

Emergency Medical Assistance Team (EMAT) Criteria for Deployment

What is EMAT?

Health emergencies that cause significant human injury or illness can sometimes overwhelm the healthcare resources of the community in which they occur. EMAT is a group of health care professionals from across the province consisting of Medical Doctors, Registered Nurses, Respiratory Therapists, Paramedics and X-Ray Technicians that can provide the services of a 20-bed, acute-care field unit in any community in which the local healthcare system is unable to manage a large number of patients due to a health emergency caused by a severe respiratory illness. It can be deployed within 24 hours to any community in the province with road access if the set of conditions outlined below and criteria for deployment are met.

This self-sufficient unit provides a staging and triage base for evaluation and management prior to transporting a patient to a hospital. It can also isolate patients with infectious diseases in individual tents with filtration systems. The unit features the most up-to-date medical equipment and supplies, a communications centre and its own supply of electricity and water. EMAT is integrated with land and air ambulance services so that patients can be transported to a hospital once that facility is able to accept them.

If any community in Ontario finds that it does not have the capacity to respond effectively to a health emergency, it can request that EMAT be sent to help under the conditions described below. EMAT would be deployed after a community's own disaster plan has been activated and the community's systems are overwhelmed.

Conditions to be Met Prior to Requesting EMAT:

- Emergency is focused on a severe respiratory illness (this will be expanded as the skill sets and training of EMAT volunteers are expanded).

AND

- Code Orange invoked by hospital.

AND

- Community disaster plan implemented.

AND

- Efforts to transfer patients out of hospital/region as appropriate have been, or will rapidly become, inadequate.

AND

- Resolution of emergency is predicted to be greater than 6 hours + EMAT response and travel time

Criteria for Deployment of EMAT:

1. Local hospital and regional acute care resources overwhelmed by emergency, defined by:
 - Labour availability inadequate to meet requirements.
 - >10% over normal sick calls, which compromises the ability to provide acute care services to emergency related patients.AND
 - Chief Nursing Officer identifies staffing levels as compromising patient/staff safety.AND
 - staff unavailable to meet needs of emergency-related patients.OR
 - Physical resources overwhelmed
 - >100% of emergency capacity (to be defined provincially in consultation with hospitals Spring, 2004) in use for >24 hours.AND
 - 20% of inpatient beds dedicated to emergency.AND
 - specialty beds, as defined by the emergency are at full capacity for >18 hours.OR
 - Other mitigating factors
 - Single hospital community.
 - Length of emergency and impact on local health services and resources.
 - Community infrastructure unable to meet demands (i.e. Community Care Access Centres, public health unit).
2. Local hospital and regional acute care resources physically incapacitated by emergency and unable to care for current and/or anticipated in-hospital acute care patients:
 - Volume of patients cannot be managed.
 - Patients have been discharged as appropriate.

Process for Implementation:

- Process
 - Local hospital contacts the Ministry's Emergency Management Unit (EMU) (24 hour hotline: 1-866-212-2272).

Ministry Emergency Executive Committee (EEC) makes a decision: EMAT medical director/program manager, CEO of Air Ambulance Base Hospital Program, local hospital and public health unit included in discussion. Meeting to occur within three hours of initial call.