IL RUOLO DEL SISTEMA DELLA PREVENZIONE NELLA GESTIONE DELLE EMERGENZE

Bologna, 10 ottobre 2023 - AMBIENTE LAVORO 2023

Gestione delle emergenze sanitarie

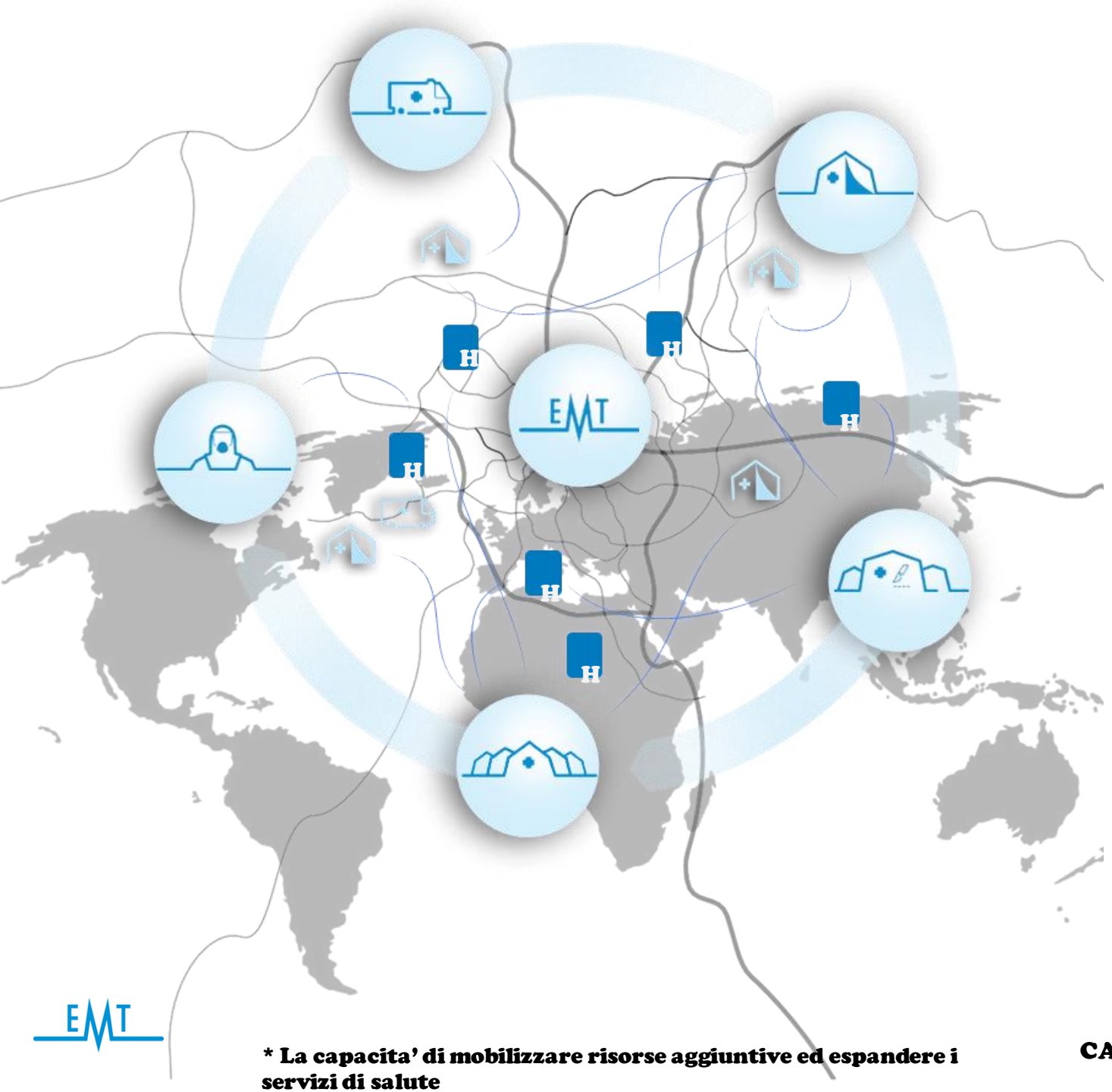
RegioneEmilia-Romagna

INAIL
ISTITUTO NAZIONALE PER L'ASSICURAZIONE CONTRO GLI INFORTUNI SUL LAVORO

SERVIZIO SANITARIO REGIONALE
EMILIA-ROMAGNA

In collaborazione con

World Health Organization



Emergency Medical Teams

Teams multidisciplinari di professionisti sanitari che forniscono assistenza sanitaria di base e salvavita alle comunità colpite da disastri, conflitti, epidemie e altre emergenze sanitarie.

Una parte fondamentale della preparazione, della risposta e della resilienza dei sistemi di salute e del corpo di emergenza sanitaria globale (GHEC).

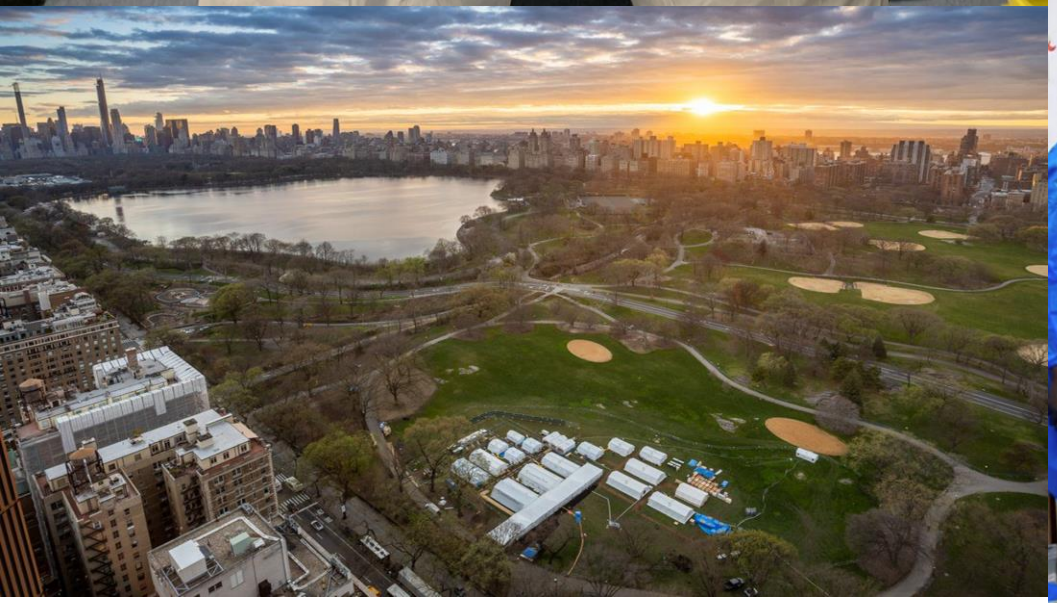
Surge capacity* nelle situazioni di emergenza.

CAPACITY BUILDING

QUALITY ASSURANCE
STANDARD SETTING

EMERGENCY RESPONSE

*** La capacita' di mobilizzare risorse aggiuntive ed espandere i servizi di salute**



Scandinavian
RZESZÓW
RSE
RSE
NURSE

Il mondo affronta emergenze sanitarie sempre più frequenti, intense e complesse

- **1.5 disastri al giorno** previsti entro il 2030
- 187 eventi epidemici all'anno e in aumento
- Aumento di contesti fragili (FCV), insicuri e di zone di conflitto
- 103 milioni di sfollati

