



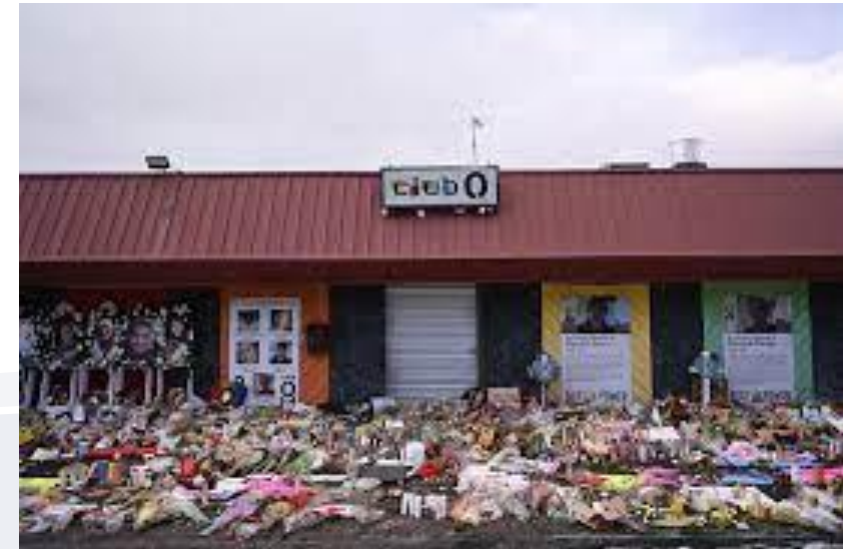
Colorado Patient Tracking Task Force



C O L O R A D O

Why Now?

- *Boulder Fire – 2021*
 - *Hospital evacuation initiated in ED through Radio Comms*
- *Club Q Active Shooter – 2022*
 - *No hospital alert/ No patient tracking for patients transported via EMS, PD, and/or POV*



History of How Task Force Started

- Medical Direction and RETACs recognized the need for a functional MCI and patient tracking system.
- The RETAC Forum in La Junta included CDPHE – Office of Emergency Preparedness and Response
 - Discussed vital need for patient tracking and MCI process/system implementation
- Concurrent to RETAC discussions – key local and regional stakeholders across Colorado identified gap in patient tracking and began discussions into development of Colorado Patient Tracking Task Force
 - CDPHE-OEPR Medical Operations Branch was engaged for their input and inclusion in the task force





Statewide Task Force Composition

- American Medical Response
- Arvada Fire
- Central Mountains RETAC
- Colorado Springs Fire Department
- El Paso County Public Health
- Foothills RETAC
- Mile High RETAC
- Montrose Memorial Hospital
- Mountain Plains Regional Disaster Health Response System
- Mountain View Fire Rescue
- North Central Region Healthcare Coalition
- Northeast Region Colorado RETAC
- Northwest Region Colorado RETAC
- Plains to Peaks RETAC
- Rio Grande County Public Health
- San Luis Vally Healthcare Coalition
- South Central Region Healthcare Coalition
- South Central Region Colorado RETAC
- Southern RETAC
- South East Region Colorado RETAC
- South West Region Colorado RETAC
- UCHealth Memorial Hospital
- UCHealth Hospital South Region
- West Region Healthcare Coalition
- Western Region Colorado RETAC



****Colorado Department of Public Health and Environment – Office of Emergency Preparedness and Response was engaged during this process but not part of the recommendation process*



Recommendation

The Task Force, unanimously, recommended that the State of Colorado select Pulsara as the statewide patient tracking and MCI response system vendor.

The Pulsara system solidly meets or exceeds all of the requirements prioritized by the Task Force as evidenced in the results of the vendor assessment process, which included both qualitative and quantitative analysis.

