

PURPOSE

To ensure correct identification of patients receiving care at B.C. Children's Hospital and agencies. Patients and families are actively involved in the identification and confirmation process in accordance with principles of choice, collaboration and connection.

POLICY STATEMENTS

All patients will be properly identified prior to the provision of any care, treatment, service, or specimen collection through **TWO ACCEPTABLE AND UNIQUE PATIENT IDENTIFIERS**

POLICY PRINCIPLES

This policy applies to all physicians and staff providing care and services to all patients within B.C. Children's Hospital and agencies.

Patient identification is a foundational competency for all staff and physicians providing care and services for all patients.

PRECAUTIONS

ALERTS for the following:

- Identical twins
- Patients with **SAME FIRST and LAST NAME** and/or date of birth
Order **NAME ALERT stickers from epro: Item number: 00069914
- Non-verbal patients

DEFINITIONS

ACCEPTABLE and UNIQUE PATIENT IDENTIFIERS are provided as follows:

Patient's full name (first and last, include middle name if multiple patients with same name are present)

Date of birth

Personal Identification Number:

Examples include:

Medical Record Unit Number (MRN)

Personal Health Number (PHN)

Indian Status Number

Interim Federal Health Number (IFH #)

Refugee Number

Photo ID

Accurate photograph

Facial recognition where there is long-term or continuing care and the team members is familiar with the client

NOTE: The unit or patient's room number or location is **NOT** to be used as a patient identifier.

High-risk activities: activities that have the potential for significant patient harm and are in alignment with criteria for Accreditation Canada's Required Organizational Practices focusing on verification processes for high risk activities.

For example:

- Administration of blood and blood products
- Surgical Procedures
- Procedures requiring sedation
- Administration of medications

- Accepting and processing verbal orders
- Administration of Expressed Breast Milk
- Lab Specimen Collection and Labeling
- Diagnostic imaging / Radiology Procedures (for mental health patients)
- Medication administration (for mental health patients)
- Transport to another area (for mental health patients) be individualized to the patient and signed by an authorized prescriber in order to be enacted.

EQUIPMENT

Patient ID bands and labels.
 Hospital Camera
 Photo paper or id tag

PROCEDURES:

REGISTRATION and ADMISSION

1. Patient registration: REFER to PHSA Cerner registration policies and procedures at <http://teamsites.phsa.ca/sites/HIMservices/Registration/PHSA%20%20Policies%20and%20Procedures/Forms/AllItems.aspx>
2. Identify patients upon registration/admission by the following steps:
Ask the patient to state his/her name (first and last) and where possible spell their name; date of birth; his/her address and PHN (Carecard) or hospital blue care (MRN).
3. If the patient is unable to identify him/herself, ask a family member/ or other care person significant other to provide the information.
4. If a family member/significant other care person is not available, and a provider, who has previously identified the patient, is available confirm with them.
5. Verify that the responses match the information on the face sheet or original source of information.

USE OF IDENTIFICATION ARM BANDS

1. Arm bands with hospital identification (**ID BAND**) are preferred source of identification for all hospitalized patients (excluding Mental Health), as well as patients seen in the Emergency Department, Oncology Outpatient Clinic, Medical Day Unit, and Surgical Daycare Unit.
Exceptions may include:
 - Unforeseen skin complications such as burns, allergies or severe sensitivity to band materials
 - Significant edema to limbs
 - If arm band adversely affects current mental health state
2. If a patient is unable to or does not want to wear an **ID BAND** clear documentation must be present in the chart indicating alternative identification process used, such as the use of **PHOTO ID** (see section **PHOTO ID**).
3. The C&W registration generated identification (**ID BAND**) band/label will include:
 - The patient's full name (last name, first name, middle name),
 - Provincial Health Number (PHN)

- Medical Record Unit Number (MRN)
 - Date of birth
 - Gender
 - Barcode (contains the MRUN) where applicable
4. The **ID BAND** is prepared and affixed to the patient at patient registration. Staff placing the initial **ID BAND** on the patient, have the responsibility to verify the patient's identity and the accuracy of the **ID BAND** information at the time it is placed.
 5. When a patient is transferred from another hospital, the **ID BAND** from that hospital is to be removed and replaced with a new **ID BAND** or alternative photographic identification.