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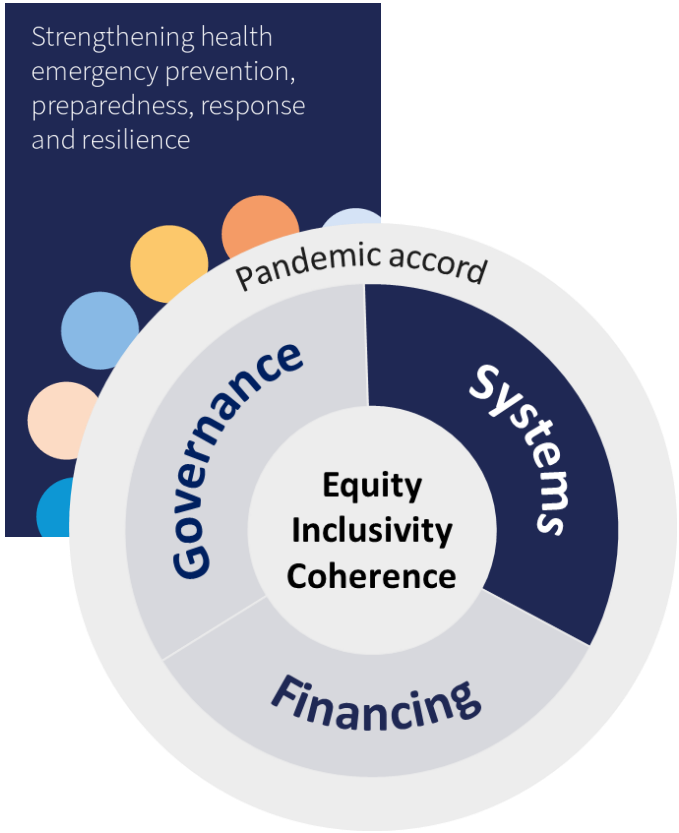
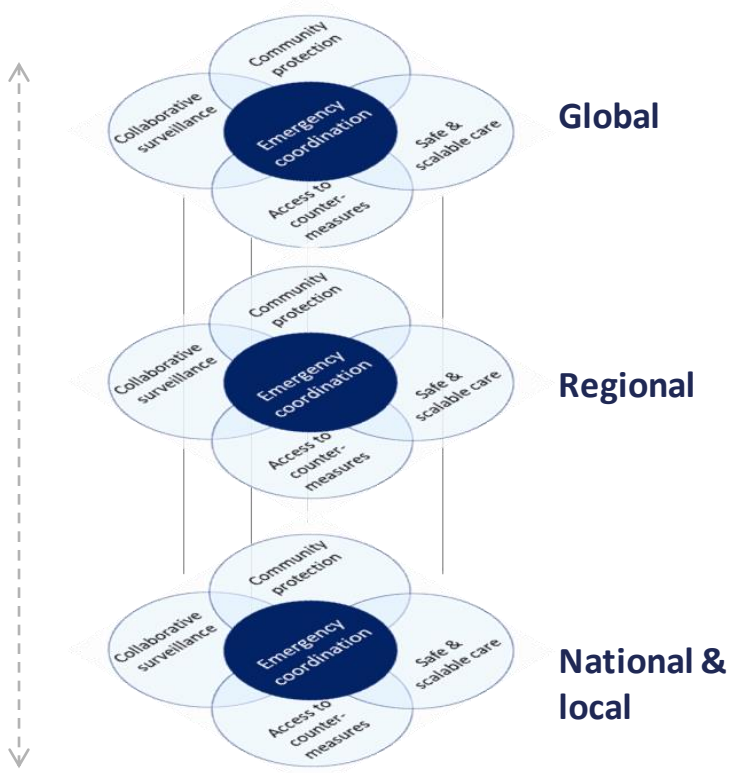
HEPR Systems: strengthen capacity, coordination and collaboration



Critical core capabilities for health emergency preparedness & response

Connected from local & national to regional & global levels



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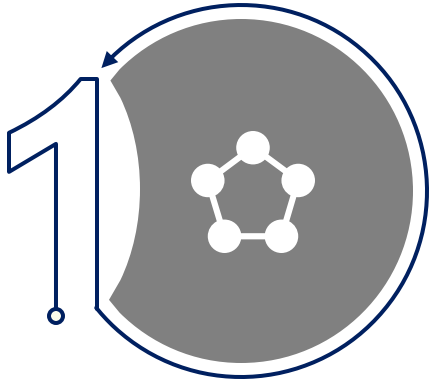
Vision | The Global Health Emergency Corps is envisioned as **a global cooperation & collaboration platform** between countries and regions which brings together….

EOC-NET



National, regional, and global health **emergency leaders at the strategic-technical level** to operate in a coordinated manner

Interoperable rapid response (surge) teams based within each country that are pre-trained and equipped according to **common standards/ protocols and able to effectively support other countries**

Readiness and resilience are closely related concepts in health emergencies, as outlined in the updated APSED3

Resilience encompasses the ability of individuals, communities, and health systems to adapt, recover, and continue functioning during and after an emergency.

By integrating readiness and resilience health systems and communities can:

- be operationally ready for health emergencies
- respond at an early stage and more effectively to mitigate the impact
- improve their capability to withstand the emergency
- recover more rapidly
- build resilience

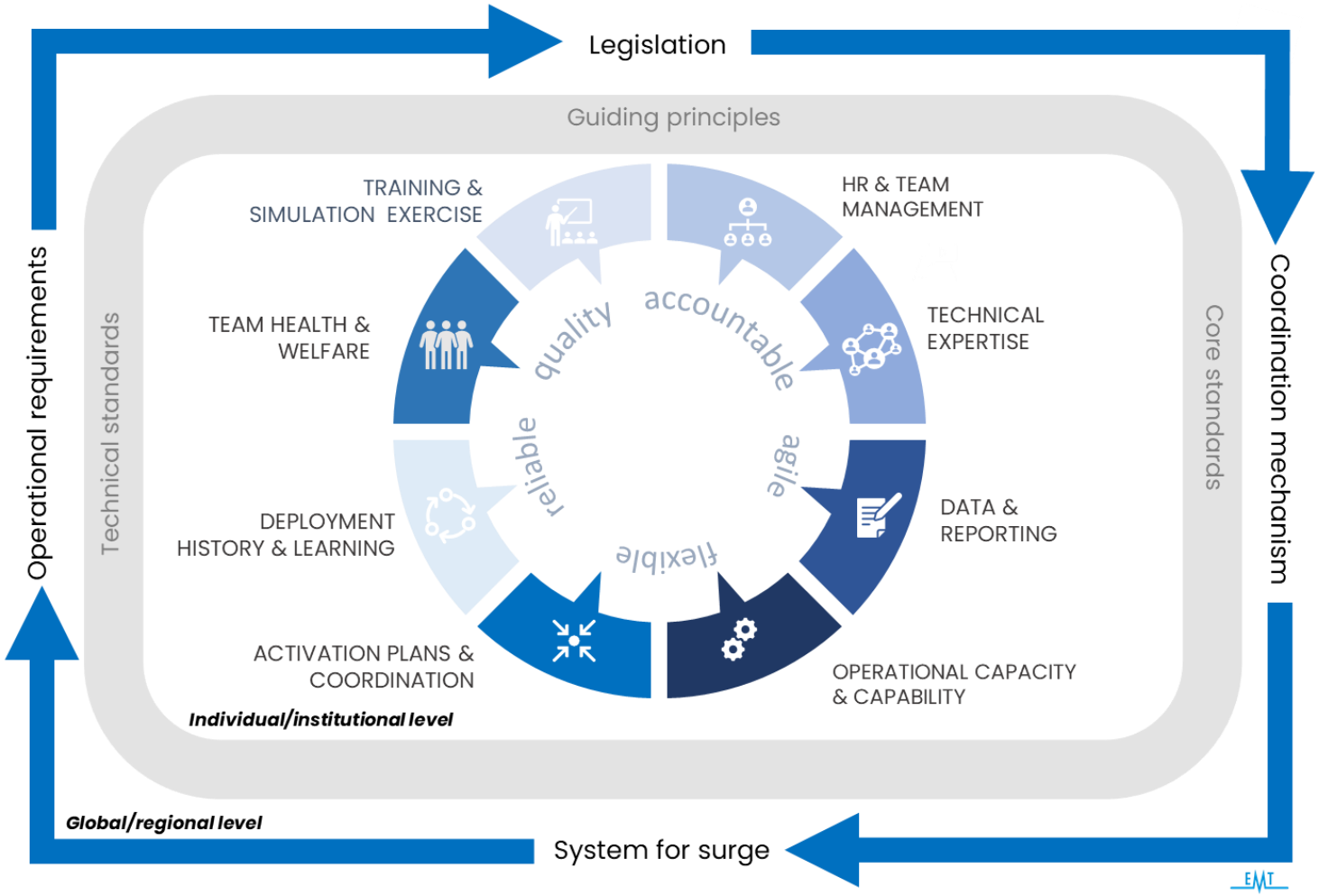
For example, well-functioning logistics supply chains and distribution networks ensure that resources reach the affected areas rapidly, allowing communities to withstand the emergency.

