



Clinical Information System Downtime (Cerner PowerChart, FirstNet, SurgiNet)

Preparing for a Planned Downtime

A. 60 Minutes prior

1. No additional electronic orders are entered.
2. For any new lab orders, begin sending 6 demographic labels per patient to the lab with each group of specimens submitted. Additional labels may be printed from Forms on Demand. Patient labels for new admissions are available in Bed Management (West Lobby).

B. 30 Minutes prior

1. Log on to the 724 Downtime application with your Millennium credentials
 - Print Patient list for unit(s).
 - Print current MAR for each patient
 - Print Downtime flowsheets from Downtime webpage or Forms on Demand. Vital Sign integration will not be available if the network is down.
 - If you have issues with the 724 Downtime application, contact the helpdesk at 1-7500.

C. 15 Minutes Prior

1. All personnel should complete work in the electronic health record and exit the EHR.
2. Information Technology Services will post updates on the PAWS intranet home page.

Unplanned Downtime

1. Log on to the 724 Downtime application with your Millennium credentials
 - Print Patient list for unit(s).
 - Print current MAR for each patient
 - Print Downtime flowsheets from Downtime webpage or Forms on Demand. Vital Sign integration will not be available if the network is down.
 - If you have issues with the 724 Downtime application, contact the helpdesk at 1-7500.

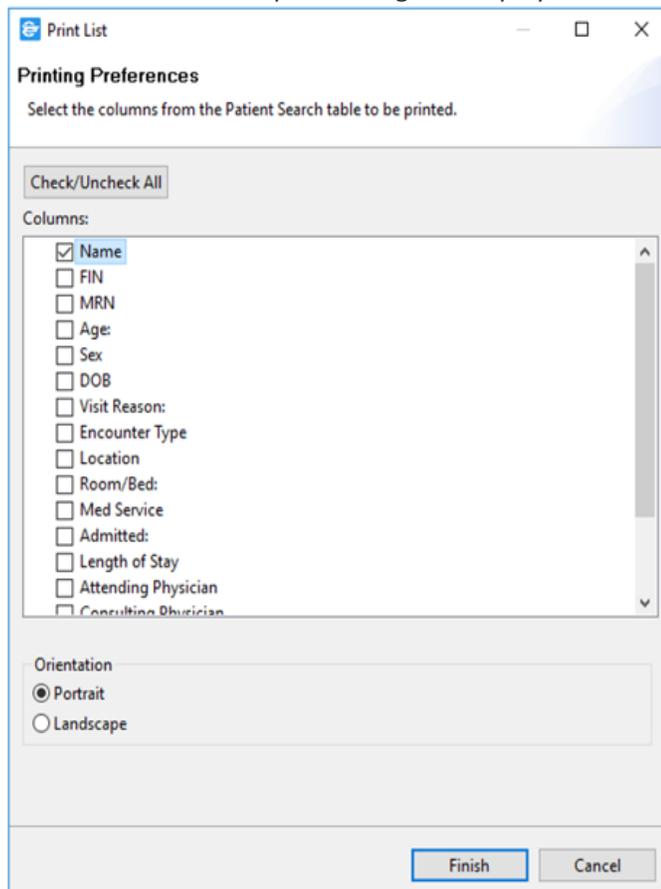
2. If a Network outage occurs utilize the “Break the Glass” process.
 - Each unit will have a sealed and dated envelope addressed as “Break the Glass” and contain a generic username and password unique to each unit.
 - This envelope will be maintained in the Downtime Notebook which must be located away from the Downtime computer.
 - At the change of every shift, the Charge Nurses must validate that the envelope is present and securely sealed and include in report to oncoming charge nurse.
 - Once the “Break the Glass” envelope is opened or missing the password/envelop must be replaced by IT (contact helpdesk at 1-7500).
 3. The steps for the “Break the Glass” process are outlined below:
 - Remove the “Break the Glass” envelope from the Downtime Notebook.
 - Open the envelope to obtain the username and password. These credentials are to be used by each individual that needs access to the 724 Downtime application.
 - Logon to the 724 Downtime computer. Enter Millennium username and password.
 - The “Break the Glass” logon screen will display.
 - Enter the “Break the Glass” (Emergency 724 access) username and password.
 - Complete the fields with full Millennium name and audit reason (downtime).
 - Do not discard the generic username and password until Downtime has ended.
 - Once the generic username and password has been utilized, a new envelope with generic credentials will be generated by IT for each unit.
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Downtime Process

A. Downtime Confirmed

1. Make sure the printer has an ink cartridge installed and paper tray is full.
2. Plan to have extra paper and an extra ink cartridge on hand so all printing can be accomplished.
- 3. The 724 Downtime Computer and Monitor should be on at all times.**
- 4. Login to the 724 Application using your Millennium credentials (Net ID and password)**
5. The patient list for unit(s) will appear.
6. From the search results, select Print List
7. Select the columns you want to print.

