



What is BCA?

Business Continuity Access (BCA) gives your staff access to information they need to provide patient care in the event of a temporary or sustained period of downtime (server, network, power, etc.) with the Epic system.

TogetherCare Downtime Tools

- BCA PCs – use independent power and printing systems
- BCA Web and Data Entry
- Shadow Read Only (SRO)

Refer to the Trinity Health Downtime Policy for downtime tool definitions and for more information regarding when to use each of the downtime tools and how to access them.

Guidelines for Using Tools

	Ancillary Systems or Interfaces down	Planned Epic PRD server down	Unplanned Epic PRD or SRO server and/or WAN down	Unplanned Epic and Network and/or Power outage
Normal Access	Yes	N/A	N/A	N/A
Read Only Access (SRO)	Available	Yes – use this tool	N/A	N/A
BCA Web	Available	Available	Yes – use this tool	N/A
BCA PCs	Available	Available	Available	Yes – use this tool
Tools	Follow limited usage procedures	Use Epic SRO capabilities	Use BCA web or BCA PC reports	Use BCA reports only



Cupid Downtime Reports

When Epic is experiencing a downtime, the following reports will be available for Cardiology users to access through one of the tools above. These reports contain the most critical patient information and are configured to BCA PCs and Web.

- **DAR** – Also known as Department Appointments Report, the DAR shows scheduled non-invasive appointments for the department the user is logged into. This report is refreshed every 120 minutes.
- **Schedule Orders Report** – Also known as a SOR, the Technologist Schedule Orders Report shows current unscheduled inpatient orders for the location that the user is logged into. This report is refreshed every 30 minutes.
- **Status Board Report** – The Status Board shows scheduled invasive cases for the location the user is logged into. This report is refreshed every 60 minutes.
- **Master Daily Schedule** – The Master Daily Schedule shows scheduled invasive cases for the location the user is logged into. This report is refreshed every 60 minutes.
- **Case Detail Report** – Shows case and log information for today's cases for the location the user is logged into. Use this report for the case pick list and for any procedure log documentation if the downtime occurs during the case. This report is refreshed every 60 minutes.
- **Clinical Summary** – This report contains the summary information typically found in a Clinical Summary report such as orders, results, I&O, flowsheet data, and admission information. This report is refreshed every 60 minutes.



Downtime Workflow Considerations

Order Entry

- Front desk staff should collect paper orders or photocopies for entry once the system is back up.

Scheduling

- Scheduling staff shouldn't schedule patients for future exams or cases during a downtime. Instead, use a paper log to record the patient information of any patients or physician offices who call to schedule a future appointment or case. The log should contain at least the patients' names, phone numbers, preferred appointment dates/times, and the reason for visit. Other patient identifiers, such as MRN or DOB, may be appropriate to collect.

Check In

- Front desk staff should collect appointment information from the patient to verify that it's the same as what was collected at the registration desk and record it on a blank control sheet. This information should include the following: procedure, patient name, social security number, and, if applicable, the downtime MRN, the hospital account number, or the visit account number. Front desk staff should also collect any paper orders and attach them to the paper control sheet for the technologist. Once this is complete, front desk staff should place the control sheet in a predetermined location so technologists will know that they have patients waiting.

Outpatient Appointments

- Technologists can reference the Daily Appointments Report (DAR) to see upcoming outpatient appointments. After a front desk staff member hands off the downtime control sheet, the technologist will know the patient is ready to be seen.

Inpatient and Emergency Orders

- For inpatient and emergency exams, users can reference schedule orders reports for orders placed prior to the downtime. In addition, the inpatient units will call in or send paper orders to notify technologists that an exam is needed. Technologists will work these orders into the schedule and start a downtime control sheet for each exam.

Non-Invasive Cardiology Documentation

- When the technologist picks up a downtime control sheet from the front desk or calls for an inpatient or emergency patient, she will perform the exam as usual and record the exam information on a downtime control sheet.
- On the control sheet the technologist will record pertinent exam information such as:
 - Medications administered
 - Exam questions
 - Supplies used
 - Additional charges



Invasive Cardiology Documentation

- In Cath/EP labs, technologists/nurses will use the hemodynamic system for intra-procedure documentation. Once the system is live, staff will need to back document a minimal amount of information (along with the physician report) in Epic. Items that MUST be entered in Epic include:
 - Supplies
 - Medications
 - Implants
 - Charges
 - Time Out
 - Required fields (EBL, specimen collection, etc.) for completing logs

Reading and Signing

- Cardiologists and Vascular Surgeons must wait to result studies in Epic until after the downtime. Studies MUST be read in Epic using Structured Reporting tools.

Recovery Workflow Considerations

Order Entry

- All paper orders received during downtime for outpatients will need to be transcribed and scanned into Epic once it's available. Inpatient units should enter inpatient orders.

Scheduling

- Once the system has recovered, staff will contact the patients using the recorded data.

Check In

- Front desk staff should begin checking in cardiology appointments after registration has been completed on all patients who were attended during the downtime.

Outpatient Exams

- Once front desk staff have checked in outpatient appointments after a downtime, accession numbers will need to be changed in downstream systems to match accession numbers generated in Epic. After accession numbers have been updated and exams merged in PACS, technologists can complete exams in Cupid, entering all the information written on the downtime control sheet.

Inpatient and Emergency Exams

- After inpatient units have back-ordered all cardiology orders, technologists can add-on inpatient exams and manually edit accession numbers in downstream systems to match accession numbers generated in Epic. After the accession numbers have been updated and exams merged in PACS, technologists can complete exams in Cupid, entering all the information captured on the downtime control sheet.

Reading and Signing

- Physicians should log in to Epic during recovery after technologists complete exams to review and sign all studies that have queued up during the downtime.

Other Considerations

DICOM Work List Downtime

- Modality work lists execute a query to populate information for today and tomorrow's work list. Consequently, the MWL will not reflect new or updated order information in the event of an Epic downtime, and it may be empty in the case of a prolonged downtime. Cardiovascular departments should have a strategy in place to manually track this information during a downtime.

DICOM-SR/Measurement Exchange Downtime

- During downtime, your ultrasound carts will not be able to exchange measurements with Epic. Any studies performed during downtime will have to have measurements manually added when Epic comes back up in order to complete reports.