

# **CIS Downtime Health Records**

**(Includes the Main Health Records Depts and Ambulatory/Allied Health Record Depts)**

**Health PEI**  
CLINICAL INFORMATION SYSTEMS

# Health Records

## Downtime Procedures

### **Filing Conversion of a Paper Chart – Health Records – Main and Ambulatory/Allied Health**

#### **Pre-Downtime:**

- CIS Master Patient Index in place to look up patient MRN's.
- No replacement for the HMRN report will be available.
- Conversion Downtime Log form is required.
- Installation of Excel or other software needed to view MPI's.

#### **Downtime:**

- Paper charts that are pulled during the downtime period will be converted from HMRN to MRN if not already converted.
- Record charts that have been converted on Conversion Downtime Log.

#### **Recovery:**

- When the system is back up, the HMRN Conversion report will run the next day.
- Check off paper charts on HMRN Conversion Report that have been converted during downtime.
- Staff will proceed with the CIS workflow.

### **Urgent Request for the Paper Record – not applicable to Ambulatory/Allied Health except PCH Cardiorespiratory**

#### **Pre-Downtime:**

- CIS Master Patient Index in place to look up patient MRN's. If not found, use KEA Master Patient Index for HMRN.
- Downtime Checkout Log form required.

#### **Downtime:**

- Paper charts that are pulled during the downtime period will be documented in Downtime Checkout log (see attached document).
- Paper charts returned to the department will be indicated as such in the Downtime Checkout Log.

#### **Recovery:**

- When the system is back up, chart location will be updated in Chart Tracking from Downtime Checkout Log, except for those charts originally retrieved from Permanent Filing Locations.

## **Electronic Request for the Paper Record - not applicable to Ambulatory/Allied Health**

### **Pre-Downtime:**

- Phone or in person request will replace electronic process for request.
- CIS Master Patient Index in place to look up patient MRN's. If not found, use KEA Master Patient Index for HMRN.
- Downtime Checkout Log form is required.

### **Downtime:**

- Paper charts that are pulled during the downtime period will be documented in Downtime Checkout log (see attached document).
- Paper charts returned to the department will be indicated as such in the Downtime Checkout Log.

### **Recovery:**

- When the system is back up, chart location will be updated in Chart Tracking from Downtime Checkout Log, except for those charts originally retrieved from Permanent Filing Locations.

## **Unit to Unit Transfer - not applicable to Ambulatory/Allied Health**

*(Prince County Hospital only)*

### **Pre-Downtime:**

- None.

### **Downtime:**

- Manual Notification slip from ERM is received in Health Records and location of chart is recorded in Downtime Checkout Log.

### **Recovery:**

- Update location of chart in Chart Tracking from Downtime Checkout Log.
- Disregards slip and dispose of same.

## **Verification of # of Daily Discharges and Assembly of Charts - not applicable to Ambulatory/Allied Health**

### **Pre-Downtime:**

- Scheduled Downtime – ERM to print off Discharge Lists for discharges prior to downtime.
- Unscheduled Downtime – ERM to provide Downtime Discharge Lists.
- Downtime Checkout Log form is required.
- Unscheduled Downtime - Blank Downtime Discharge Lists.

### **Downtime:**

- Unscheduled Downtime - Discharged paper charts with a discharge date prior to Downtime are to be recorded on a blank Downtime Discharge List.
- Scheduled Downtime - Discharged paper charts discharged during downtime, will be verified with ERM Discharge List.
- Record paper charts returned to the department in the Downtime Checkout Log.

### **Recovery:**

- Labels will print for new folders once ERM begins to register downtime patients.
- Validate display of task for each Discharge in Task Queue.
- Validate media type and associated visit/s with media type.
- Chart location may need to be updated from Downtime Check Out Log.

## **Analyze Paper and Electronic Charts - not applicable to Ambulatory/Allied Health**

### **Pre-Downtime:**

- Discharged visits with admission prior to downtime may have electronic information. This information will not be available until Recovery except for Dictaphone reports if the Dictaphone system is not down.
- Downtime Deficiency Slips required.
- Downtime Checkout Log is required.

### **Downtime:**

- Physician documentation during downtime will be hand written if Dictaphone is down. Photocopy upon discharge for distribution.
- Review paper chart for deficiencies.
- Create Dictaphone Downtime Document for any handwritten documents written during downtime if Dictaphone is up.
- Use downtime Deficiency Slips to record deficiencies in paper record. Photocopy to update Patient Deficiency Analysis when system is back up.
- Record chart location in Downtime Checkout Log.

### **Recovery:**

- Using the Discharge List to obtain MRN's, open completed charts in Task Queue and create/update any required deficiencies.

- Create Dictaphone Downtime Document for any handwritten documents written during downtime if not already done during downtime.
- Discard any paper transcribed documents as physician will receive copy to sign in Inbox.
- When the system is back up, chart location will need to be updated in Chart Tracking from Checkout Log.

