SECRETARIAT

IMPLEMENTATION OF UN ELECTRONIC MEDICAL RECORDS SYSTEM (EARTHMED) IN ALL UN FIELD MISSION HOSPITALS

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1. ISSUE PAPER THEME: Medical

2. SUMMARY / BACKGROUND / PREVIOUS HISTORY

There is currently no standardized electronic medical records requirement for T/PCC healthcare facilities deployed across UN missions. Due to the more robust and challenging mandates in UN missions and increased pressures on medical support systems, there is a growing need for T/PCC medical facilities to have a standardized electronic medical records system. The UN currently uses the Cority System 'EarthMed' to facilitate clinical governance and streamline and support continuity of care for peacekeepers across UNOE facilities. The system has also been implemented at some COE facilities, successfully supporting cross-facility care in the event of referrals and/or medevacs between the facilities. This interoperability improves workload data collection, assists in assessing the adequacy of medical resources; provides real-time information and alerts on the health status of peacekeepers, and enables telemedicine interfacility consultations, all while aligning medical confidentiality and data privacy practices in T/PCC healthcare facilities with Secretariat standards.

As the UN's standard electronic medical records and occupational health and safety management system, EarthMed is currently used by all UNOE hospitals and clinics worldwide as well as 8 of Level 1+ and above T/PCC hospitals in MINURSO, MINUSCA, MONUSCO, UNISFA, UNMISS and UNSMIL. Following this positive experience, the Secretariat proposes to standardize the use of EarthMed in the 2026 COE Manual as the mandatory electronic medical records system for all T/PCCs hospitals in UN field missions.

Due to information technology restrictions on external devices connecting to the UN system, all hardware, software, maintenance and user training related to implementation of the EarthMed system for T/PCC medical facilities should be fully provided by the UN for the duration of the unit deployment. The system is to be fully implemented within all T/PCC medical facilities to include all hospital processes (registration, triage, specialist consultations, laboratory testing, x-ray/ultrasounds, pharmacy, ward, Intensive Care Unit, and surgery). If endorsed by the 2026 COE WG, it is proposed that the new requirement applies to all new deployments of all Level 1, Level 1 +, Level 2, Level 3 and LMSM medical facilities from 01 July 2026 onwards and is phased in for all facilities already deployed by 30 June 2027.

The proposal has not previously been considered by the Contingent-Owned Equipment Working Group.

3. DETAILED PROPOSAL

In order to implement this proposal, a new paragraph is proposed to be added to Chapter 3, Annex C of the COE Manual 2026. Details are found below under Section 5, "Proposed 2026 COE Manual Text".

Implementation of the EarthMed system across all Level 1, Level 1 Plus, Level 2, Level 3 and LMSM medical facilities is intended to:

- Ensure compliance with the UN Healthcare Quality and Patient Safety standards (HQPS).
- Streamline auditing compliance with established clinical pathways.
- Support continuity of care for peacekeepers within and across facilities.
- Allow for workload data collection to assist in assessing the adequacy of medical resources.
- Provide CMOs with real-time information and alerts on the health status of peacekeepers.
- Provide T/PCC hospitals with a system that supports remote interfacility consultations.
- Align confidentiality and data privacy practices in T/PCC hospitals with the Secretariat guidelines.

4. FINANCIAL IMPLICATIONS

It is proposed that all hardware, software, maintenance and user training related to implementation of the EarthMed system for T/PCC medical facilities be fully provided by the UN.

The additional expense for hardware and software (including training and maintenance) is estimated at **$857,000 per annum** if implemented at all T/PCC Level 1, Level 1+, Level 2, and Level 3 facilities deployed in peacekeeping [data as of May 2025]. A breakdown of this cost estimate is provided at Appendix A for reference.

5. PROPOSED 2026 COE MANUAL TEXT

New paragraph following para 21 on Vaccinations in Chapter 3, annex C (p.87), add text in bold.

Records management

22. All T/PCC medical facilities will utilise EarthMed for electronic medical records and occupational health and safety management. Access to the system will be fully provided by the UN, including all required hardware, software, technical support, maintenance and user training.

Appendix A (not proposed for inclusion in COE manual)

COST ESTIMATES – PROVISION OF EARTHMED TO T/PCC MEDICAL FACILITIES

Cost estimate based on deployments in the 2024 calendar year:

Facility	Qty of T/PCC facilities in PKOs	Annual cost for hardware (per facility)*	Qty of laptop/ desktops per facility (approx.**)	Annual cost for software, (including support, maintenance, and operation) (per facility)	Annual cost, hardware and software combined (per facility)	Annual impact (USD) for all facilities
Level 1 Hospitals	x150	620	x2	2,880	3500	525,000
Level 1 + Hospitals	x6	1,860	x6	8,640	10500	63,000
Level 2 Hospital	x10	4,340	x14	20,160	24,500	245,000
Level 3 Hospital	x1	4,340	x14	20,160	24,500	24,500
Light Mobile Surgical Module (LMSM)	x1	620	x2	2880	3500	3500
Total:						**861,000**

** Based on GFMV of $1550 (USD) and useful life of 5yrs per laptop*
*** Approximate/average only, actual requirement per facility to be determined case-by-case based on configuration, location etc.*

Cost per facility type:
Level 1: Approximately **$3500 per year** (2 software and maintenance fees + 2 computers)
Level 1+ Average **$10,500 per year** (a Level 1+ can range from 4 software and maintenance fees + 4 computers to 8 software and maintenance fees +8 computers and therefore the estimate used is for 6 software and maintenance fees + 6 computers)
Level 2: Approximately **$24,500 per year** (14 software and maintenance fees + 14 computers)
Level 3: Approximately **$24,500 per year** (14 software and maintenance fees + 14 computers)