

MEETING ABSTRACTS**Evaluating the Effectiveness of a Small Nomadic Medical Assistance Team to Support Remote Indigenous Communities in Canada during COVID-19 Outbreaks**

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Background/Introduction: In Canada, access to health care is considered a universal right, however, many Indigenous communities exist in austere settings and the major health care provided is through a nursing station. As a result, they are vulnerable to developing acute staff shortages during COVID-19 outbreaks.

Objectives: Trial the effectiveness of a Nomadic Medical Assistance Team (NoMAT) to mitigate sudden staff shortages caused by a COVID-19 outbreak in a remote Indigenous community served only by a nursing station.

Method/Description: Indigenous Services Canada funded a pilot and NoMAT was deployed from March 13 through

April 2, 2022 to a small Indigenous community in remote Northern Ontario, Canada.

The team consisted of up to seven personnel: MD, Nurse, Nurse Practitioner, Physician Assistant, Paramedic, Data Support, and Logistics. Individuals served from one-to-two weeks of a three-week deployment. If there was a shortage, the MD could be virtual. Local health resources were used and the team resided at the local school.

Results/Outcomes: The NoMAT rapidly: (1) worked with the local team to co-develop outbreak management; (2) identified high-risk patients for treatment; (3) supported non-COVID-19 patient care; and (4) reduced a backlog of care.

Conclusion: The NoMAT strategy is highly effective and efficient in mitigating the impact of both COVID-19 surges and reducing backlogs of care. The next step is developing a proposal for full-time teams.

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