

The value of 24/7 access to critical patient data — a nurse's perspective

By Kelley Smith, RN, MPH, Chief Clinical Officer, Envision Health

I am very grateful for my years as a nurse, fulfilling the role of a care provider and patient advocate. Being a nurse means that every day, people's lives are in your hands. Nurses are the frontline caregivers for their patients from admission to discharge, constantly referring back to patients' charts for medication dispensation and other tasks. Having been a nurse at several major health systems for many years, I can tell you first-hand that we rely on having secure access to the right information, when we need it and where we need it, to keep patients safe and deliver high-quality care. If system downtimes occur — whether from power outages, natural disasters, planned maintenance or cyberattacks — we can't do our jobs effectively and patients' lives are on the line.



Here are some examples of the various touchpoints throughout my day, during my time as a nurse, when access to patient information, even during downtimes, was crucial for me:

Planning out your day. Nurses begin every shift carefully studying the notes and orders provided by the multidisciplinary team caring for each patient. The care plan might include medications, allergies, any changes or developments in the patient's condition, notes about diet restrictions, etc. With 8-10 patients under our care each day, this information is essential.

Dispensing medications. During my time practicing as a nurse, this was by far the most stressful part of my day – because there's so much riding on it. Medication plans are very dynamic and can change throughout the day. Additionally, too much or too little of some medications, such as blood thinners, could mean that a patient might bleed out or have a blood clot or stroke if we get the dosage wrong. Or a patient may have life-threatening allergies to medications commonly given for something like infection. The results of not having access to this information if the system goes down could be devastating.

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Transportation within the hospital. There's a lot of coordinated care that goes on in the hospital. Patients need to get x-rays, lab tests, see physical therapists, and more, and it all has to run on-time so each patient receives the care they need. The patient's records show where they're supposed to be and at what time, and if several nurses with 10 patients each don't have access to this information, it would mean not only organizational chaos, but potentially patients missing out on tests and other care they need.

Reaching the patient's family. In an emergency situation — with a patient in the ICU, for example — sometimes we need to reach the patient's family quickly. With no access to the records, loved ones might miss a short window of opportunity to convey important information to the medical team.

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Accessing notes from other care providers. Many people interact with patients during their hospital stay, from pharmacists to physical therapists to social workers. They may have notes about whether the patient has a support network at home, whether they have access to healthy food or a way to get their prescriptions filled. They may have information about which foods affect which medications, or whether a patient is suffering from depression. As nurses, we need to know this information not only while the patient is under our care, but in order to discharge them with the help they need.

Discharge disposition. When a patient is ready to leave our care, they may be heading home, or might be on their way to a skilled nursing facility, inpatient rehab center, custodial nursing care, or a number of other options. They may need home health care a few days a week, or need wound care, or have a certain surgery recovery regimen to follow. We can't send the patients home (or wherever they may be headed) safely if we don't have access to this information in their records at discharge time.



End of life wishes. In the unfortunate case that one of our patients isn't going to survive, it's very important for us to follow their wishes for end of life management. Do they have a "do not resuscitate" document in place? Do they want to be taken off of pain meds and transferred to hospice? Are there religious wishes to consider? Without that information, we might handle a delicate and already difficult situation poorly, and cause family and loved ones undue stress.



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The bottom line is that, for a nurse, the EHR is our lifeline. We refer to it literally hundreds of times a day. I remember doing my job before patient records went digital – nurses couldn't find someone's chart because it might be in the physician's office for hours, and sifting through pages and pages of records took precious time away from caring for our patients.

The switch to digital has made nurses' jobs much more efficient and has reduced the likelihood of dangerous human error.

But it's not perfect. Healthcare information systems still go down. In October 2012, for example, when hurricane Sandy hit the east coast, hospitals across New York, New Jersey and Pennsylvania lost power for days and relied on backup generators; many hospitals were even forced to evacuate.

Due to the power outages, data access during hurricane Sandy quickly became a challenge. "Staten Island University Hospital could no longer access electronic health records after flooding on Monday disrupted power to the building where data is stored. Doctors continued to use paper records on Tuesday," <u>Modern Healthcare</u> reported at the time. "Other hospitals lost access to EHRs during the storm. Doctors at West Penn Allegheny Health System in Pittsburgh reverted to paper and written orders as the storm came ashore and damaged a data center in Mountain Lakes, N.J. ... Allegheny General and Western Pennsylvania hospitals, both in Pittsburgh, and the emergency room at Forbes Regional Hospital, Monroeville, could not access electronic medical records between 8:30 p.m. on Monday and 4 a.m. on Tuesday."

Unfortunately, sometimes downtimes occur from more nefarious causes, as well. In mid-March of 2020, hackers stole and then posted sensitive information online from a COVID-19 <u>vaccine test center</u>. Other threats were identified. The <u>World Health Organization</u> foiled an attack to steal employee passwords, with a senior official describing a "two-fold increase in cyberattacks." Also in March, the U.S. Department of Health and Human Services <u>thwarted</u> a sustained attack meant to <u>overwhelm its systems</u>. These attacks can often leave hospital system down, with no way to access crucial patient data, for days or weeks.

In situations like these, a solution like Interbit Data's NetSafe provides nurses, doctors, and the rest of us on the front lines a secure, HIPAA-compliant way to keep doing the important work that we do and focus on helping patients. You simply can't put a price on patient safety.

Interbit Data provides software automation solutions that ensure your patient care teams have secure, uninterrupted and reliable access to clinical and administrative data when and where they need it.

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