

Emergency Medical Team (EMT) – a national surge capacity for disaster medical interventions

The National Board of Health and Welfare has been commissioned by the government to develop a national surge capacity for disaster medical interventions. The resource is to be classified according to WHO EMT standards. The assignment, referred to by the National Board of Health and Welfare as the “EMT resource,” aims at delivering an EMT type 2 according to WHO classification under the EMT Global Initiative.

Once developed, the resource will be able to support the Swedish regions in delivering healthcare in the event of a crisis situation, such as a pandemic, disaster or mass casualty event in which local healthcare resources are insufficient to meet arising needs. The resource could also be sent internationally via the EU, the UN and NATO to strengthen the civilian healthcare capacity of a third country.

What is an Emergency Medical Team?

The Emergency Medical Team (EMT) is a World Health Organization (WHO) classified self-sufficient resource consisting of medical personnel (doctors, nurses, surgeons, etc.), technicians, equipment, medicines and pre-arranged supply systems to be deployed rapidly in a specific contingency when existing health resources are at risk of being overwhelmed. The complementary EMT resource should not burden existing healthcare facilities or rely on existing infrastructure in the affected area.

Existing operational resource

In 2019, the National Board of Health and Welfare started a project to develop a national reinforcement capacity (abbreviated NFR in Swedish) on a project basis and has since then trained and exercised a team of regionally based healthcare staff which can be coordinated nationally in a rapid deployment to support various health care contingencies throughout the country. This existing resource forms the basis for the new EMT-resource by further developing its staff and equipment while also establishing guidelines and policy documents according to EMT 2 standards. In this way, the National Board of Health and Welfare builds on existing skills and experience while adding value through expansion of services and potential tasks.

When will Sweden have a fully developed EMT?

The National Board of Health and Welfare will present a first progress report to the Swedish Government in June 2027 but without the requirement that the surge resource must be fully developed or EMT 2-classified by this time. This is because the assignment consists of two different processes - a WHO classification process as well as a government investigation process involving other authorities including MSB and FMV. Two additional interim reports will follow in the coming years. These may include further proposals and refinements of the assignment which affect its scope and conditions.

What does an EMT type 2 mean?

The functions that are formal requirements for an EMT type 2 are described in the WHO EMT 'Blue Book'. Overall, an EMT 2 should be a self-sufficient rapidly deployed healthcare resource, able to operate 72 hours after activation. The facility should run 24/7 for a minimum of two weeks and receive at least 100 patients per day. Services include inpatient wards, general and obstetric surgery, receiving referral patients, providing initial trauma and emergency care, primary care, lab and x-ray, along with others.