Otto elementi per conformare team di risposta rapida e specializzata (surge capacities)

Otto elementi

Risorse umane & gestione del team, expertise tecnica, data & sistema, capacita' logistica e clinica/salute pubblica, piani di attivazione e coordinazione, lezioni da risposte precedenti, salute & benessere dello staff, formazione ed esercitazioni pratiche

Creazione di teams e prioritizzazione delle risorse in base ai rischi a livello locale e nazionale tenendo in considerazione le linee guida internazionali



La strategia EMT 2030 urge Paesi ed organizzazioni ad adottare un approccio propositivo

a creare e rinforzare i propri EMTs e altri team di risposta rapida

seguendo quattro passi fondamentali

1. **Adottare** i principi e linee guida (ref metodologia EMT) e adattarli al proprio contesto
2. **Stabilire** un sistema di surge a livello nazionale per facilitare la rapida mobilitazione e le richieste di assistenza se e quando necessario
3. **Rafforzare** le competenze tecniche e operative del personale sanitario
4. **Documentare** per aumentare accesso a strategie basate sull'evidenza e condivisione di protocolli.

I recenti disastri, epidemie e conflitti hanno dimostrato l'importanza vitale di passare da risposte reattive a un approccio proattivo, utilizzando una pianificazione avanzata delle capacita' d'intervento (surge capacity) con un focus nazionale e regionale.

EMT 2030 Strategy

Vision

A world in which every country has the capacity to respond rapidly, effectively and flexibly to national emergencies, leveraging regional and subregional capacities to support vulnerable communities and the people most in need

Goal

Populations affected by health emergencies have access to quality, life-saving and essential health services through effective, scalable, interoperable, and rapidly deployable EMTs and other emergency capacities fully integrated into resilient, national health systems

Strategic Objective 01

Strengthen Effective Partnerships, Leadership and Operational Governance

Strategic Objective 02

Provide Comprehensive, Accessible and Quality Health Services

Strategic Objective 03

Implement and Scale-up Strategies for Standardization and Quality Assurance

Strategic Objective 04

Strengthen Information Systems, Evidence and Research

Values

Community and people-centred approach	Context- and needs-based response	Strengthening surge capacity	Interoperability	Regionalization

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High-quality, interoperable and coordinated surge capacities at regional and global **level** to augment local and national response as and when required

Dedicated and coherent mechanism for actication, deployment and coordination

National emergency response

Local/national rapid response/ surge capacities

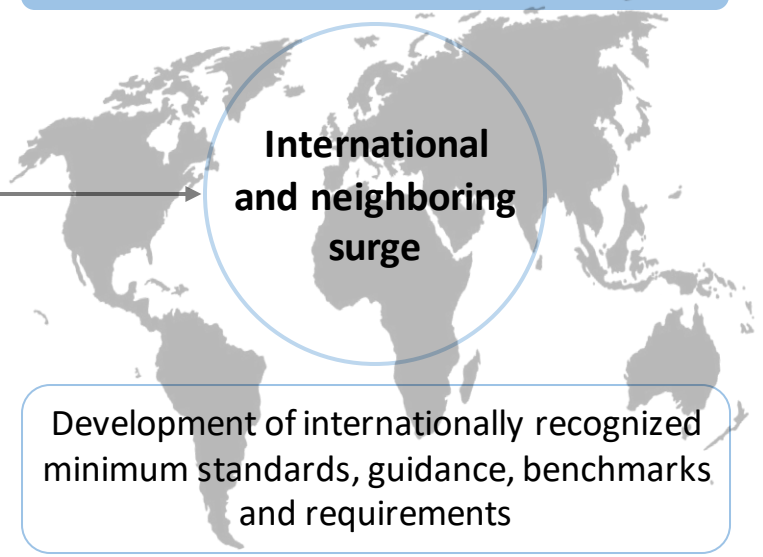
National adaptation and implementation of minimum standards, guidance, benchmarks and requirements

Quality assurance processes based on nationally adapted requirements

Regional and multi-country approach

Training hubs, mentorship, twinning, knowledge sharing

International emergency response



International and neighboring surge

Development of internationally recognized minimum standards, guidance, benchmarks and requirements

Quality assurance processes based on minimum standards for int'l deployment

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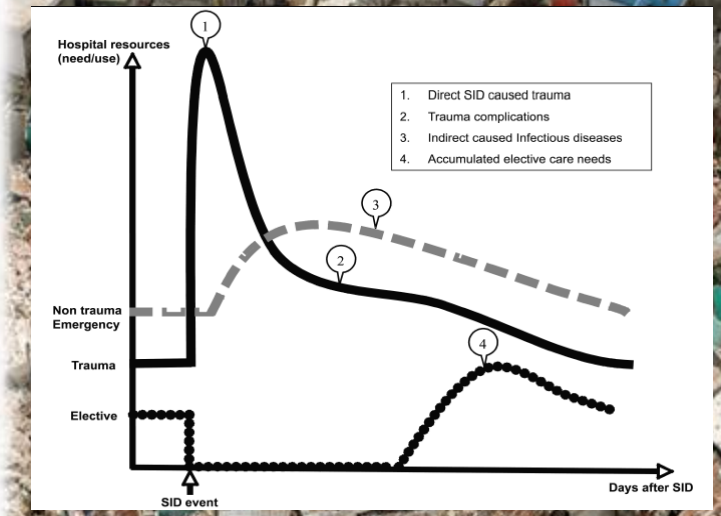

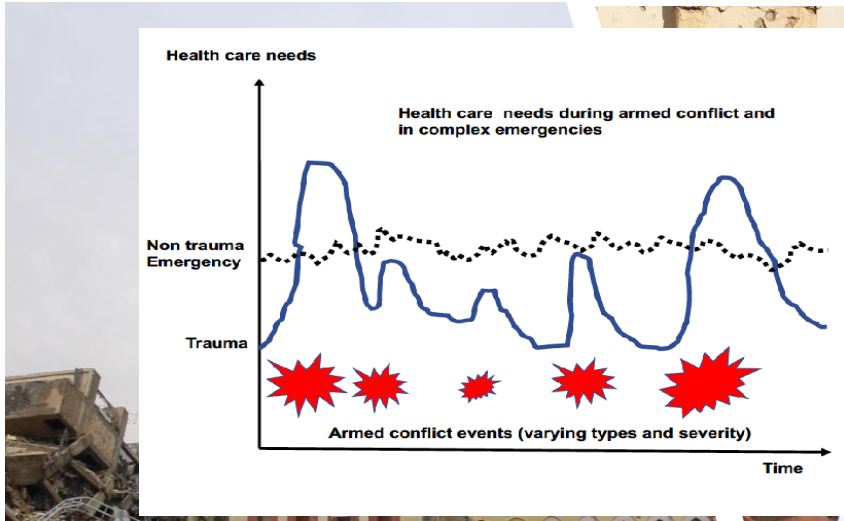

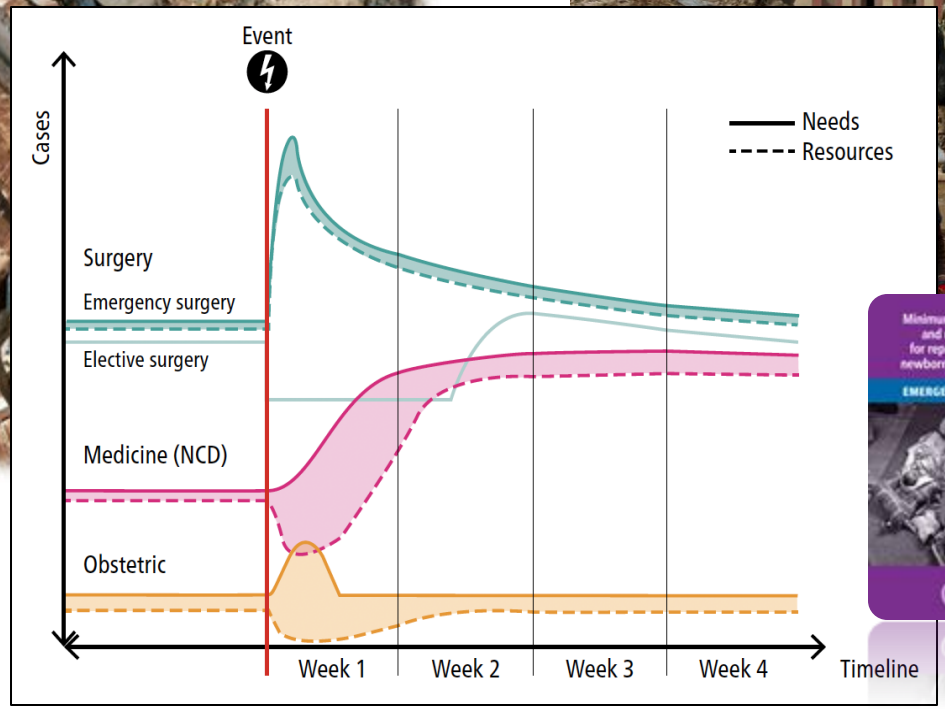

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Terremoto in Turchia

- **34** Strutture Campali (EMTs nazionali e internazionali)
- **176** Unita’ di primo soccorso (e avanzato)
- **130** Dormitori

590.468 pazienti

52.248 pazienti trasferiti in alter province.