IMPORTANT NOTE: DEFECTIVE or MISSING ID BAND must be replaced as soon as possible. If it is necessary to remove a patient's **ID BAND** to complete a procedure, it must be replaced with a new **ID BAND** as soon as possible. Verify patient identification prior to applying new **ID BAND** by asking the patient/family member to state and spell (if needed) patient's name (first/last name) and date of birth and compare to information on new **ID BAND**. If patient unable to or family member is not available, ask a provider who has previously identified the patient to provide identity verification.

Programs or services that use alternate and acceptable identification processes such as **PHOTO ID** (see below procedure), include but are not limited to Mental Health Services and Oncology.

ALTERNATE and ACCEPTABLE IDENTIFICATION

Photo identification **PHOTO ID** or two other acceptable and unique forms of patient identifiers can be used in lieu of hospital identification bands.

Exceptions:

Patients going for procedures under general anesthetic
 Identical twins

Use of PHOTO ID

Upon admission create a photographic reference for identification using the following steps:

1. Obtain the patient or parent's verbal consent to take the photograph. Explain to the patient that you will be taking his or her photograph for identification and safety purposes. Explain that the photograph will remain a confidential and private part of his or her hospital chart.
2. Document the consent process in the patient chart.
3. Take a front face photograph using hospital designated equipment/digital camera and print it out in black/white or colour. Cell phone images are not acceptable.
4. Attach an identification sticker/patient ID label with patient's information on the photograph.
 - The patient's full name (last name, first name, middle name),
 - Provincial Health Number (PHN)
 - Medical Record Unit Number (MRN)
 - Date of birth
 - Gender
 - Barcode (contains the MRN) where applicable

5. Staff member taking the photo dates and initials label on photo to confirm identification of patient.
6. Verify that the correct information is paired with the correct photograph by asking the patient to state his/her name (first and last) and the correct spelling and his/her birth date and compare the information on the photograph.
7. The **PHOTO ID** will be located in an accessible location where it is easily found and used. For example, on the MAR; care plan book or attached to patient's IV pole or clipboard. (**PHOTO ID** card attached to ring for easy mounting to pole, clipboard or chart).
8. Any patient who leaves the unit for a procedure must have their **PHOTO ID** accompanied with them and/or must wear **ID BAND** whenever possible. Prior to performing any high risk activity, identify patient by comparing photo to the patient and the information on the label with the information on the original source of information.
9. **PHOTOID** label is compared to requisition or other label with patient information on it ("label to label"), such as MAR, order sheet, lab requisition, to verify the correct patient name and other unique identifier. This is generally the patient name and medical record number.
10. On discharge, the **PHOTO ID** is placed in the patient chart prior to discharge. In situations where the patient will be re-admitted for follow up treatment over a series of days or weeks, place the photo in a designated spot at the front desk and/or stored with patient blue card.

IMPORTANT NOTE: Defective **PHOTO ID** must be replaced as soon as possible. Photos must be retaken if the patient's appearance changes from original photo likeness. Verify patient identification prior to retaking photo by asking the patient/family member to state and spell (if needed) patient's name (first/last name) and date of birth. If patient unable to or family member is not available, ask a provider who has previously identified the patient to provide identity verification.

DOCUMENTATION

Document in patient health record if patient is unable to wear ID band based on exception criteria. Indicate reason and describe the method of identity verification used.

If the patient or family are unable/unavailable to verify identity, document the alternate method of identity verification in patient health record.

REFERENCES

Accreditation Canada. Standards: Mental Health Services

Accreditation Canada ROP Handbook. 2017.

BCCH Patient Identification Policy 2012.

Joint Commission on Accreditation of Healthcare Organizations, Hospital National Patient Safety Goals, 2012.

Same-Day Surgery, Specimen labeling still a major risk for ID errors, can lead to huge liability. 2011 Sep: Supplement: 1-2.