This policy is to clarify the steps to be taken by Radiology staff in the event of downtime for RIS.

**Carestream Proactive monitoring and real time resolution** - With proactive monitoring, error conditions can be identified before downtime occurs—before you even know a potential problem exists. In most situations, problems can be resolved over the Internet in real time. Automatic downloads of software updates and upgrades can be done on demand. As well as this Taunton and Yeovil District Hospital have combined forces to provide a backup solution to each other’s RIS and PACS solutions to further minimise downtime.

**For unplanned RIS downtime**

Firstly establish exactly what is happening.
- If there is a RIS issue then staff should establish whether this is related to a specific room/modality or widespread across all Radiology areas.

Once the problem is established you should log a call with RIS/PACS Manager or RIS Administrators if they are available. If this is not possible log the call directly with the I.T. helpdesk on ext. 7728 and ask them to log a call with Carestream. Always ask any reference numbers as they will be required throughout the incident. When logging a call yourself you will need to use the details below:

**Carestream Helpdesk**
Telephone – 0870 6000246
Quote device ID: K45778804

The severity level should be assigned by the RIS/PACS Manager or Administrators logging the call – please refer to RIS Severity Guidelines for information. (All of these documents have been distributed to RIS and PACS administrators and are also available in the RIS/PACS Managers office). If the I.T. helpdesk log the call for you give as much information for them to understand the criticality of the situation. I.e. no worklist be sent to a modality/modalities and no-one able to log into RIS would be a Severity 1 call.

Severity 1 – Resolution 4 within hours  
Severity 2 – Resolution 18 hours  
Severity 3 – Resolution 72 hours  
Severity 4 – Next schedule maintenance release

**Inform relevant Imaging Department management staff of the problem those individuals are:**

- Dr K Balasubramaniam, Clinical Lead
- David Craig, Directorate Manager
- Elizabeth Ladd, Clinical Manager
- Julie Kitchener, Administration Manager
- Staff should follow the planned downtime processes set out below.
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1. Paper requests will be printed from tQuest by the administration staff
2. Appointments cannot be made or viewed during downtime, so admin staff will need to take details for any patients making enquiries at this time
3. Modalities will not receive a worklist so Radiographers should manually enter the patients details and can continue with the examination
4. Radiographers should enter any post processing details on the paper request for entry into RIS once the system is back up
5. Reports will be entered into a word document by Radiologists and will be available to secretaries to be entered into RIS once the system is back up - See “Process for generating reports when RIS is down”
6. Reports will be forwarded automatically to GP surgeries and Review once the system is back up

For planned RIS downtime inform relevant Imaging Department management staff as listed below:

- Dr K Balasubramaniam, Clinical Lead
- David Craig, Directorate Manager
- Elizabeth Ladd, Clinical Manager
- Julie Kitchener, Administration Manager
- Staff should follow the unplanned downtime processes set out above.

Escalation of lack of progress on severity 1 or severity 2 issues

At 4 Hours
If there is no imminent or expected resolution of the underlying problems after 4 hours David Craig, Directorate Manager and Elizabeth Ladd, Clinical Manager

Incident forms should be filled out for any missing patient information directly resulting from RIS downtime. Incident forms can be found in radiographer viewing areas, with the Clinical Manager or with the Department Risk Co-ordinator.

Cheryl Baker
RIS/PACS Manager
23rd November 2015
Review 23rd November 2017 unless significant change

Elizabeth Ladd
Clinical Manager
23rd November 2015