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Türkiye: Earthquake M7.8, February 2023
EMT Minimum Data Set (MDS) Daily Reporting

Findings from the on-site snapshot analysis*

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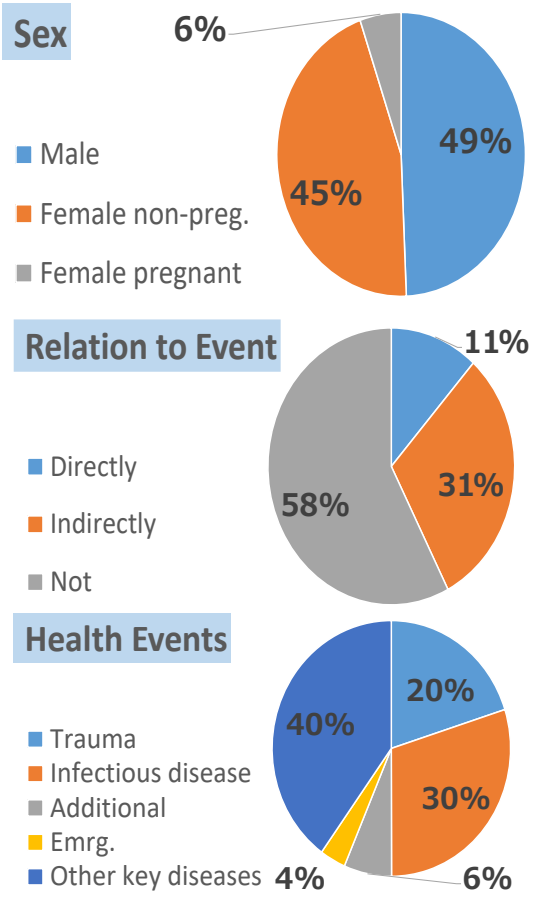
Table 2023-02-17A

Prevalence of consultations which were directly/indirectly related to the emergency event (earthquake).

Date	directly related to event	indirectly related to event
2023-02-13	16%	25%
2023-02-14	13%	30%
2023-02-15	11%	23%
2023-02-16	10%	32%
2023-02-17	11%	35%

- *Prevalence of consultations directly related to the event is decreasing.*
- *Prevalence of consultations indirectly related to the event is increasing.*

Classification by the EMT MDS.		
MDS44	Directly	Patient visit with injury or illness directly caused by an emergency event.
MDS45	Indirectly	Patient visit caused or worsened by situational change after an emergency event. e.g.) Environmental exposure
MDS46	Not related	Patient visit not caused by the event. e.g.) NCD



* Data could be marginally change after further data cleaning

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Considerazioni

- Ritardi nel processo
- Qualita’ della documentazione
- Triage/prioritizzazione
- Comunicazione civile-militare
- MEDEVAC (trasferimento diretto)
- Ricerca
- Intelligenza medica
- Communicazione tra ospedali

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Highly infectious disease outbreak teams

Recommendations established for three different scenarios: acute watery diarrhea, respiratory infections with epidemic potential, viral hemorrhagic fever with human-to-human **transmission.**

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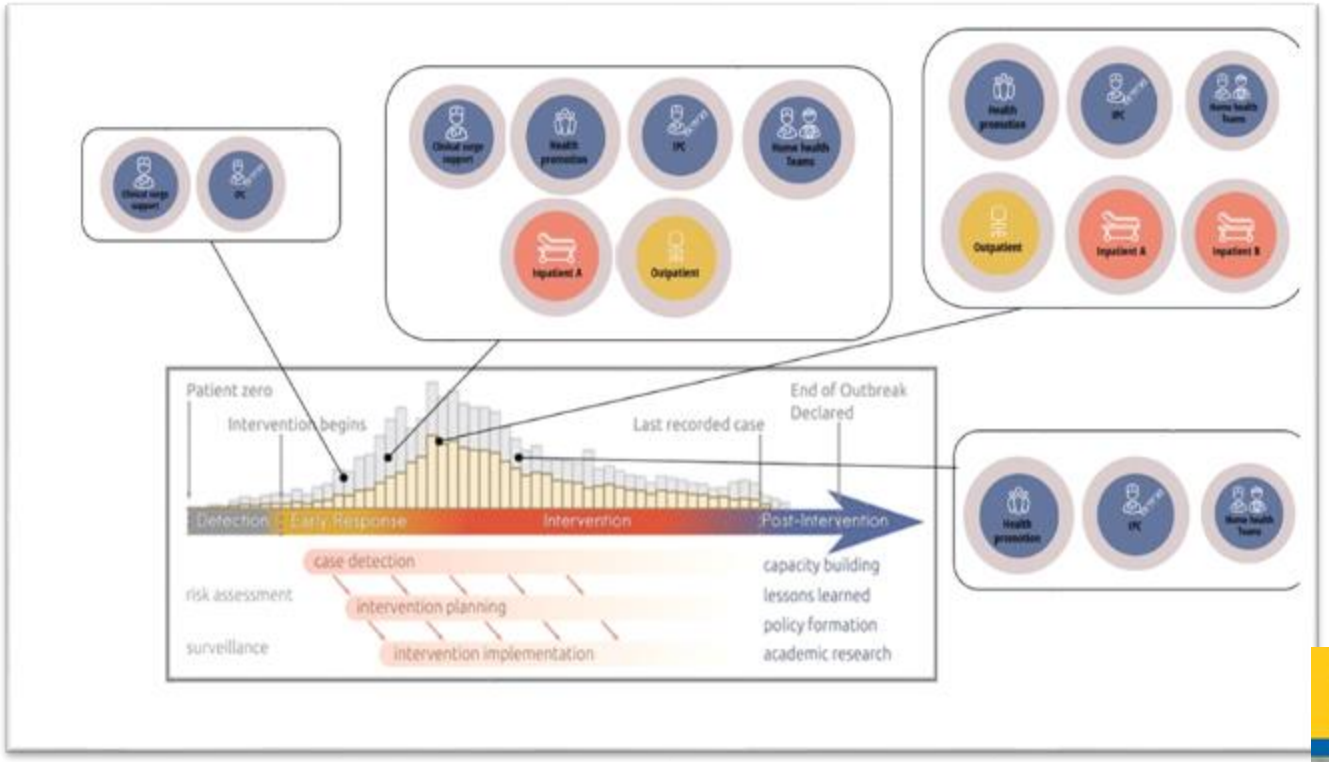
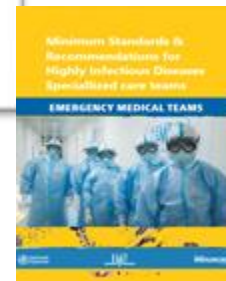
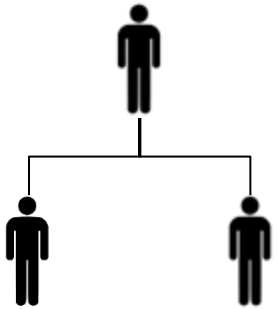
Different types of teams needs as surge in outbreaks



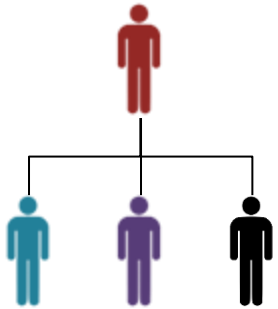


Roles: Epidemiology Laboratory Infection Prevention and Control Case Management Social Mobilization Risk Communication

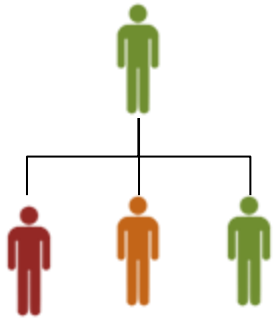
Example Structures:



"We need staff for a mobile lab!"

