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| Victorian Medical Assistance Team (VMAT) Policy |
| State Health Emergency Response Arrangements  Date effective: 01 October 2017 |

# Introduction

The State Health Emergency Response Plan, 4th edition, provides scalable arrangements to manage pre-hospital and hospital responses to emergency incidents. SHERP4 identifies Victorian Medical Assistance Teams (VMAT) as an organisational element that supports this scalable response.

This Victorian Medical Assistance Team (VMAT) Policy supports the effective functioning of the State Health Emergency Response Plan, 4th edition. This policy describes the authorising environment, resilience activity, deployment arrangements, response and demobilisation at incident level for VMAT operations. The policy specifies the health services nominated to maintain VMAT capability.

The Victorian Medical Assistance Team (VMAT) Policy and SHERP4 form part of the State Health Emergency Response Arrangements, the framework through which the Victorian Government and partner agencies work together in order to meet the health needs of Victorians during emergency events.

This document should be read in conjunction with SHERP4 and the Victorian Medical Assistance Team (VMAT) Protocol.

# Definition

A Victorian Medical Assistance Team (VMAT) is a team of experienced doctors and nurses deployed from a nominated health service to provide assessment and treatment of casualties at an incident site.

# Authorising Environment

SHERP4 establishes the Incident Health Commander (through the State Health Commander) and the State Health Coordinator as responsible for authorising and tasking a VMAT.

# Resilience

Nominated health services are required to:

* appoint appropriately credentialed personnel to the VMAT
* ensure VMAT personnel are trained and exercised prior to deployment
* maintain VMAT clinical equipment and personal protective equipment
  + maintain VMAT deployment procedures.

VMAT personnel are required to complete mandatory training and exercise participation. Training includes:

* *Major Incident Medical Management and Support* (MIMMS) course
* Mass casualty triage simulation using Virtual Paramedic On-Line Simulation
  + *Early Management of Severe Burns* (EMSB) course (one team member only).

# Deployment

* The Incident Health Commander (Ambulance Victoria) will determine the requirement for VMAT
* assistance, on advice from the Field Emergency Medical Officer (FEMO) where present.
* The State Health Coordinator will advise the health service of the request for a VMAT.
* Nominated health services will supply a team of up to six medical and nursing personnel. This may include
* specialist capability as requested.
* Ambulance Victoria will coordinate transport of a VMAT and their equipment to the incident.
* The deploying health services are responsible for remuneration and appropriate Worksafe entitlements for
* VMAT personnel.
* VMAT personnel are insured for public liability under the Victorian Managed Insurance Authority (VMIA).

# Response

* The Incident Health Commander tasks the VMAT at an incident. The VMAT reports to the FEMO.
* Ambulance Victoria is responsible for providing the VMAT with logistical and communications support at
* the incident scene.
* VMAT personnel will maintain situational awareness and follow all safety directions.
* VMAT personnel will adhere to relevant clinical practice guidelines.
* VMAT clinical responsibilities may include:
  + - Casualty triage
    - Individual patient care
    - Extended duration care at an incident
    - Referral of casualties to alternative care options
    - Discharge of casualties from the scene
    - Support of a Field Primary Care Clinic or other health facility.
  + VMAT personnel are responsible for maintaining appropriate clinical documentation and team logs.

# Demobilisation

* The Incident Health Commander is responsible for ensuring VMAT personnel are formally stood down and
* offered the opportunity for peer support and a ‘hot debrief’.
* Ambulance Victoria will coordinate transport of a VMAT and their equipment from the incident.

# Nominated Health Services

* Alfred Health
* Austin Health - Austin Hospital
* Ballarat Health Services – Ballarat Base Hospital
* Barwon Health - University Hospital Geelong
* Bendigo Health – Bendigo Hospital
* Eastern Health - Box Hill Hospital
* Eastern Health - Maroondah Hospital
* Melbourne Health - Royal Melbourne Hospital
* Monash Health - Dandenong Hospital
* Monash Health - Monash Medical Centre
* Northern Health
* Peninsula Health - Frankston Hospital
* Royal Children’s Hospital
* St Vincent’s Hospital
* Western Health - Footscray Hospital
  + Western Health - Sunshine Hospital

In addition to the nominated health services, additional caches of VMAT equipment have been deployed to other selected Victorian health services. All health services with VMAT equipment are obliged to maintain the equipment.

# Funding

The Department of Health and Human Services has funded initial equipping of VMATs, and provides access to training at no cost to participating health services. Health services are required to release VMAT personnel for training, exercising and deployment and meet the usual costs for participating personnel. The cost of maintaining equipment is the responsibility of the health service. Further detail concerning VMATs is contained in the Victorian Medical Assistance Team Protocol.

# Review Period

A review of the VMAT Policy will be incorporated into the development of State Health Emergency Response Arrangements Additional Capability and Capacity Operational Response Plan, commencing late 2017.

# Related documents

* State Health Emergency Response Plan, Edition 4
* Victorian Medical Assistance Teams (VMAT) Protocol
* Mass Casualty and Pre-hospital Operational Response Plan

# Revision History

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| Version | Date | Revisions | Status |
| 0.1 | 22/08/2017 | Initial Draft | Not approved |
| 1.0 | 15/09/2017 | Minor edits to align with SHERP4, updated review period | Approved |