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

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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.
WHAT IS MEANT BY “TECHNOLOGY DISRUPTION”
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 Technology Disruption:
  • 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  


• ECRI Institute guidance article: Emergency management  
  https://www.ecri.org/components/HRC/Pages/SafSec6.aspx

• https://oig.hhs.gov/oei/reports/oei-01-14-00570.pdf