

**National Capital Region
Urban Area Security Initiative
2010 UASI Funding Period**

Mass Causality Patient Tracking

Problem Statement

After action reports for recent incident and exercises have highlighted the need to accurately track the locations of patient transported from the scene of an incident into the hospitals. To date, there has not been one software solution that was adequate to meet the needs of all the disciplines involved in patient care or all the Jurisdictions within the National Capital Region.

Actions to date

A FFY2005 NCR UASI Project proposed to complete a pilot project to fill that need. The software purchased under that project did not meet the needs of the system and required annual subscription fees that were unacceptable. Some hardware was purchased for that program and is now being stored. Since that time the Maryland Institute for Emergency Medical Services System contracted with a vendor to develop a solution for a Baltimore UASI Project. The end-users of the product were directly involved in that development to ensure their needs were met. Representatives from EMS in the NCR were invited to view the product and provide their input.

Since that time Maryland has purchased the hosting software and will be rolling out the solution state-wide. Fairfax and Arlington piloted the product for the Army Ten-Miler and the Marine Corp Marathons. Based on that experience those jurisdictions plan to implement the solution throughout the NOVA. Their solution also interfaces directly with the Northern Virginia Hospital Alliance systems and the electronic patient care report (e-PCR) in Arlington.

Most of the hardware purchased through the FFY 2005 grant will be able to host the newly developed software.

Proposed Activities

The following objectives are proposed for the future. Not all can be accomplished in the first funding period, but the basic processes of collecting patient identification and location and sharing that region wide can be completed.

2010 Grant Period

1. Each "State" purchases the central patient tracking software solution that is appropriate for their needs. This should include connectivity to the hospitals' systems. This solution is already in place for Maryland and Northern Virginia.
2. Configure and distribute older hardware with new software
3. Purchase adequate hardware to outfit each EMS Supervisor/ALS Chase vehicle, Medical Ambulance Buses, and Mass Casualty Support Units with "Patient Tracking Support Kits" to include.
 - a. 4 Handheld Mobile Computers
 - b. 1 Rugged Laptop Computer
 - c. 1 Mobile Wireless Access Point (1/4 mile radius coverage)
 - d. Waterproof Charging case
4. Configure a NCR interface between all three solutions
5. Begin to investigate better less expensive "last mile" connection, but provide cellular data service for the first grant period

Future Grant Periods

1. Program interfaces with all E-PCRs in the region
2. Configure handhelds to meet daily use requirements
3. Distribute hardware to all transport and patient care apparatus
4. Investigate further use within Health Departments and Mass Care Shelters

Management and Administration

Purchase of the hardware and local hosting software would be accomplished through the 4 MMRSs to ensure that the local needs are met. A Central Administrator will need to be assigned to manage the interface issues between the three systems.

Draft Budget

Following is a draft budget that has not yet been completely vetted with the managers. There could be variation base on verification of the number of units and actual cost. Figures are based on recent quotes from one vendor. The budget is scaleable based on the number of kits purchased.

	EMS Supervisors	Chase	MABs	MCSUs	Total PTS Kits	Extended Cost	Local Software Interface	Cellular Data Service	Interface	5 % M&A	Total Cost
DC MMRS	9		3	2	14	371,000	1,900,000	67,200		116,910	\$ 2,455,110
Montgomery. MMRS	5		2	3	10	265,000		48,000		15,650	\$ 328,650
Prince Georges MMRS	6		1	4	11	291,500		52,800		17,215	\$ 361,515
NoVa MMRS	16	23	7	7	53	1,404,500	400,000	254,400		102,945	\$ 2,161,845
Central Project Administrator					0	0	400,000	0	600,000	50,000	\$ 1,050,000
TOTAL	36	23	13	16	88	2,332,000	2,700,000	422,400	600,000	302,720	\$ 6,357,120

Patient Tracking Support Kit Cost				
Hand Held Computer		3500	4	14000
Rugged Laptop		5000	1	5000
Mobile Access Point		7000	1	7000
Waterproof Charging Cases		500	1	500
Total Each				26500