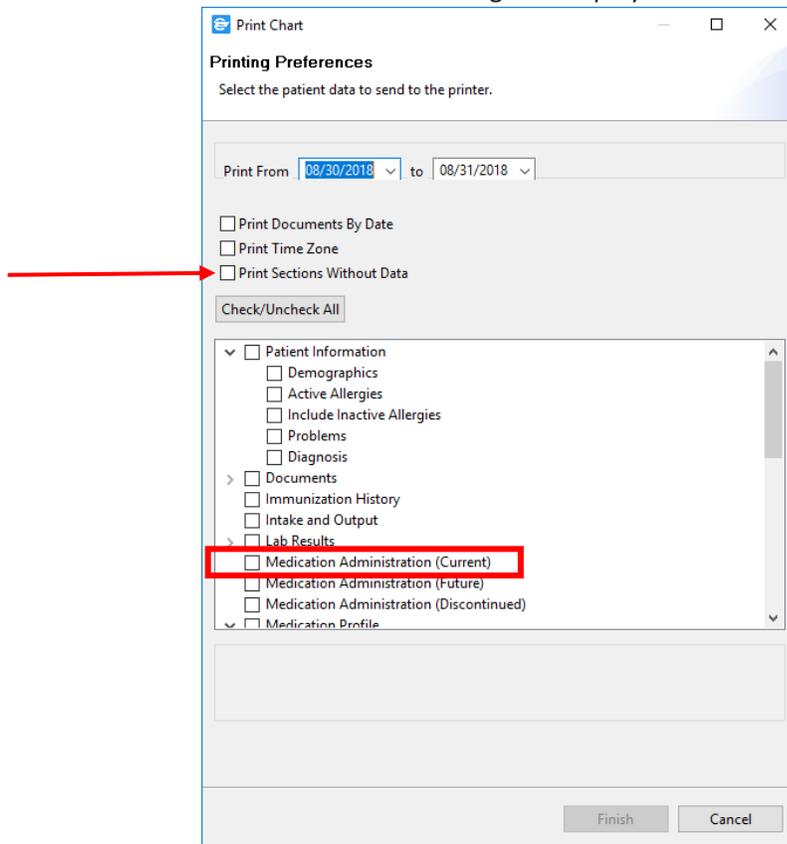
8. Choose Finish and the print dialog box displays as shown in the screenshot below.



9. Select a printer or Print to File.
10. Choose PRINT. If you selected Print to File, enter an output file name and close
11. If you have any problems with the 724 downtime application, call the Help Desk at 1-7500.

B. MAR Printing

1. To view or print the MAR for a single patient select the patient on the patient list
2. Click **Print Chart**. A dialog box displays a list and sections of the chart that can be printed.



3. Select the date range and the sections to print.
4. Select **Finish**. The Print dialog box is displayed

Downtime Processes

- A. Begin downtime procedures--as soon as the system is "unavailable".
- B. All processes revert to paper. All paper orders (except for Lab orders) will be communicated via OrderComm to the appropriate departments.
- C. Vital sign integration will not be available during a network downtime and vital signs should be documented on the appropriate flowsheet available in the Downtime notebook.
- D. All paper medication orders must have the patient dosing weight and allergies documented at the top of the order page.
- E. Paper lab orders will be transcribed to the paper requisitions and sent with the specimen and six demographic labels to the lab.
- F. Labs ordered prior to the downtime:
 1. Routine collection labels for specimens that would be collected during the downtime period will be printed prior to the scheduled downtime.

2. If a printed Millennium lab label is available it should be used when the specimen is sent to the lab.
- G. Accudose will be on override.
- H. The last unit diet list printed from PowerChart should be used on the nursing unit and updated manually for any new/modified diet orders. Patients admitted during the downtime should also be added to this list. Any diet orders sent after the meal deadlines may result in a late meal tray.
- I. All physician orders are to be written on the paper Physician's Order sheet. Physicians are encouraged to only write orders that are required for the immediate care of the patient during the downtime period. These orders would be written as one-time orders. For new patient admissions the most frequently used Powerplans are available for printing from the downtime webpage. When these paper plans are used, any non-medication recurring orders must be entered by the provider into the electronic health record when the system becomes available. Pharmacist will be entering all recurring medication orders from the downtime period. Copies of orders are available in the Downtime
- J. Paper prescription pads will be available in the Pharmacy for use during the downtime only for patients discharged during the downtime. If paper prescriptions are needed, contact the pharmacy at 1-4815 for delivery to your area. If paper prescriptions are requested, the charge nurse will be asked to sign for the prescription pad; when the downtime is completed, the unused prescriptions will be collected.
- K. Historical patient information will be available to physicians through GRACHIE and also HIMS at 1-2672.

Laboratory Results

- A. For laboratory results that become available during the downtime:
1. Lab staff will call and fax Critical results to the appropriate ordering unit.
 2. All urgent and emergent results will be faxed to the Nursing units.
 3. Laboratory will begin entering downtime results into PowerChart when the system becomes available; however, the timeframe to complete entry of results will be approximately equal to the length of the downtime. Please maintain the faxed results until results are available in PowerChart.
 4. Calls to the Core Lab, Blood Bank, and Microbiology should to be limited to urgent or emergent requests.
 5. For specimens sent to lab during downtime:
 - If there is no Millennium lab label, send 6 labels per patient for every group of specimens transported to the lab (2 labels per tube, include additional labels if specimen is to be shared with another area and/or instrument).
 - If there is a Millennium lab label, use it and no additional labels are required.
- B. Clerical staff on the nursing unit should closely monitor the fax machine assuring paper is available and machine is working properly. All reports are to be placed in the patient's paper chart.**

Radiology Results

- A. Historical images (studies performed prior to the downtime) will be available during the downtime through Citrix in Intellispace PACs (images and reports).

