

Network Of practitioners For Emergency medicAl systems and cRitical care



This project has received funding from the European Union's Horizon 2020 programme, under grant agreement no. 786670



COVID 19 response Israel-NO FEAR WADEM webinar April 2nd 2020

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A pan-European Challenge

- Scattered and complex chain of actors in security-related incidents: EMS, hospital staff, police, firemen, citizens
- Fear of new threats: terrorism, armed conflicts, dirty weapons, new infectious diseases
- Lack of communication between practitioners and suppliers: suppliers are not aware of the specific needs of practitioners, practitioners are not aware of new products and innovation
- No common methodologies and standardized actions



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The network will be structured along 3 main pillars, with transversal expert groups

volunteers

Acute care of the patient	 Care in hospital and pre-hospital setting Continuity of care between EMS and receiving hospitals Psychological support
Acute care operations in security related incidents	 Preparedness, planning and coordination with the authorities before the incident Calling, activation of system, scene management and on-site coordination Transportation and coordination with treatment facilities
Training and education of personnel and	 Innovative curricula and training methodologies New simulation tools in pre- and in-hospital preparedness and response

 Inclusion of pre-hospital care, disaster and emergency medicine in medical and nursing schools

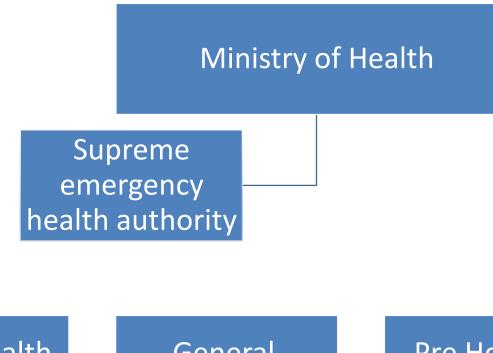


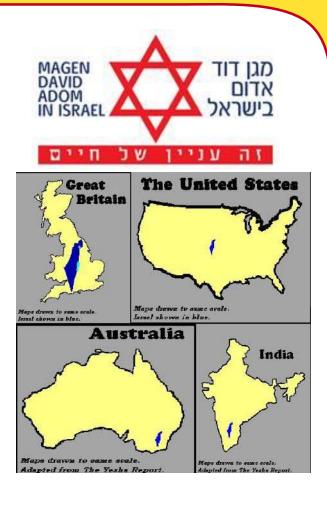


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The Israeli Health care System

- 9.2 million inhabitants
- Mandatory medical insurance





Primary Health
care(HMO)General
HospitalsPre Hospital
care (MDA)Private sector

Legal status

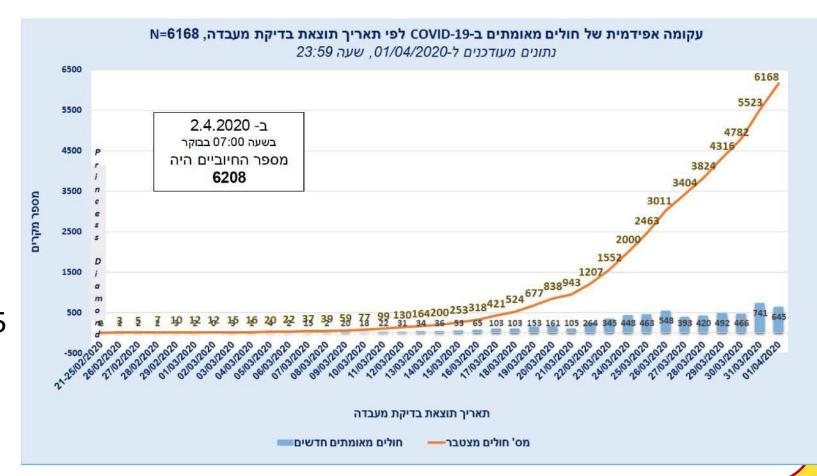
- Public Health Act– contagious diease activated Health Care providers – special status
- 14 days mandatory quarantine –

 Persons who travelled abroad
 Direct contact with a confirmed case (MOH App)
 Use of security high technology
- Public gatherings (more 10 persons) prohibited
- Limitations on work, "stay at home", public transportation, schools closed
- Recommendation to all public to wear face masks in public



Situation (2-4 07:00)

- Information distributed by MoH daily
- Confirmed cases 6211 (645 in last 24h)
 - Minimum signs 5659
 - Moderate cases- 127
 - Severe cases 107 (83)
 - \circ Deaths 29
 - \circ Recovered 289
- Home quarantine
 Total 166592
 At the moment 34065

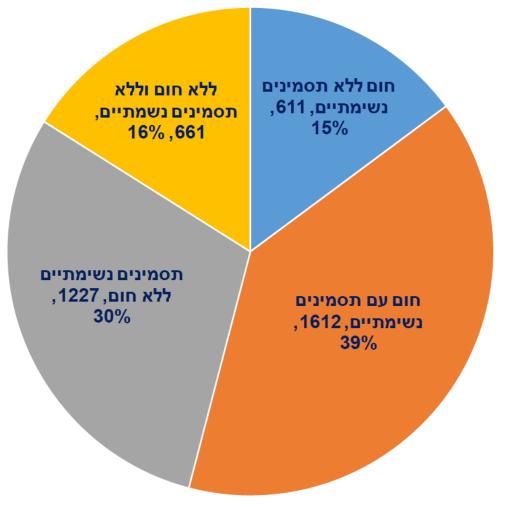


MAGEN DAVID ADOM



Epidemiology





ל-1412 חולים מאומתים מידע זה אינו זמין במערכת הממוחשבת*

Hospitalization Policy-



- Positive, a-symptomatic at home, HMO to follow up 2 times a day, using tele medicine (<u>3672 patients</u>)
- Positive with minimial signs and symptoms "hotels" (operated by Home Front and HMO) (<u>769 patients</u>) 7 active centers, more planned.
- Moderate and severe hospitalized (735 patients)
- All hospitals admit COVID 19 patients
- Contingency plans for increasing hospitals and ICU capacity.
- All positive patients transports conducted by MDA

PPE and Hygine

- National stock management by MoH
- National standard for PPE
- All EMS response with face masks
- Need to shave
- Standards for personal hygine, desinfection of ambulances, equipment
- Waste management



Main activities

- Joint call center (MDA emergency line 101) MDA, Primary Health and Public Health to triage calls of "suspected exposures"
 (25'000 call per day)
- Transportation of positive cases and people under Home - Quarantine
- Taking lab test and home / Drive through facilities
- Increasing the national blood stockpile







Lessons learned

- Personnel in quarantine "whatsapp group"
- Safety measures at work:

 Masks for every response
 Face masks for patient / accompanying partner
 Minimizing number of persons on ambulance
 All calls are triaged for "possible contacts"
- Personal Hygiene and distancing mandatory
- Risk groups are out of street roster
- Long term contingency planning (worst case scenario)
- Daily updates on the situation and guidelines
- Public support







Lessons learned - Italy

- logistics
- Ethical dilemmas
- Psychosocial support to the teams
- 500 patients on Oxigen simultaniousely
- Patients ventilated dor 2 weeks and longer
- Military medical units support
- Death body management / grief



