

# ENGAGING ALL SYSTEM STAKEHOLDERS IN PREPARING FOR LARGE SCALE DISASTERS AND BUSINESS CONTINUITY PLANNING

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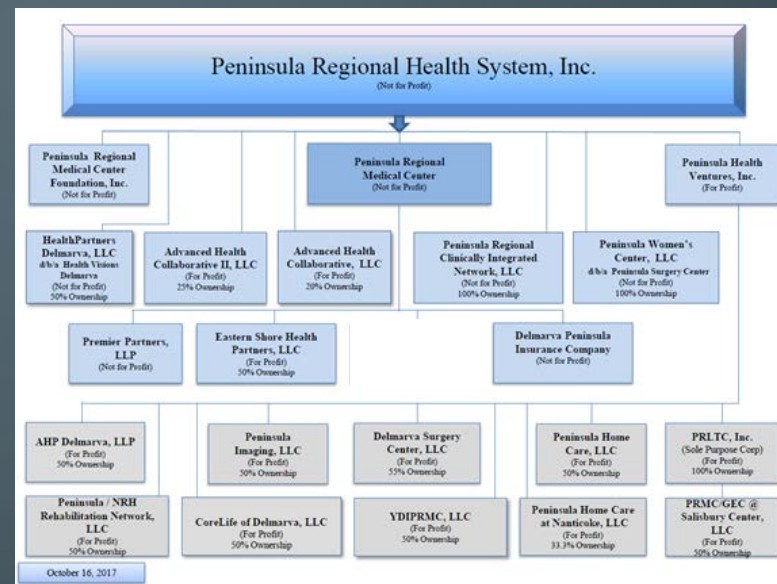
PENINSULAR GENERAL HOSPITAL, SALISBURY, MD.

# OBJECTIVES:

AT THE CONCLUSION OF THE PRESENTATION, PARTICIPANTS WILL BE ABLE TO

- Describe Peninsula Regional Health System
- Identify system stakeholders and list examples of disasters experienced at PRHS and outside of PRHS.
- Discuss best practice strategies utilized by PRHS to aid in engaging and educating stakeholders in preventing and preparing for disruptions.

# PENINSULA REGIONAL HEALTH SYSTEM



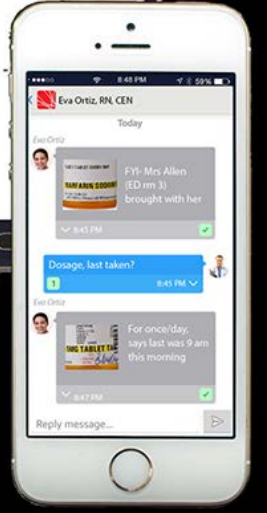
# WHAT IS MEANT BY "TECHNOLOGY DISRUPTION"



A screenshot of the Peninsula Regional Medical Center iPortal website. The page features a navigation bar with categories like Clinical Departments, Medical Staff, and Nursing Staff. A central announcement reads "Epic Downtime Planned for July 18" with details about the maintenance and instructions for staff. A sidebar on the right includes a "System Links" dropdown menu and a "Staff Directory Search" section.



A screenshot of a patient's medical record in an EMR system. The record shows a "Visit Summary" with various medical history entries, including "Chief Complaint", "HPI", "PE", "Rx", "Allergies", and "Social History". The interface includes a search bar and various navigation options.



STAKEHOLDERS...

WHO IS IMPACTED BY TECHNOLOGY DISRUPTION?  
WHO IS ACCOUNTABLE?

*EVERYONE!*



# DISASTERS EXAMPLES

## AT PRHS

- Power Failure-
  - Power company
  - Defective UPS
- Cell phone outage
- Cable/Internet provider outage
- Server Failure
- Electrical Fire
- Update Error

## OUTSIDE OF PRHS

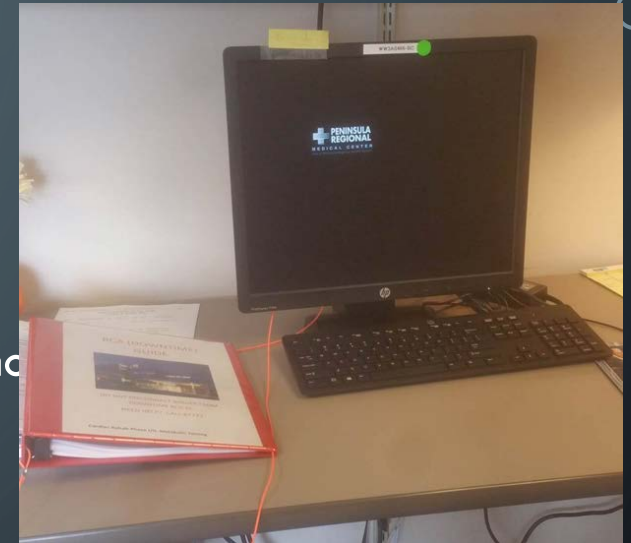
- Power Failure
- Fire
- Cyberattack
  - [Cass](#) Regional Medical Center Harrisonville, Mo
  - [Erie](#) County Medical Center
  - [MedStar](#) Hospitals
- Natural Disasters
  - Hurricanes- [Harvey](#)
  - Tornado- [Joplin](#)

