


1,667 water purification tablets to the beneficiary. This provided aid to 12,705 households. The team also implemented vector control activities with source reduction targeting hot spot and high-risk areas with the removal of mosquito breeding sites, anti-mosquito fogging and larviciding.

**Conclusion:** The FEMAT response assisted in minimizing of potential outbreaks in communities post-disaster during COVID-19 outbreaks.

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### Emergency Medical Team Deployment in Response to Cyclones Judy and Kevin in Vanuatu: Coordination, Challenges, and Outcomes

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**Background/Introduction:** In March 2023, Vanuatu faced severe impacts from twin tropical cyclones Judy and Kevin. This state of emergency necessitated the activation of the National Health Emergency Operations Centre (NHEOC) and the Emergency Medical Team Coordination Cell (EMTCC) to coordinate deployment of both national and international EMT responses.

**Objectives:** The primary objectives were to provide life-saving services, ensure essential medical support, maintain minimum standards of healthcare, and improve coordination among the various health teams and sectors involved in the disaster response.

**Method/Description:** The EMTCC managed the deployment of over five National EMTs and four International EMTs. Reception and Departure Centers (RDCs) were set up at entry ports for team verification and briefing. Daily Minimum Data Set (MDS) reporting facilitated consistent monitoring and planning. The EMTCC coordinated logistics, transport, ration supplies, and implemented a medivac process for patient referrals.

**Results/Outcomes:** Over five National EMTs, including medical officers, midwives, psychosocial support, logistics, and nurses, were deployed, serving at least 1,638 patients. RDCs efficiently processed international teams, and daily MDS reports supported informed decision-making. Collaboration with international partners was effective, and a medivac process ensured timely patient transfers. Despite logistical delays, financial constraints, and human resource shortages, the coordinated efforts led to significant positive outcomes.

**Conclusion:** The EMT deployment in Vanuatu highlighted the importance of well-coordinated emergency responses. Key lessons include the need for standardized tools and procedures, continuous training, improved financial processes, and stronger logistical arrangements. Future recommendations emphasize dedicated budgets, pre-positioned resources, clear

SOPs, and enhanced coordination to improve EMT resilience and efficiency in disaster scenarios.

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### An Emergency Within an Emergency – Ability to Provide HR Health Surge Supports to Flood-Affected Areas Following the Kakhovka Dam Breach

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**Background/Introduction:** In the context of war in Ukraine, a simultaneous emergency struck following the breach of the Kakhovka dam on 6 June 2023 and acutely stressed the health system. Extensive flooding, water shortages, drought and widespread environmental damage in several regions occurred. Over 4,000 people were evacuated from their homes and several hospitals transferred patients elsewhere.

**Objectives:** To explore if the HR health surge needs of the flood affected health facilities in Kherson, Mykolaiv and Zaporizhzhia were met over the 6-month period.

**Method/Description:** The Ukrainian Scientific and Practical Center for Emergency Medical Care and Disaster Medicine (CDMU) of the Ministry of Health (MoH) of Ukraine, centrally managed the recruitment, onboarding and deployment of all HR health staff and surge requests over the 6 months project implementation period. Several meetings were held with the MoH regarding national regulation and a mechanism to deploy healthcare workers was established.

**Results/Outcomes:** A total of 340 healthcare staff (216 doctors and 124 nurses) were identified through the Regional Departments of Health (according to MoH Order. 1597) or through self-referrals. In order of demand, 165 requests (120 doctors, 45 nurses) were submitted by healthcare facilities from (1) Kherson, (2) Mykolaiv and (3) Zaporizhzhia. All requests were met, aside from certain specialisms (i.e. neurosurgeon). The length of time for surge ranged from 3 to 6 months.

**Conclusion:** Despite the lack of regulatory documents and mechanism for engaging and deploying healthcare workers, the surge needs were successfully met for the Kakhovka dam breach emergency, although future efforts are required to attract certain specialisms to deploy.

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### Fiji Emergency Medical Assistance Team - Tuvalu COVID-19 Surge Support

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**Background/Introduction:** Tuvalu was one of the last countries in the world to experience widespread COVID-19

outbreaks. Community cases were recorded in November 2022; this impacted on the health system. The government requested for medical assistance from Fiji.

