BRIGHAM HEALTH
BRIGHAM AND WOMEN'S
Faulkner Hospital

Use of An Audit Report to Improve Business Continuity Access Testing

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Purpose

The aim of this project was to use a validated tool to ensure that all Business Continuity Access (BCA) devices at Brigham and Women's Faulkner Hospital were consistently being tested.

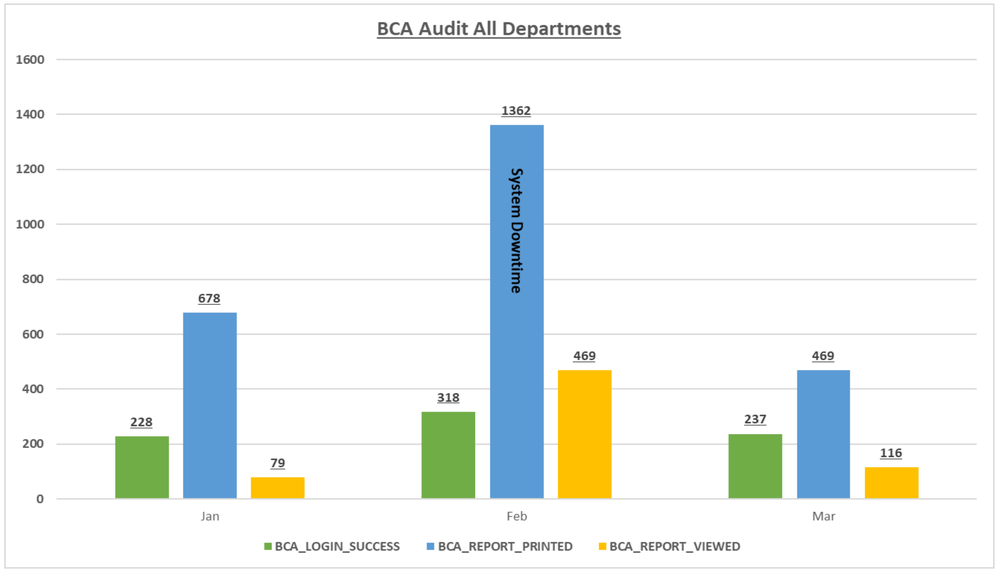
Background

- With the introduction of fully integrated Electronic Health Record (EHR) systems, reliance on paper documentation has diminished
- The digital divide has closed, revealing a generation of staff that have never documented in a paper-based format
- The ability to know that the Business Continuity Access (BCA) device is being tested and performs as expected is essential
- In 2018, the clinical informatics group and an enterprise report writer set out to validate that these devices were being used correctly

Methods

- Informatics defined workflow for device testing and outcome expected
- Report writer access to data warehouse information shaped report development
- After Enterprise prioritization, report requirements were developed
- Report based on facility, unit and user was developed.
- Validation occurred manually over several months before sent to production
- Report supported identification of non- compliant areas in need of education

Results



Notations

- Enterprise downtime event in February led to spike in printing
- Drill down into data revealed some units' staff were
  - testing everyday/twice a day
  - printing every report instead of just a single report
  - logging in and logging out only
- After remediation on expectations in February, March results closely matched expectations on report printing

Conclusion

In the era of complete EHR integration

- Need to be continually prepared for an unexpected downtime
- Ensuring access to clinical information in a system downtime is essential
- Using BCA is most effective way to attain clinical information
- Regular testing of BCA access and ability to print is necessary
- Accurate BCA reporting provides insight into system issues, educational needs, and opportunities for improvement

Next Steps

- Plan to refine the ability to extract and convert data into usable tables and graphs for operational leaders.
- Continue to use information in enterprise work to develop downtime drills.
- Continue ongoing monthly with operational oversight by department leaders
- Support Enterprise request in across-the-board viewing of report for state of downtime readiness.

References

Zhong S, Clark M, Hou X, et al. Development of hospital disaster resilience: conceptual framework and potential measurement. Emerg Med J 2014;31:930-938