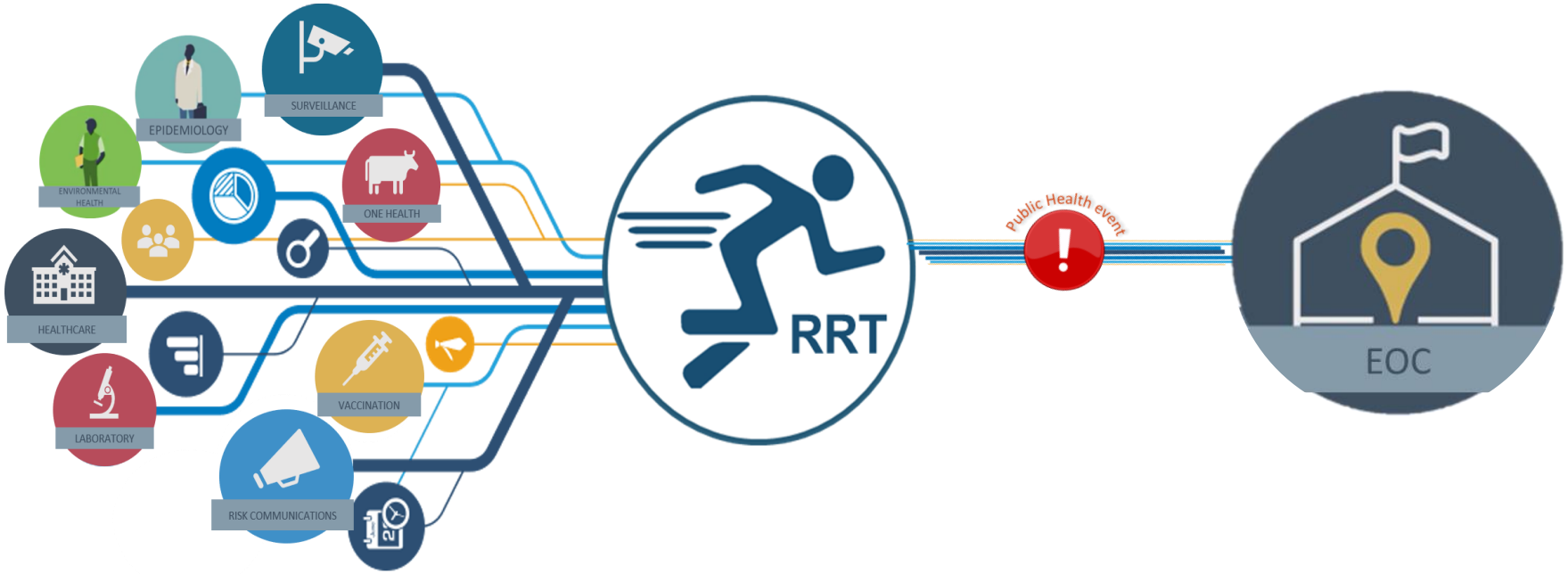


"There's a suspected outbreak in a health facility."



"Rumors in the community are making contact tracing difficult."