**Objectives:** To describe the Fiji Emergency Medical Assistance Team's (FEMAT) response in Tuvalu. To describe the Fiji Emergency Medical Assistance Team's (FEMAT) response in Tuvalu.

**Method/Description:** The team consisted of clinicians, nurses, and a Health Inspector. FEMAT together with World Health Organization (WHO) staff provided guidance on various standard operating standards (SOP) and clinical pathways development and training. Clinicians supported case management and referral pathway. They were later deployed as part of a mobile team.

**Results/Outcomes:** FEMAT provided support to the working group on data collection that aided the government's decisions. Clinicians provided training on Infection Prevention Control (IPC) standards for medical staff. Hospital staff were trained on management of moderate to severe cases with advice on the setting up of the high dependency unit. The health inspector contributed to the development of a waste management SOP with its implementation around health facilities. The team with the local medical team and WHO representatives were deployed for a week-long mobile response to smaller islands. The FEMAT team provided medical equipment's and medications to the hospital upon return.

**Conclusion:** FEMAT through trainings and implementations of SOPs assisted the health working group to consolidate the governments' COVID-10 response.

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### A Local EMT Deployment in Fiji

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**Background/Introduction:** In May 2021, Lautoka Hospital a tertiary referral hospital recorded the first Delta variant COVID infection within medical wards. This prompted the national Incident Management Team to close the hospital and convert the entire facility to a COVID 19 isolation hospital. The staff and patients were isolated for a period of 28 days. The Fiji Emergency Medical Assistance Team (FEMAT) was deployed to set up and manage a field hospital.

**Objectives:** To describe the response of FEMAT to continuity of health service delivery in Lautoka.

**Method/Description:** FEMAT set up a 28-bed inpatient field hospital within 72 hours. The facility was furnished with water and electrical power supply systems from the existing FEMAT cache. The service provided included general outpatient

(GOPD), special outpatient (SOPD), inpatient wards (men, women, maternity, and resuscitation), dental, pharmacy, radiology, and minor surgical services. This was managed at a 12-hour shift by a 48-member team of clinicians, administrators, and logisticians.

**Results/Outcomes:** There were 78 admissions, 671 cases triaged, 414 GOPD, 61 SOPD, 16 pediatric, 161 dental, 16 ante-natal clinic, 1 Home retrieval, 4 cases requiring medical evacuation, 165 COVID screenings, 11 transfer of cases, 35 surgical procedures, and 8 deliveries within the field hospital.

**Conclusion:** FEMAT response ensured continued provision of critical health services for the people of Lautoka during the main hospital lockdown.

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### FEMAT Response to Leptospirosis Outbreak in Navosa, Fiji

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**Background/Introduction:** The province of Navosa in Fiji is less developed with water, sanitation, and hygiene (WASH) standards below other provinces in Fiji. In February, 2022 Navosa suffered an outbreak of Leptospirosis cases leading to severe disease, hospitalization, and death. The Fiji Emergency Medical Assistance Team (FEMAT) was activated to respond.

**Objectives:** To describe FEMAT response to the Leptospirosis outbreak in a rural island setting.

**Method/Description:** FEMAT joined the local public health team based out at the Keyasi Hospital with early contact tracing occurred for 26 villagers and 37 of 63 settlements were surveyed for early case detection. It provided additional support to the local clinical team with case management. Health inspectors supported community awareness sessions, and distribution of purification tablets and WASH Kits.

**Results/Outcomes:** The team was able to treat 12 cases in the community with an additional of 20 acute febrile illnesses in the contact tracing. 87 cases of leptospirosis were treated at the hospital. Therefore, the team treated 99 cases of leptospirosis directly preventing more severe presentation to health facilities. Our health inspectors distributed 200 WASH kits in five communities.

**Conclusion:** The FEMAT response assisted in the containment and control of the leptospirosis outbreak in the Navosa province while at the same time provided community outreach, preventative care, and surgical management in a rural island community.

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