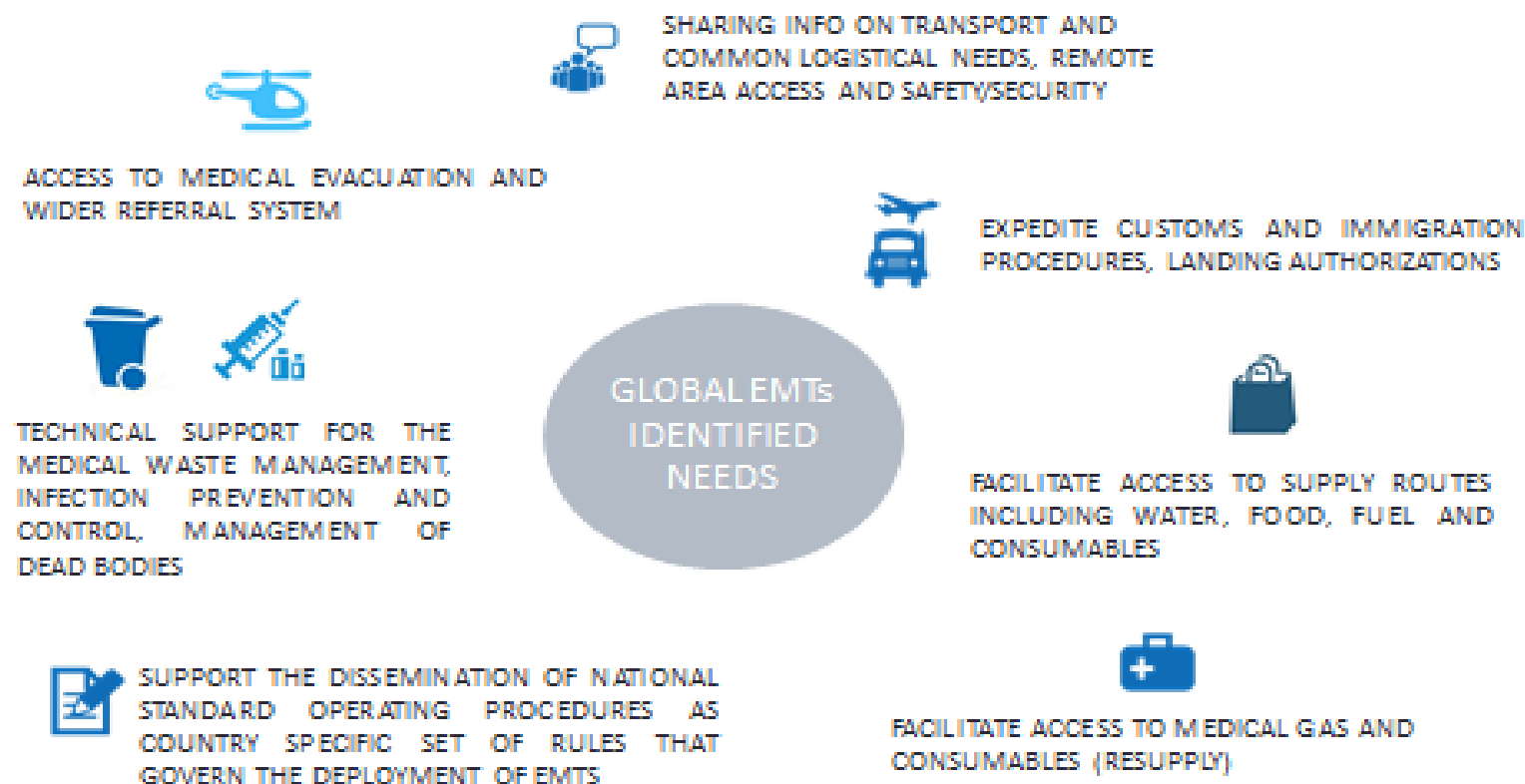


Overall **coordination** of the surge of **responding EMTs** to best **meet** the excess healthcare **needs** resulting increased morbidity due to the emergency or damage to existing capacity



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Operational EMT Logistics Support



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NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

EMT Coordination options



1. Host Government has mechanism for EMT coord at their (H)EOC
2. Host Government, through their Health-EOCs are supported to create RDC and EMT-CC by WHO with OCHA
3. EMTs coordinated in a sub-cluster

Order of preference

Regional EMT Initiative Implementation



Capacity building

- WHO Priority EMT Country program
 - Fiji / Tonga / Solomon Islands / Vanuatu
- NCCTRC Regional Engagement program
 - Bali / Timor / Fiji / Tonga / Vanuatu / PNG

EMT Strategic Advisory Board

Technical Standards WGs

- Quality Assurance
- Minimum Dataset
- Surgical care
- Rehabilitation
- Training
- Logistics
- Coordination

Regional Training

- AUSMAT EMT Logistics workshop
- INSARAG / EMT Earthquake SimEx
- UNDAC training
- Nth American NGO workshop

Mentoring &

Verification program

- Quality Assurance framework
- Lead Mentors
- Verification teams

EMT Coordination Cell

- WHO Country EMT Coordination workshops
- Asia Pacific EMTCC Training
- TC Pam
- TC Winston
- Nepal



NATIONAL CRITICAL
CARE AND TRAUMA
RESPONSE CENTRE

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Future Considerations...

- Global EMT Classification & standards
- EMT activations - Offer vs Request
- Pacific countries Coordination capacity
- Regional / Bilateral responses
- Regional Capability development

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Thank you



<http://extranet.who.int/emt/>



<https://www.nationaltraumacentre.nt.gov.au/>

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