Indagine epidemiologica e di sorveglianza



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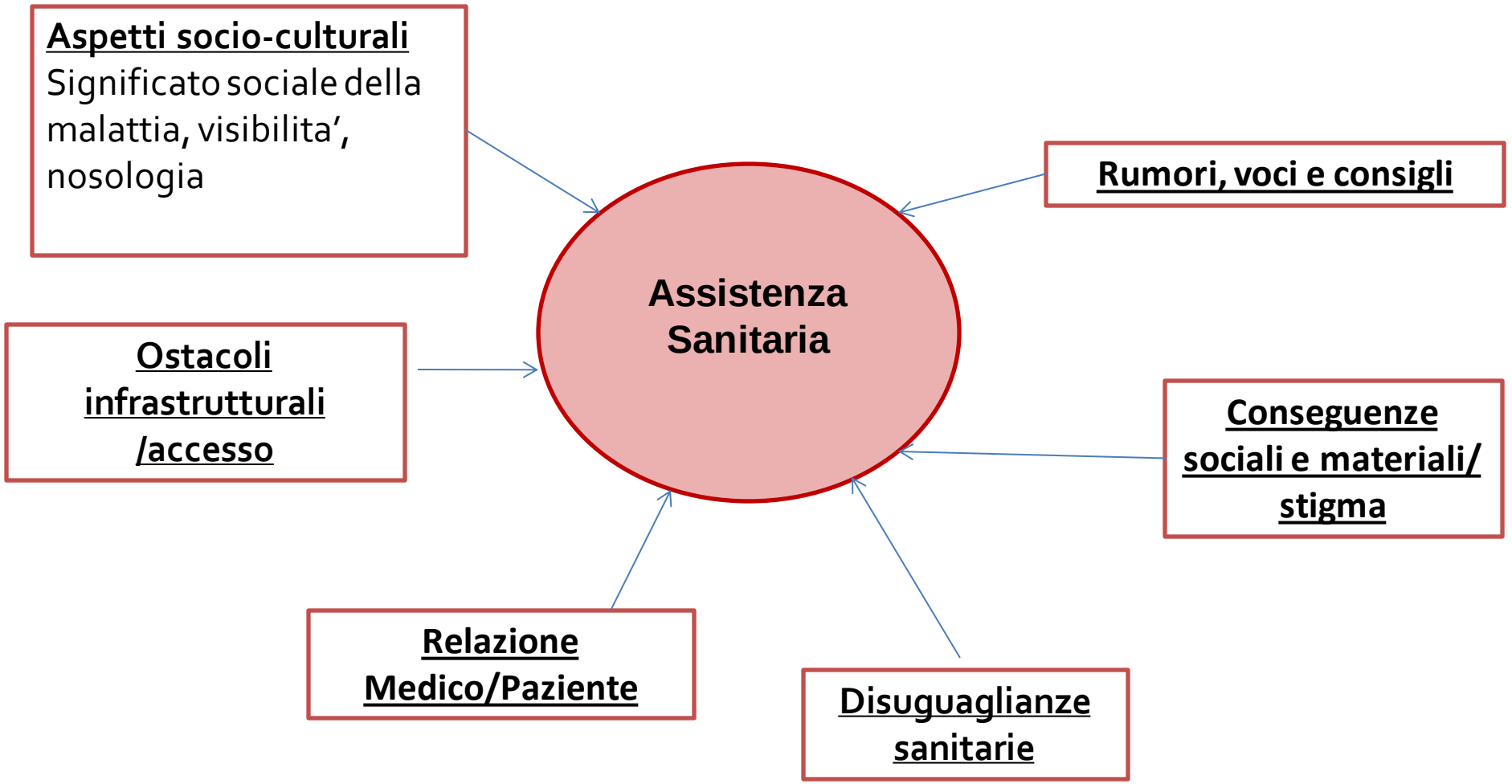
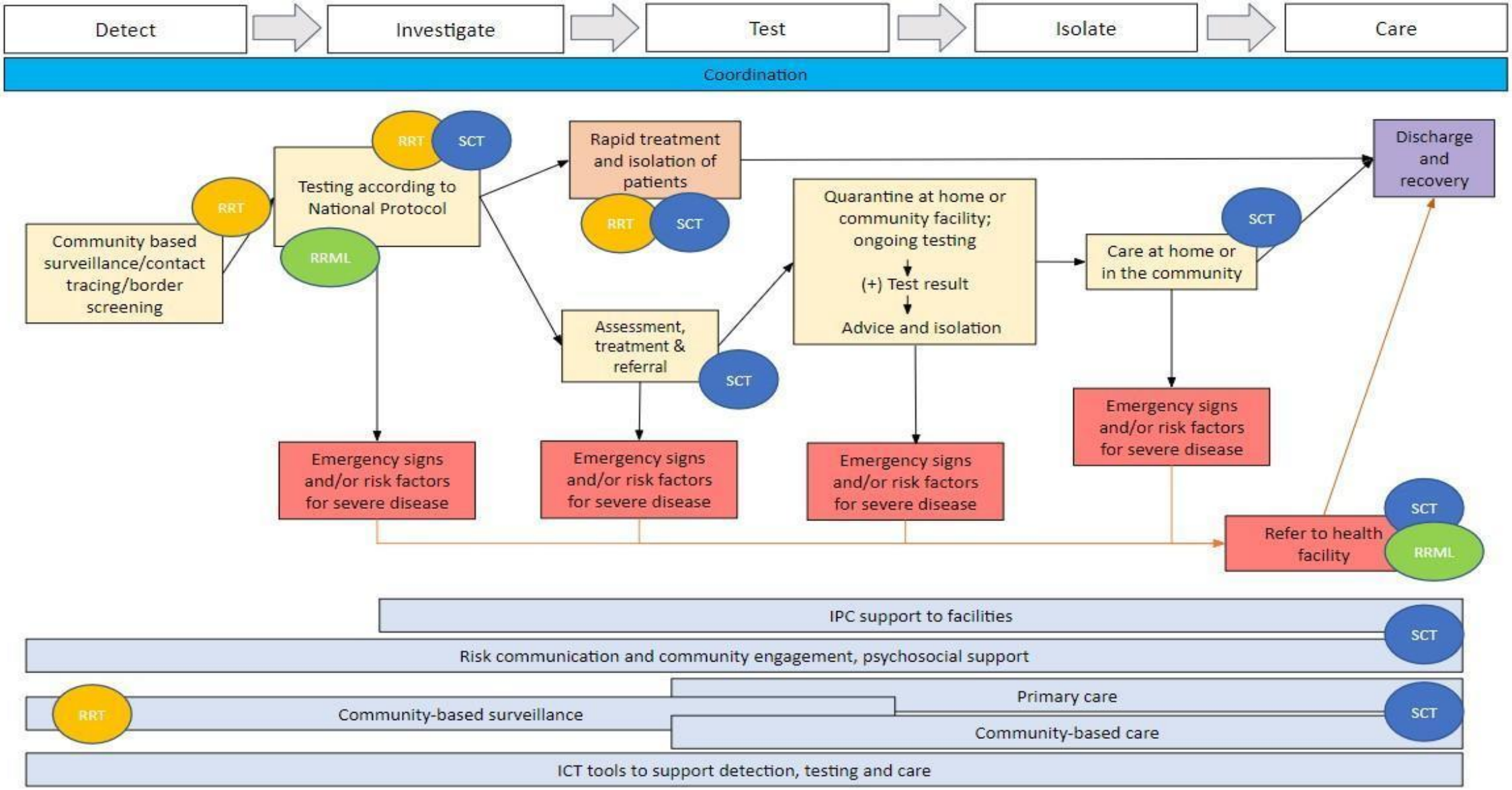
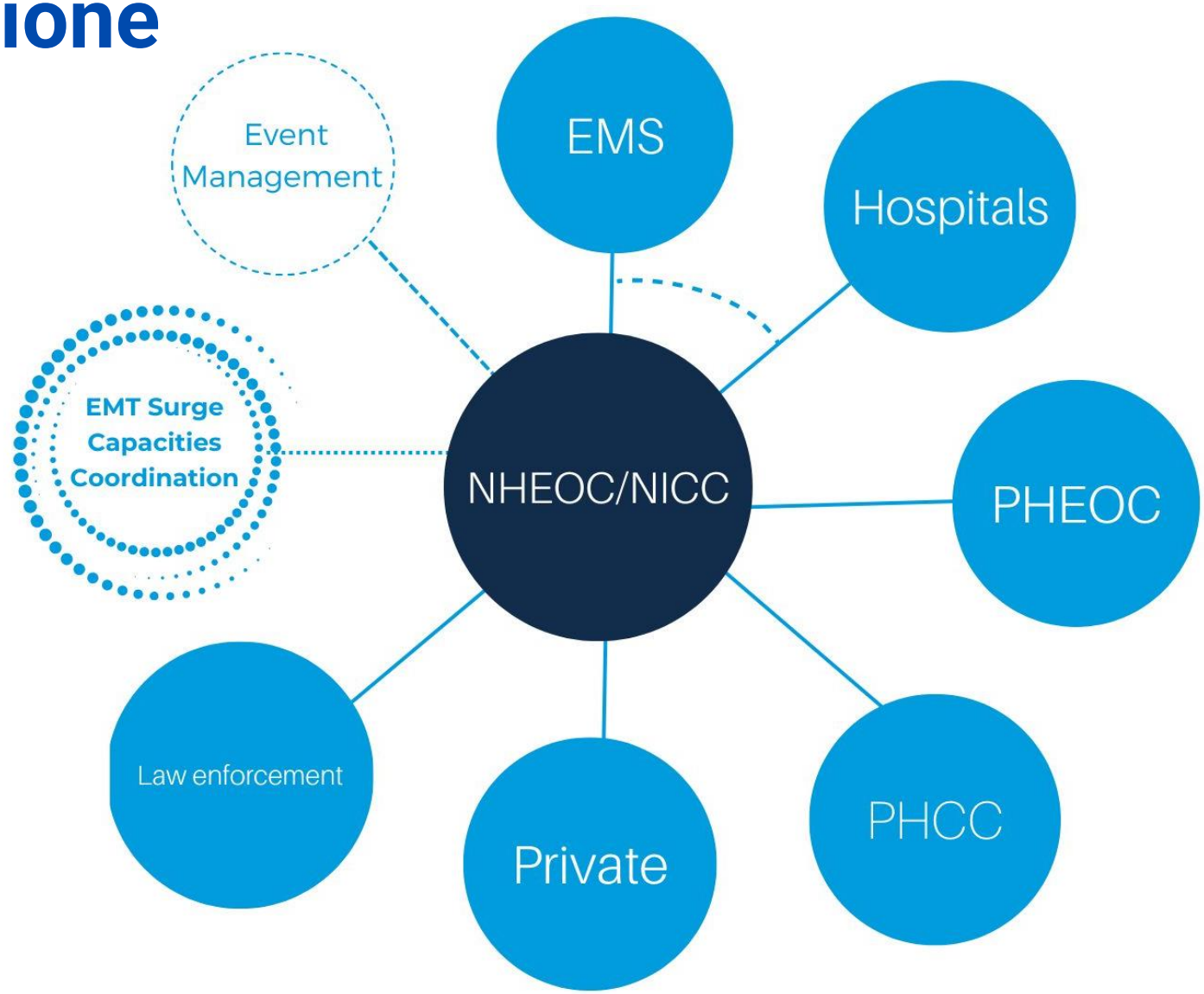
Health Seeking Behaviours, un modello multifattoriale




Detect
Investigate
Test
Isolate
Care
Coordination
Community based surveillance/contact tracing/border screening
RRT
Testing according to National Protocol
RRT
SCT
RRML
Rapid treatment and isolation of patients
RRT
SCT
Assessment, treatment & referral
SCT
Quarantine at home or community facility; ongoing testing
(+) Test result
Advice and isolation
Care at home or in the community
SCT
Discharge and recovery
Emergency signs and/or risk factors for severe disease
Emergency signs and/or risk factors for severe disease
Emergency signs and/or risk factors for severe disease
Emergency signs and/or risk factors for severe disease
Refer to health facility
SCT
RRML
IPC support to facilities
SCT
Risk communication and community engagement, psychosocial support
RRT
Community-based surveillance
Primary care
Community-based care
SCT
ICT tools to support detection, testing and care