Further, the Task Force highly recommends that the agreement includes:

- Pulsara **MED OPS** – Annual Subscription
- Pulsara **UNITED** for EMS – Annual Subscription
- Pulsara **ONE** for Hospitals - Free



Pulsara Packages

PACKAGES



EMS		HOSPITAL OR HEALTHCARE FACILITY		MED OPS
Pulsara ONE	Pulsara UNITED	Pulsara ONE	Pulsara UNITED	Pulsara MED OPS
Free	Annual Subscription	Free	Annual Subscription	Annual Subscription
<ul style="list-style-type: none"> • Replace Traditional Radio Report • Includes ECG and Live Video 	Includes Everything in Pulsara ONE plus: <ul style="list-style-type: none"> • MIH / CP • Medical Control • Supervisors • ET3 • ePCR Integration 	<ul style="list-style-type: none"> • Receive EMS Patients (Replace Traditional Radio Report) • Telehealth Consult and/or Transfer to Facilities who use Pulsara UNITED • Includes ECG and Live Video 	Includes Everything in Pulsara ONE plus: <ul style="list-style-type: none"> • Receive Patients from EMS and Referring Facilities • Feedback to All Team Members • Enable Internal Workflows • Build Teams on the Fly • Data for Reporting and Quality Assurance 	<ul style="list-style-type: none"> • EOC for Medical Operations (MOCC) • MPI / MCI • Disaster • Pandemic • State/Region Based Trauma or Time Sensitive Emergency Systems • Centralized Medical Control
STATE/REGIONAL BUNDLES AVAILABLE				

join us on:    

 GET WITH THE GUIDELINES
COMPATIBLE VENDOR

IT'S ABOUT PEOPLE
pulsara.com





Pulsara Capabilities

- Patient Tracking
- Internal alerting for Critical Access Hospitals and rural acute care facilities
- MCI/incident alerting (external notification) to hospitals, key stakeholders, through MED OPS/incident and Event Management tools
- Tele-Behavioral and Tele-Health
- Interoperability/interconnectivity between healthcare information systems





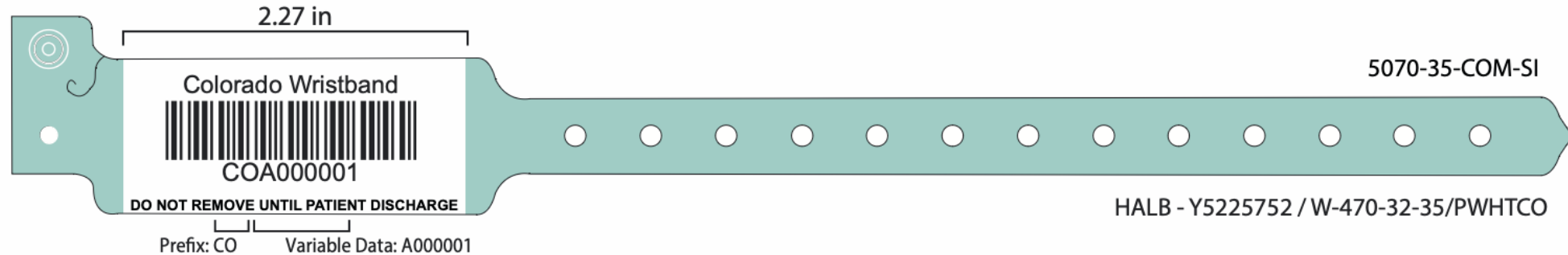
Future Functions Requested

- Fillable forms
- Direct download of PDF from application or computer with general user access
- Hospital diversion dashboard made available to multiple hospitals and partners



Wristbands

- 1 Million per year
- Supported by data on EMS transports + patient not transported + training needs



Bar code language: Code 128
Bar code not readable, just for sample purposes





Additional Task Force Initiatives

- Connectivity
- Governance Document and User Agreement
- Decedent management



Where We Go From Here

Securing Funding for Pilot

- CDPHE- OEPR and HCCs in discussion regarding how/what funding is available to put toward a Pilot for 2023-2024 grant year

ID Sustainable Funding for Future

- Other funding streams
- Cost-sharing



Questions

Michelle Deland

Executive Director

North Central Region
Healthcare Coalition

303.588.8488

Mdeland@ncrhcc.org

Kara Prisock

Readiness and Response
Coordinator

South Central Region
Healthcare Coalition

719.332.2570

Kara.Prisock@coloradosprings.gov

