# ICUBAM: ICU Bed Availability Monitor Solution for COVID-19

Inria, Google Research, École polytechnique, CHRU de Nancy, IRMAR, CNRS, Université Paris-Saclay, École des Hautes Études en Sciences Sociales

https://icubam.github.io/

#### **Genesis of ICUBAM**

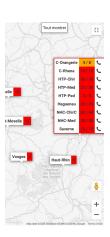
- Mid March 2020, ICU Saturation in Grand Est region
- Urgent need for findHugues ICU beds in a detriorating situation
- Bed availability constantly changing and not up to date
- 18 March, Antoine Kimmoun (intensivist) centralized the information over multiple ICUs by WhatsApp + Spreadsheets
- 22 March, automate information gathering and dissemination by developping ICUBAM (in 48 h)
  - $\Rightarrow$  Real-time information & vizualization on ICU beds availability
- 25 March, ARS Grand Est uses ICUBAM & ROR (work with Pulsy)

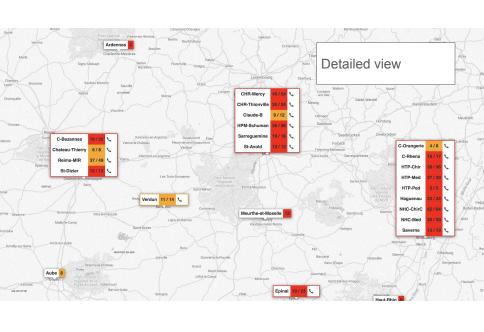
### ~15 seconds to insert information

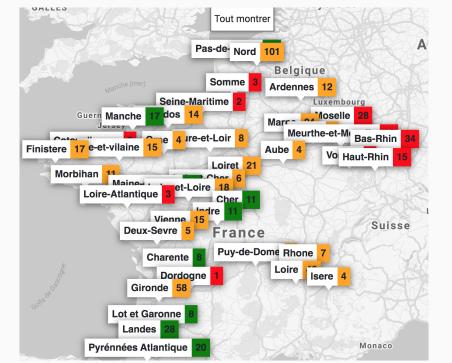










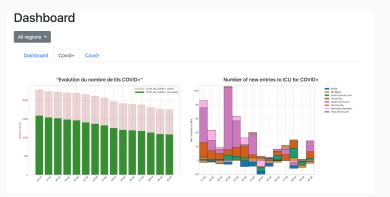


### Operational tool for rescuscitators in times of crisis

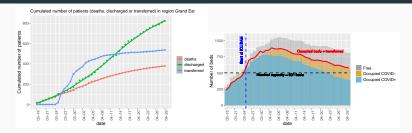
- Within 2 weeks, ICUBAM covers 1/3 of ICU beds: 130 ICU wards, 40 départements, > 2,000 ICU beds
- Tool has been recognized to have the most recent data on bed availability. Most data <1h</li>
- <u>Flexible</u>: add new features (réa hors murs/private sector, etc.); large
  or inconsistent entries trigger warnings; If the last input was more
  than a day ago, a warning is displayed to make it clear that the
  reported number might not be up to date
- Open-source, and pushing for one-click deployment
- Backend integration with health ministry datastores to provide information upstream or synchronize with other sources of truth.

#### Dashboard





## Real time monotoring



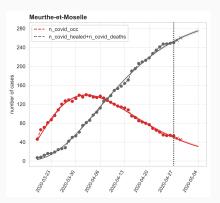
Following patients admission and outcomes (death, discharge, transfer):

- ullet Evolution in admissions o system response to confinement measures
- Evolution in patients outcome → evolution in admission criteria/care (point where discharge rate increases while death rate decreases)
- Mortality rate of ICU stays

Evolution of supply and demand of CCBs:

- 501 to 1056 beds in 12 days, 600 patients had to be transferred out
- Low rate of discharges, second wave of admissions difficult to absorb
- Different départements evolved differently

# **Predicting CCB availability**



- Mid-long term prediction with epidemilogic models (see M. Lavielle)
- Short-term (per day) prediction of the number of released CCBs (either due to death or discharge) using number of ICU admissions in the preceding days as explanatory features

### Success and impact of Icubam

- Data quality is a key challenge: flexibility of the data collection, collect data directly from the intensivists
- Inter-disciplinary team of intensivists, engineers, researchers, statisticians, physicists and computer scientists
- Entire pipeline: data collection, analysis, communication of results in real-time to meet operational needs in an emergency context
- Used by physicians, health agencies, first responders etc.
- Better planning of resource needs and triage of critical care patients can have a substantial impact on patient care
- $\Rightarrow$  ICUBAM assists decision-making process by providing a framework to collect and analyze detailed and reliable data

**Model patient flows**, **anticipate bed needs**, epidemic's evolution, welcome patients from submerged areas

#### Follow-up

- 1st wave stop ICUBAM in June 2020
- 2nd wave restarted in October 2020: request from Brittany, then BFC then stop in July 2021
- 3rd wave: request from Martinique in September 2021

In response to the emergency, a group of contributors came together to build a free and open-source bed availability management system.

More info: https://icubam.net





icus **129** 



users 270

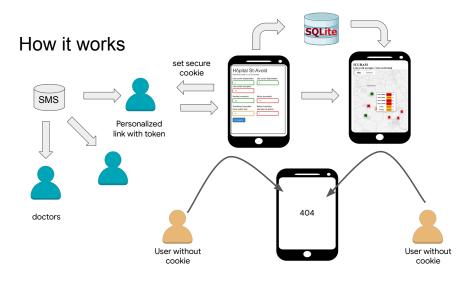


Occupied 1595



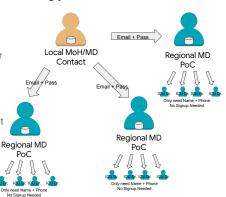
Free

\* French Institute for Research in Computer Science and Automation



# **Efficient Deployment Strategy**

- Only needs single 'Super-Admin'.
- Decentralized signup.
- Regional PoC are autonomous in their region.
- Fully-fledged back-office.
- Built-in reporting.
- REST backend to extract data.
- Token-based access for MoH and first responders.



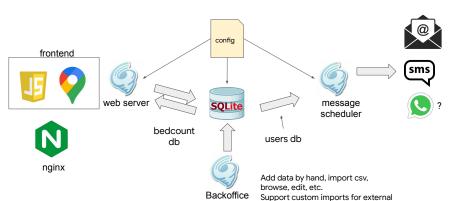








data providers



Google