Draft

Coordinazione



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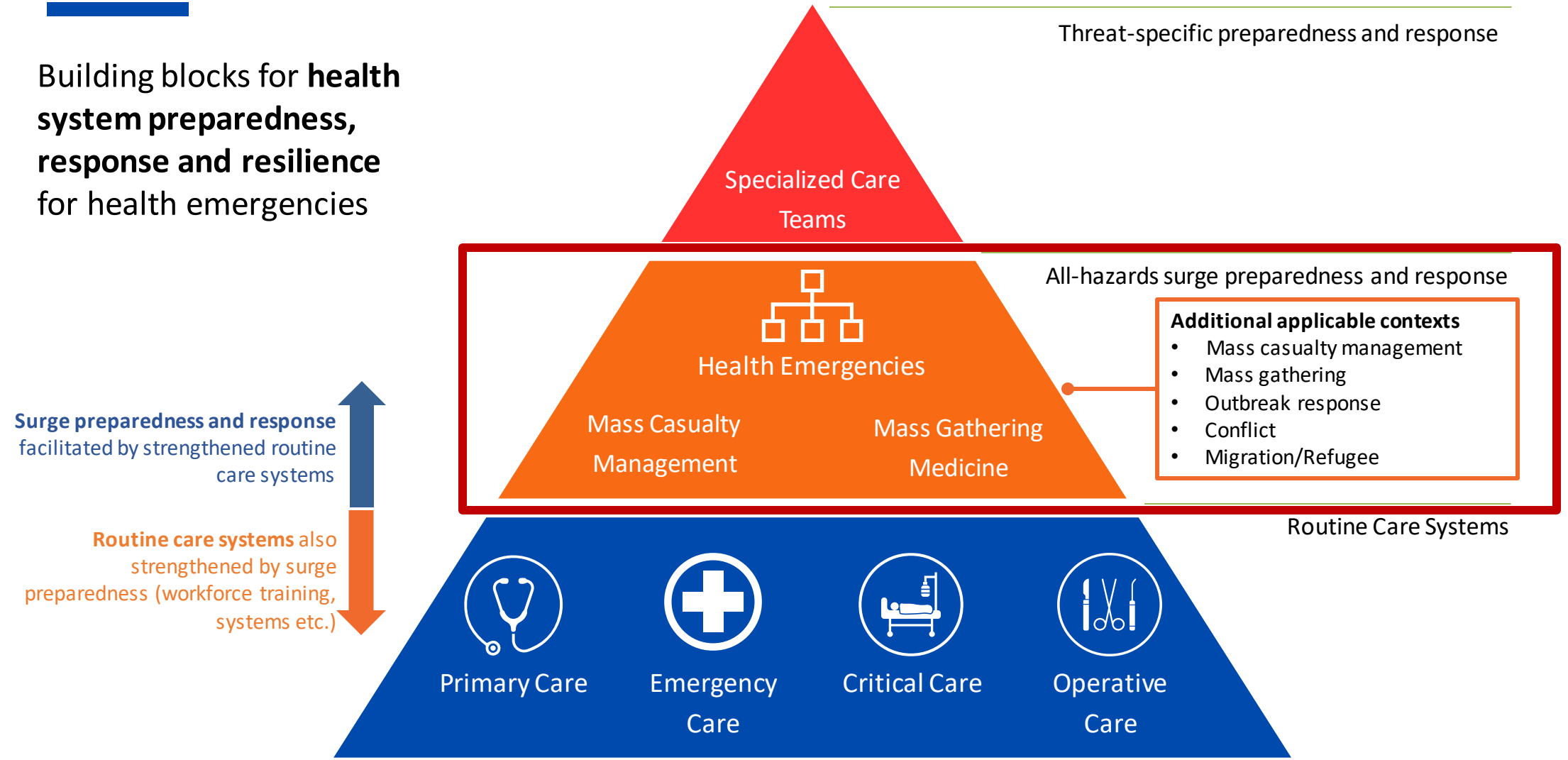
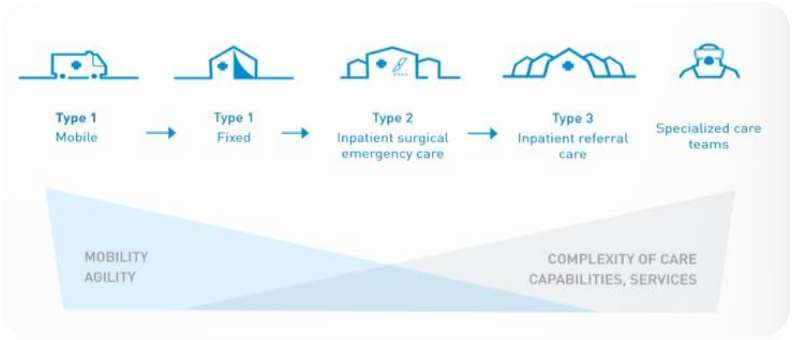
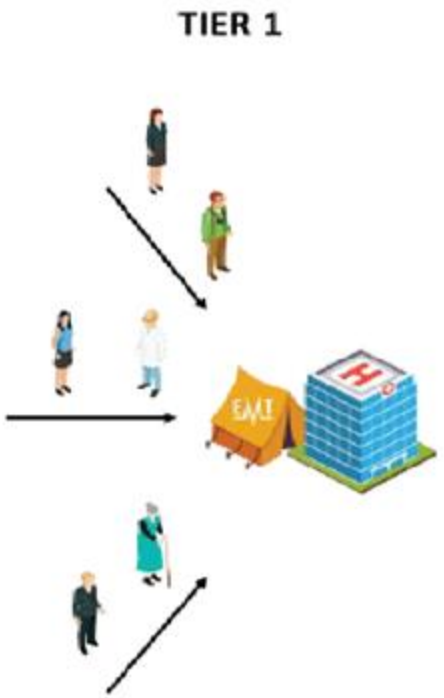
Surge Systems

Building blocks for **health system preparedness, response and resilience** for health emergencies