*(Queen Elizabeth Hospital)*

- Delete interfaced document deficiencies from ProFile Physician Deficiency for DNBR physicians.

### **Dictation and Transcribing of a New Document and a Revised Document - not applicable to Ambulatory/Allied Health**

#### **Pre-Downtime:**

- KEA Master Patient Index required.
- Local printer set up to print urgent documents from Dictaphone.

#### **Downtime:**

- Dictaphone reports continue to be transcribed if the Dictaphone system is not down.
- If Dictaphone system is down, physicians to hand write documentation.
- Dictaphone documents will not be printed for patient chart unless urgently required.
- Use KEA Master Patient Index to retrieve limited personal information if not already in Dictaphone system.

#### **Recovery:**

- ERM backlog will update Dictaphone upon recovery.
- Dictaphone backlog will update CIS upon recovery.

### **Printing and Distribution of Deficiency Reminders - not applicable to Ambulatory/Allied Health**

#### **Pre-Downtime:**

- Electronic physician documentation deficiencies will not be available for extraction.

#### **Downtime:**

- Process will be deferred until system is back up.

#### **Recovery:**

- Upon completed entry of downtime deficiencies from other workflows, reminders can be run as per routine schedule.

### **Physician Deficient Paper Chart Pull - not applicable to Ambulatory/Allied Health**

#### **Pre-Downtime:**

- Electronic deficiencies within Inbox will not be available during downtime.

#### **Downtime:**

- Physicians will be asked to wait till recovery as there is no means to retrieve MRN's for deficient paper documentation. Paper charts in deficient area are filed by MRN.

#### **Recovery:**

- Upon completion of entry of new downtime paper deficiencies within other workflows, lists can be printed to pull charts.

### **Reviewing Deficient Charts for Physician Completeness - not applicable to Ambulatory/Allied Health**

#### **Pre-Downtime:**

- Downtime Deficiency Slips required.

#### **Downtime:**

- Update Deficiency slip as required. Photocopy to update system upon recovery.
- Update location of paper chart in Downtime Checkout Log if appropriate.

#### **Recovery:**

- Update Physician Deficiency Analysis from copies of Deficiency Slips.
- Update chart location in Chart Tracking from Downtime Checkout Log, if required.

### **Refusal of a Co-Signature Order or Document - not applicable to Ambulatory/Allied Health**

#### **Pre-Downtime:**

- During downtime, this process will only apply to paper documents.

#### **Downtime:**

- Investigate and determine owner of unsigned Order. If not able, file as unsigned.
- Investigate and determine owner of unsigned paper document. If owner is not available for signing now or in future (eg. Locum), HIM manager to create dated and signed addendum reading "Documentation Incomplete – Author Not Returning"

#### **Recovery:**

- No requirements.

## **Coding and Abstracting of a Chart - not applicable to Ambulatory/Allied Health**

### **Pre-Downtime:**

- NOTE: IP and Day Surgery Coding is typically 30 days behind  
(*Prince County Hospital & Stewart Memorial Hospital* - Code and abstract complete charts from Coding shelf.)
- Downtime Deficiency Slips required.
- Downtime Checkout Log required.

(*Prince County Hospital & Stewart Memorial Hospital*)

- Coding Worksheet required.
- Access to PowerChart Local Access

(*Queen Elizabeth Hospital, Kings County Memorial Hospital, Souris Hospital, Community Hospital & Western Hospital*)

- Run incomplete discharge list from Cactus to retrieve charts if coding is currently up to date only.

### **Downtime:**

- Create manual Deficiency Slip for any new deficiencies. Record on Deficiency Slip if paper chart has to be returned to coding.
- Photocopy deficiency slip for entry into CIS upon Recovery.
- Record new location of paper chart in Downtime Checkout Log if appropriate

(*Prince County Hospital & Stewart Memorial Hospital*)

- Return chart to coding shelf if input into Cactus is required.
- If Cactus is not down, code and abstract ER and Ambulatory visits.
- If documentation allows, record Diagnosis and Procedure codes on Coding worksheet for IP's and Day Surgery.

### **Recovery:**

- Record deficiencies into Patient Deficiency Analysis from copies of Deficiency slips.
- Update location in Chart Tracking from Downtime Checkout Log if location has changed.
- Create sticky note in Chart Tracking if paper chart needs to be returned to Coding.

(*Prince County Hospital & Stewart Memorial Hospital*)

- Cactus – abstract using coding worksheet and CIS.

## **External Request for a Copy of the Patient Record - not applicable to Ambulatory/Allied Health**

### **Pre-Downtime:**

- Use CIS Master Patient Index in place to look up patient MRN's. If not found, use KEA Master Patient Index for HMRN.
- Downtime Checkout Log is required.
- Downtime ROI Log is required.
- Access to RIS system if not down.
- Access to local printer.
- Access to Dictaphone system if not down.

