



### 1 Introduction

- We consider an artificial intelligence approach to the problem of properly allocating the limited resource to victims in emergency care scenarios
- An emergency or mass casualty incident (such as a highway traffic accident) occurred
- Ambulances are allocated at site of the incident to drive victims to the hospital
- Hospital allocation occurs once the patient arrives at the hospital
- Our work addresses both determining the best allocation and supporting decision making (for medical staff to explore possible options)
- We clarify how sensing can assist in updating the central system with up to date information
- We identify this problem as a multiagent systems resource allocation
- Our solution uses local search with social welfare functions in order to find the best allocations

#### 2 Background

- Main approach: resource allocation using local search sensitive to social welfare function
- Multiagent resource allocation: Intelligent agents representing patients
- Each has a severity for their injury, a resource that they need, and a waiting time
- Severity 1 represents a patient in critical condition and Severity 4 represents patient in a good condition
- Resources representing ambulances, hospitals, medical staff and equipment
- Ambulances have a current location and a driver of a certain skill
- Hospitals have a capacity (can be over capacity), distance from the incident, and the amount of resource available
- Hospital resources include medical staff and equipment of a certain skill
- When a patient is allocated a resource then it will be unavailable until the procedure is complete or it is allocated to another patient

# Real Time Decisions for Resource Allocation in a Time Critical Dynamic **Environment Based on Social Welfare and Local Search**

### Name: Dean Shaft

### 3 Local Search

- There are many ways to allocate resources to patients
- Cost function allows comparisons of allocations
- Finding the best allocation has the lowest cost
- Starting with a possible initial allocation of resources to patients, local changes are made until it is no longer possible to improve on the allocations made
- Random restarts are used to improve the final allocations selected

# 4 Social Welfare

- These functions provide a global view of the scenario
- An allocation will produce a different value based on the social welfare function [1]

Utilitarian Social Welfare	$sw_u(P) = \sum_{i \in A} u_i(A)$
Egalitarian Social Welfare	$sw_e(P) = \min \{u_i(P)\}$
Nash Product	$sw_n(P) = \prod_{i \in A} u_i($

# 5 Overview

- The Ambulance scenario allocates to a victim an ambulance and a hospital
- The Hospital scenario allocates medical staff and equipment to a patient
- Both scenarios have an Allocation mode and a Decision Support mode
- Allocation mode indicates the allocation that should be made at that situation
- Decision Support mode allows a comparison of algorithms
- Policy
- Principles of allocation (e.g. Lottery, FCFS, Youngest First, Sickest First, etc.) [2]
- Social welfare function

Supervisor: Robin Cohen



- 9 Conclusion
- lower cost than any of principles of allocation for both scenarios
- the patients and resources
- resources will continue to be allocated properly to the patients

#### 10 References

- "Issues in multiagent resource allocation." In Informatica 30, 2005.
- interventions" In The Lancet 373.9661 (2009): 423-431, 2009.



**Output:** an allocation of resources to patients (optimal given the policy) Initialize Solution as the current allocation with available resources allocated

• Ambulance scenario: 30 victims, 20 ambulances, and 3 hospitals



 These results are positive as the cost of using any of the policies had a • Emergency care scenarios are dynamic and it is important to keep track of

• Sensing provides the scenario with current information and ensures

• [1] Y. Chevaleyre, P. E. Dunne, U. Endriss, J. Lang, N. Maudet, J. A. Rodriguez-Aguilar • [2] G. Persad, A. Wertheimer, E. J. Emanuel. "Principles for allocation of scarce medical