# HOW DID/DO WE OBTAIN BEST PRACTICES

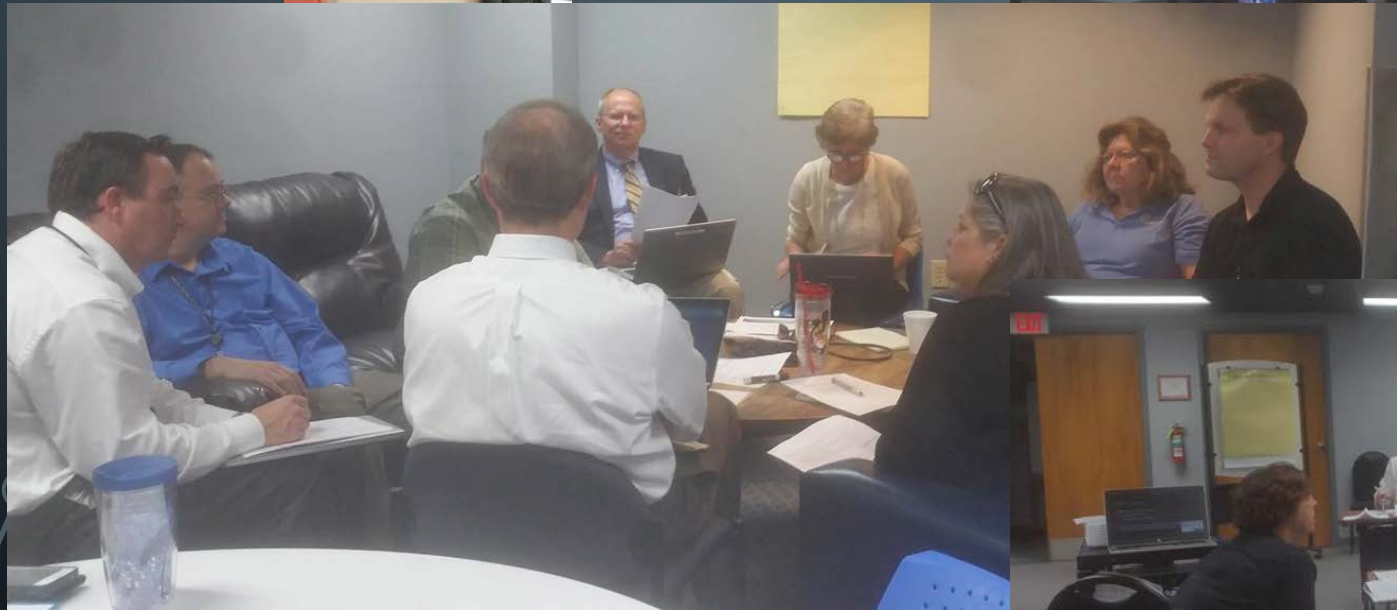
- Gap analysis and action plan of our actual events
- Networking- Professional Organizations (HIMSS, ANIA, AHIMA, AMIA), neighboring health systems (UMMS, BHMC, GBMC)
- Conference Presentations (SINI, HIMSS, UGM, Google search)
- Government & Regulatory guidelines, resources, & References (HHS, ONC, FEMA, TJC, AHRQ)

# BEST PRACTICE STRATEGIES UTILIZED TO ENGAGE AND EDUCATING

- Nursing owned the development downtime policy & procedure-
- Advocated for better communication- Facilities, IT, Emergency Management
- Engaged Emergency Management Committee- Risk Assessment – Sub team Techno
  - Table top Exercises
  - FEMA Homeland Security Exercise and Evaluation Program (HSEEP) “Blue Team Drill”
  - System wide disaster drill with technology disruption components
- Enterprise wide EHR replacement
  - Lessons learned in Business Continuity planning
  - Created a BCA committee (Hardware & Software assessments, Reports, Forms, P&P)







# SUMMARY

- Assess your strengths and weaknesses using external tools against a real event (if possible)
- Provide System wide Education and regular updates on internal and external disruptions
- Form a multidisciplinary team- IS, IS Security, Facilities/EMC, Regulatory, Clinical leads
  - Create/Maintain procedures for each department
  - Conduct Drills (table top and live)
  - Conduct regular assessments of hardware, software, reports, forms, procedures- with operational and analyst accountabilities

# REFERENCES

- Safer Guides Contingency Planning  
[https://www.healthit.gov/safer/sites/safer/files/guides/safer\\_contingency\\_planning.pdf](https://www.healthit.gov/safer/sites/safer/files/guides/safer_contingency_planning.pdf)
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