### **Downtime:**

- Record ROI information into Downtime ROI log.
- Obtain copies of reports from Dictaphone if possible, stamping DBNR.
- Use letter samples to create required cover letters for send out.
- Print Radiology reports from RIS system.
- NOTE: Historical Lab results will not be available. Current lab results will only be printed for IP's for downtime exceeding 8 hours or for Emergency Transfer cases.
- Print mailing address directly on envelope.
- Record new location of paper chart in Downtime Checkout Log if appropriate.

### **Recovery:**

- Update Request Manager from Downtime ROI Log.
- Update location in Chart Tracking from Downtime Checkout Log if location has changed.

## **Notification of A Duplicate to CR by HIM - Health Records – Main and Ambulatory/Allied Health**

**Pre-Downtime:** None

### **Downtime:**

- If email access is not available, process to be deferred until email is available. If email is available, process will be done as per normal workflow.

### **Recovery:**

- Notify CR Helpdesk by email of identified duplicate as per normal workflow.



## **Archiving and Microfilming of Inactive and Death Records - not applicable to Ambulatory/Allied Health**

*(Queen Elizabeth Hospital, Prince County Hospital & Stewart Memorial Hospital)*

### **Pre-Downtime:**

- CIS Master Patient Index – MRN
- Vital Stats Monthly Death List

*(Prince County Hospital & Stewart Memorial Hospital)*

- KEA Master Patient Index - HMRN.

### **Downtime:**

- Death Records - Use CIS Master Patient Index in place to look up patient MRN's.
- Record new location of microfilm visits in Downtime Checkout Log.
- Record new location of death visits in Downtime Checkout Log.

*(Prince County Hospital & Stewart Memorial Hospital)*

- Prepare charts for filming.
- Keep a list of missing numbers.
- If microfilming, use Downtime Microfilm Log to record roll and frame numbers .

### **Recovery:**

- Update location in chart tracking if location has changed.

*(Prince County Hospital & Stewart Memorial Hospital)*

- Look up missing numbers in MPI
- Enter roll and frame numbers in to chart tracking.

## **Purging of Death Paper Records - not applicable to Ambulatory/Allied Health**

*(Kings County Memorial Hospital, Souris Hospital, Community Hospital & Western Hospital)*

### **Pre-Downtime:**

- Downtime Master Patient Index
- KEA Master Patient Index.
- Vital Stats Monthly Death List.

### **Downtime:**

- Identify if records exist using MPI's.
- Record new location of paper chart in Downtime Checkout Log if location has changed.

### **Recovery:**

- Process death paper records.
- Update location in Chart Tracking from Downtime Checkout Log if location has changed.

### **Combines Notification - Health Records – Main and Ambulatory/Allied Health**

Combines will not occur unless a patient is being transferred out of province. If this is required during downtime, a Manual Memo notification will occur from CIS Combines for these types of patients to all areas as listed in Appendix F of the Combines Procedure.

### **Health Records Standard Downtime Forms**

**Standard Downtime Forms** (To be stored in all Health Records areas for use during downtime)

- Downtime Conversion Log
- Downtime Checkout Log - not applicable to Ambulatory/Allied Health Areas
- Downtime Deficiency Slip – not applicable to Ambulatory/Allied Health Areas
- Downtime ROI Log - not applicable to Ambulatory/Allied Health Area







# **DOWNTIME QUICK REFERENCE: Health Records**

## **CIS DOWNTIME**

### **Before Scheduled CIS Downtime**

- Ensure Downtime Documents/Logs are placed in the appropriate areas (logs/documents are located in your Downtime Kits).
- Know where to access the Downtime MPI report (housed on a local drive within the Main Registration and Health Records depts of your facility)
- Run Discharge List just prior to Downtime.
- Run Admission List just prior to Downtime.
- Run Deficiency Reports prior to Downtime.

### **During CIS Downtime**

- Use Downtime Master Patient Index to identify location of chart.
- Use Registration Downtime Admission and Discharge Lists for reconciliations.
- Document and convert HMRN paper charts pulled during Downtime if not already converted
- Document paper charts that are relocated from Health Records or within Health Records.
- Internal chart requests will be by phone call.
- PCH – Manual notification of Unit Transfer of patient.
- Dictaphone – if not down, use to print transcribed documents for Transfers out of province.
- RIS – if not down, use RIS system to print documents for Transfers out of province.
- Use Downtime Deficiency Slip for indicating incomplete records and photocopy for entry upon Recovery.
- Deficiency Pull Lists will not be available for Physicians.
- Combines notification will be by written memo if patient is being transferred out of province.

### **After CIS Downtime**

- Retrieve copy of lists of Admissions from Registration.
- Once Registration has completed entry of admissions:
  - a. Update ProFile applications from Downtime Logs/Documentation.
  - b. Perform spot check for transcribed documents posting to ProFile.
  - c. “Complete” tasks that will populate in Task Queues for charts that were completed during downtime.
  - d. Apply media type labels to correct charts.
  - e. Check email for any Combines performed.

### **Please note:**

CIS Operations Team will decide when users can access the system. It will notify other users when they can begin their recovery process.