Dallas Ebola October 2014 | Oct 12th - Oct 19th (8 days)

Goals and Objectives

Response Time	EGRT plans for a response time based on the travel time and want to try and get that below 45 minutes for any situation. In this case, the coordinator was given a time to respond which was several hours after the call.
Facilities	One tenet of Texas EGRT is that we bring our own equipment and can set up in just about any situation. The Garland DDC also provided us wi-fi access and had a projector that we could use for showing the maps to everyone. Two laptop computers were placed at the EGRT desk in the DDC and remained throughout the event. EGRT has a medium format printer available, but it was not deployed.
EGRT Personnel	We started with the EGRT members that had completed our training and scheduled them up to 3 days in advance. We encountered no issues with scheduling the first 8 days, but were running thin on volunteers after that time. To meet the projected schedule for the 9th - 11th days we contacted the City of Fort Worth Mapping Team, who has trained and responded with the Tarrant County EOC many times. They were able to help us fill the schedule for those three days. However, we demobilized the unit before their scheduled times came up. This did give us an opportunity to work on an interagency cooperative with their response team.
DDC Personnel	The TDEM personnel at the DDC were very helpful and receptive of our participation. To the other agencies, however, we were something new and not all of them understood the capabilities that we offer. During the deployment our members worked as "GIS Liaisons" to help interject GIS into some of the projects being taken on.

Analysis of Outcomes

Maps produced	This incident included three primary locations; Texas Health Presbyterian Hospital of Dallas, the residence of Contact Patient 1, and the residence of Contact Patient 2. Maps were produced of these individual locations as well as an overall map showing all the locations. EGRT members also produced a map showing the count of monitored patients in all of the surrounding cities. This was provided to EM coordinators around the region to alert then of a possible Ebola Patient transport if any monitored patients tested positive.

	Information provided	During the entirety of the event, EGRT has their maps displayed on one of the 10 projection screens in the DDC. These provided a lot of visual analysis opportunities for all of the agencies in the room. Examples include the proximity of the three sites, routing hazmat materials from the sites, transporting Contact Patient 1's dog and transporting the patients to Dallas Love Field for transportation to another facility.
Analysis of Performance		
	EGRT Responders	We responded 15 different members over the 8 day response, moving them in and out in 6 hour shifts. There were no issues.
	Work produced	EGRT members did exceedingly well on producing maps and supplying information in a timely manner. With the concentration of the response in a single room, it was easy to keep up with the flow of events and provide or suggest maps for various operations. This event had a minimum number of sites which did not change in location or magnitude, so the mapping needs were relatively low.
Areas for Improvement		
	Equipment	For this response a projector was available, but for other responses a portable projector would be good to have. The laptops with the EGRT data installed proved to be more than adequate.
	Personnel	We are continuing to train more EGRT members for future in order to avoid overusing the current members. Since this incident we have added 8 more members and have a class scheduled in December that will add 18 more, bringing our total number of member to over 100. The training has also been updated to include more hands-on examples of using the EGRT templates and data. Some of the members had a hard time jumping right into the mapping work because they had not gotten a lot of exposure to the use of the templates and datasets. A class has been conducted since this incident that included several additional "hands-on" tabletop exercises and the participants responded that they felt better prepared to respond.

Scheduling	As we progressed through the incident, we were using some members for a second shift. It proved valuable to pair a member who had been in the DDC previously with a member that had not so they could be introduced to that environment. The 15 who responded would now be candidates to be the first to respond to any event having seen the EGRT mapping system in action and worked with a variety of agencies.