- B. Reports for studies performed during the downtime:
1. Radiology will dictate Emergency studies into voice recognition software and print copies of these reports. The reports will be faxed to the patient's floor or the Emergency Medicine Department.
 2. Emergency Department studies will have first priority in this work flow followed by stat or emergency inpatient studies.
 3. Routine Studies will be reviewed and dictated as quickly as volume and staffing permits.
 4. Critical results for all patients will be communicated by the Radiologist calling the ordering physician. **All sections of the Radiology Order form must be completed. Any forms that are incomplete are subject to rejection in OrderComm and must be corrected before the patient can be imaged.**
 5. All reports for studies performed during the downtime should be dictated and available in PowerChart after Radiology recovers from the downtime by the end of the day. If you are missing a report, please page 3-8652 for assistance.
 6. Radiology resident on call page 3-7396.
- C. All Radiology images (new and historical) are available through Citrix in Intellispace PACS (User Guide available on the Downtime webpage). For PACS support page 3-1620.
- D. **Clerical staff on the nursing unit should closely monitor the fax machine assuring paper is available and machine is working properly. All reports are to be placed in the patient's paper chart.**

Nursing Documentation

1. Downtime forms are available in Forms on Demand if documentation is required during the downtime. Use the appropriate Downtime forms for your area.
 2. Paper downtime forms are also available in your downtime notebook in case of a network downtime and Forms on Demand is not available.
 3. Immediately prior to a planned downtime, print MARs for every patient that will have a medication administration during the downtime.
 4. In addition make copies of the PCT flowsheet packet which is located in each units Downtime notebook.
 5. All documentation will be on downtime forms and placed in the paper chart.
- A. Medication administration should be documented on the paper MAR and in accordance with the Medication Administration Policy: For hospitalized patients, the documentation is on the electronic medication administration record (eMAR). In the event of a downtime, documentation occurs on a paper medication administration record (MAR). The paper MAR used during the downtime remains a part of the patient's permanent medical record. All medications administered during the downtime are post documented on the eMAR during the downtime recovery period. Documentation is performed by personnel authorized to administer medications.

6. All other paper documentation will not be entered into the electronic system when the downtime is complete. The paper documentation will be placed in the paper chart to be scanned into the electronic record when the patient is discharged.

Patient Handoff

1. For any patient handoff that occurs during downtime or the shift after the downtime, be sure to review the paper MAR with the nurse receiving the patient as all medication administrations may not be documented on the electronic MAR.
2. Also, be sure to review all other pertinent paper documentation with the accepting nurse.
3. Communicate to the accepting nurse the period of time that the system has been unavailable.

B. Patients Admitted from the ED

1. Prior to the downtime, if the patient has a planned Powerplan, it will be initiated and printed copies of the Powerplans and MAR will be provided by the ED nurse to the accepting nurse on transfer; if there is no planned Powerplan, paper orders and the paper MAR will be provided by the ED nurse to the accepting nurse on transfer.

Recovery Process

- A. One-time orders that were completed during the downtime will not be entered into the EHR system.
- B. If the physician performed Medication Reconciliation, he/she will be responsible for entering into the electronic medical record.
- C. AccuDose will be on override during the extent of the downtime. At the completion of downtime, pharmacy will enter all continuing medication orders that were ordered during the downtime into the electronic system. This process is estimated to take one hour to complete. If you do not see a continuing medication order that was ordered during the downtime on your eMAR, notify the pharmacy.
- D. If a paper MAR was used to document medications during the downtime, the nurse will use the paper MAR to determine the next correct time to administer scheduled medications from the eMAR. All medications administered during the downtime are post documented on the eMAR during the downtime recovery period. Documentation is performed by personnel authorized to administer medications (see Medication Administration Policy).
- E. All paper documentation should be placed in the paper chart to be scanned to the electronic record at discharge.
- F. Non-medication recurring orders must be entered by the provider into the electronic health record when the system becomes available.
- G. Pharmacy will be entering all continuing medication orders that were ordered during the downtime into the electronic system during the end of the downtime period. Provided the validation of the system during the downtime progresses as expected, the pharmacy will make every effort to have the medication orders entered BEFORE the system is released to the end users. If you do not see a continuing medication order that was ordered during the downtime on your eMAR, give the pharmacist about two hours after the downtime is over to finish entering the orders from the

downtime and you should see the medication on the eMAR. If you do not see the medication two hours after the downtime, contact the pharmacy.

- H. If there is nursing documentation on the paper downtime forms that has not been entered into the electronic record, the nursing staff will document “yes” on the downtime documentation question (VS form) once the system becomes available. This will denote that some nursing documentation may not be a part of the electronic record due to downtime.