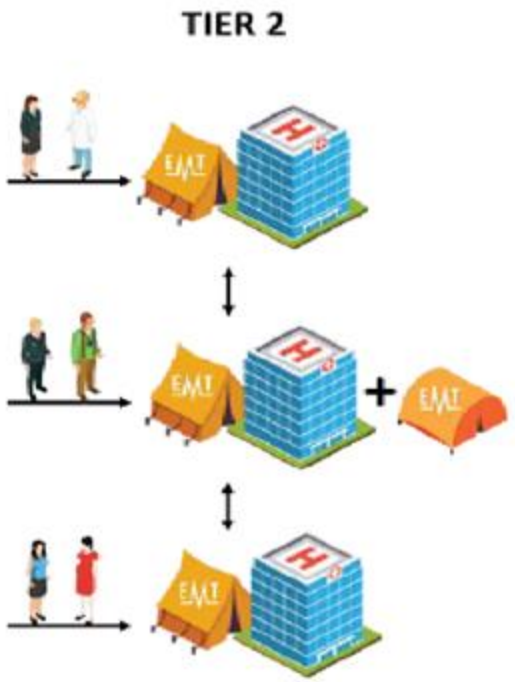


Surge Planning

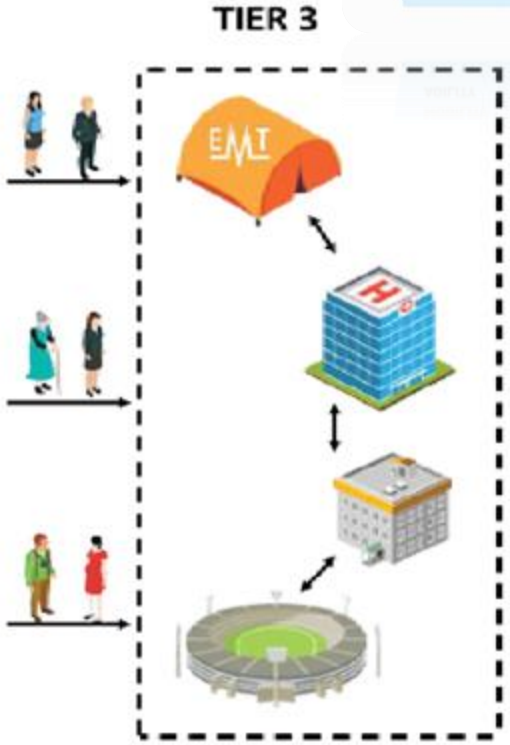




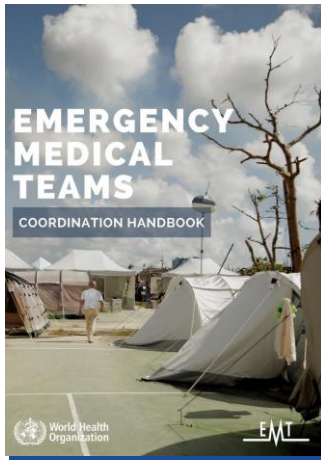
Tier 1: Strengthen facilities

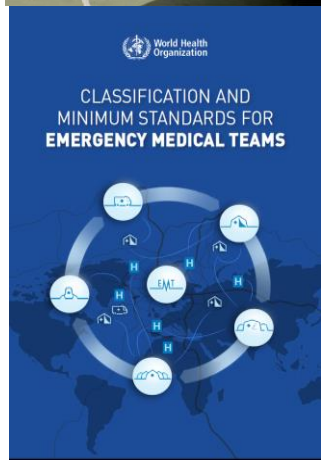


Tier 2: Strengthen the network

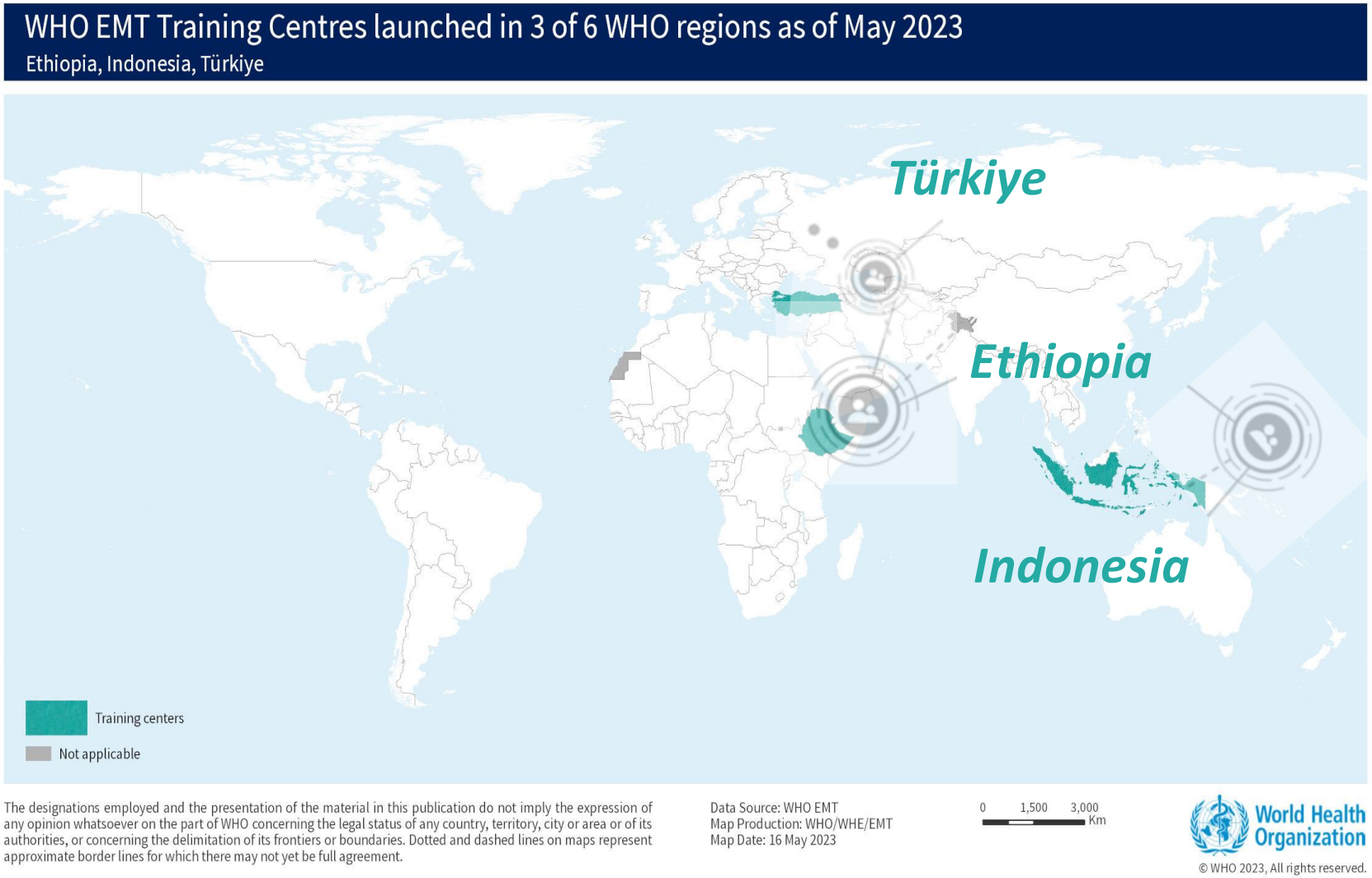


Tier 3: Expansion to alternative sites





Multi-country Training Hubs

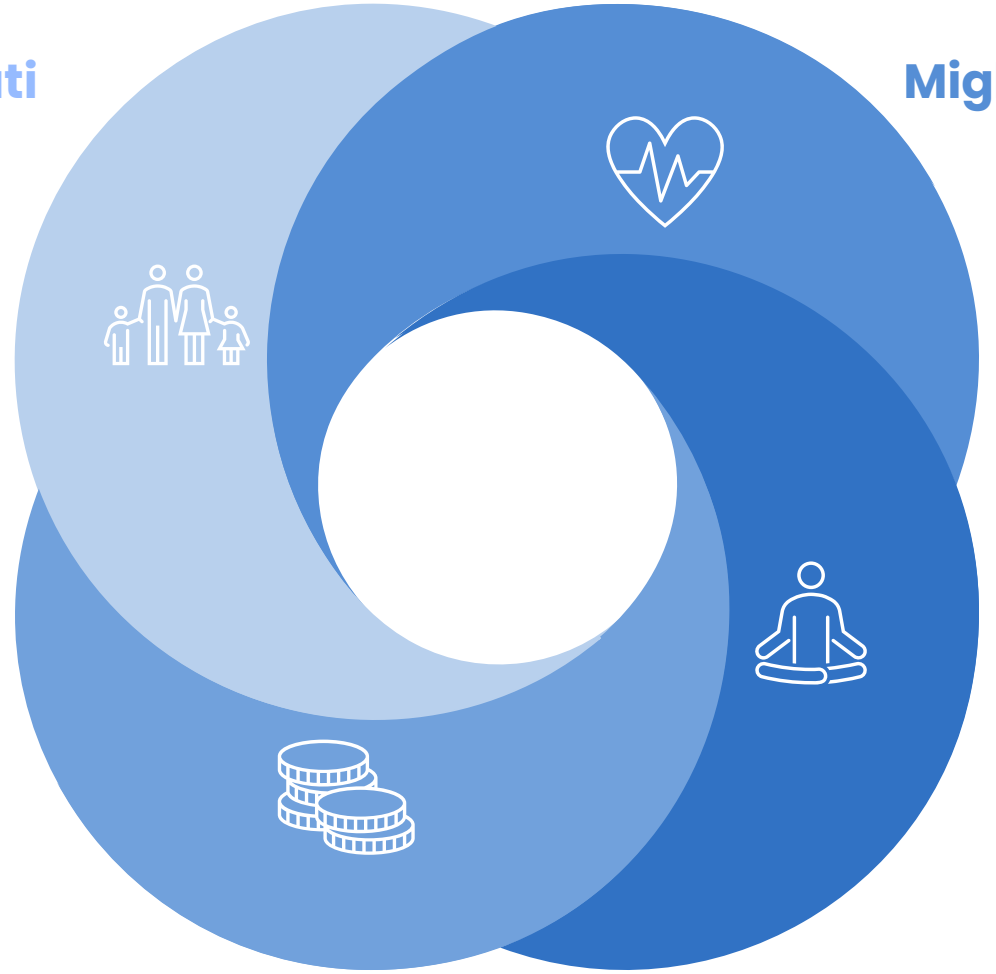


- **Rafforzare** le competenze tecniche e operative del personale sanitario
- Migliorare la tempestività e la qualità dei servizi forniti da tutte le capacità di risposta rapida.
- Sviluppo di capacità, compresi i corsi basati sulla simulazione

Principi

Interventi umanizzati

Migliori risultati per i pazienti



Riduzione dei costi

Sicurezza e benessere dello staff

Find out more

http://extranet.who.int/emt
emteams@who.int

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