

INTERDISCIPLINARY CLINICAL Policy and Procedure

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Applies To:	Nova Scotia Health Authority Employees, Physicians, Learners, and Volunteers		

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PREAMBLE

1. This policy identifies how Nova Scotia Health Authority (NSHA) Health Care Providers use Person-Specific Client Identifiers to confirm Client identity prior to Clients receiving Services or Procedures intended for them. Failure to correctly identify Clients may result

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in adverse events, causing serious harm and distress to Clients, their families and the Health Care Provider providing their care.

POLICY STATEMENTS

1. Clients requiring Procedures or Services within the NSHA must have their identification verified using a minimum of two Person-Specific Client Identifiers.
2. A third identifier must be used in circumstances where identification may be challenging (e.g. when the Client has a common name or the same or similar name to another Client also being served in the same program or area or a Client is nonverbal).
3. All In-patient areas must use Identification (ID) Bands or ID Badges (exception: long term care or in an inpatient Mental Health and Addictions setting).
4. If the Client has an ID Band or ID Badge, it must be used for identification purposes.
5. Clients who are registered in other areas can be required to wear an ID Band or ID Badge (each program area must determine the standard in how they will ensure two Person-Specific Identifiers are verified).
6. If a Client is not known to the health system, and does not have a health record to compare against, their identity must be initially confirmed using three client identifiers against a government issued identification, if available.
 - 6.1. A new health record will need to be created.
7. Only a computer generated ID Band or ID Badge can be used (no hand written ID Bands/ ID Badges). If computers are not available, a handwritten ID Band or ID badge can be temporarily used but must be replaced with a computer generated one as soon as possible.

Note: For newborn babies, a handwritten band may be used if the computer generated band is too large for newborn to wear. A computer generated ID band can be placed on the bassinette but must only be used when comparing against the handwritten ID band found on the baby and cannot be used as the sole form of identification.
8. A Client's privacy must always be considered when verifying Client identification.
9. A Same Name Alert must be issued when two or more Clients with the same first and last name are admitted/cared for in the same unit, medical service or treatment area.
10. Laboratory specimens arriving in the laboratory without the Client present must have a second Person-Specific Client Identifier noted on the label in addition to the official name and date of birth.
11. When Clients and families are not able to confirm information verbally, other sources for confirmation of identification must be obtained (Refer to Person-Specific Client Identifier definition in Appendix A for a full list of acceptable forms of identifiers).

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12. Health Centre Photographs (for inpatient kardexes, ID Badges, care records) must be updated every year or when a Client's appearance has changed (e.g. Client's hair has grown significantly, Client has grown a beard, etc.).
13. Measurement of compliance of verifying two Person Specific Client Identifiers must be performed by each program area at least twice annually (Refer to Appendix C for Sample Audit Tool). This information will be used to inform quality improvement initiatives in that area.

Use of ID BADGES

14. The Health Care Provider must obtain verbal consent from the Client prior to providing the Client with an ID Badge to wear (refer to Appendix C).
15. A date of birth must **not** appear on an ID Badge.

Note: If a date of birth is found on an ID Badge, it must be removed from the badge prior to use.

16. Clients are responsible for placing badges on themselves. These must be placed on the right or left chest area (clearly visible to healthcare providers from a front view).

GUIDING PRINCIPLES AND VALUES

1. NSHA strives to:
 - 1.1. Ensure accurate Client identification is performed,
 - 1.2. Ensure Clients are provided with safe care,
 - 1.3. Minimize incidences that increase the risk of medical errors due to improper Client identification practices; these include, but are not limited to the following:
 - Inaccurate medication administration or blood transfusion
 - Adverse reactions to known allergens
 - Wrong-person diagnostic testing that leads to inaccurate diagnoses and/or treatments
 - Performing wrong-person services or procedures
 - Privacy/confidentiality breaches
 - Discharge of Clients to the wrong families/facilities
2. Use of an ID Band or ID Badge allows for quick and easy access to Person-Specific Client Identifiers, particularly in cases where urgent care/intervention is required.
3. ID Bands and ID Badges have been recognized as the "standard" for verifying two Person-Specific Client Identifiers.
4. Use of a standardized process for Client Identification promotes consistency, clarity and accountability in each program and service area.
5. Active identification processes are preferred for identification purposes. E.g. Using open ended questions such as, "what is your name?"

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6. Person and family centered care is an organization-wide priority. Engaging Clients, families and substitute decision makers in the Client identification process promotes patient safety and patient and family-centered care.
7. Clients may have difficulty or an inability to verify their identity accurately. It is important that processes are in place that allow for verification of identification that minimizes the need for Clients to provide this information independently.

PROCEDURE

1. Prior to any Service or Procedure, the Health Care Provider is responsible to:
 - 1.1. **Verify Client's identity** using two Person-Specific Client Identifiers against the health record or procedure/treatment requisition form.
 - 1.2. **If using an ID Band:**
 - 1.2.1. Initial the ID Band at the time it is initially placed on a Client and verified against the health record. This advises other Health Care Providers that it was verified when it was attached and who verified the identification.
 - 1.2.2. Place the ID Band on the Client's right or left wrist (ankle can be used if wrist is not available)
 - 1.3. **If using an ID Badge:**
 - 1.3.1. Instruct the Client to attach their ID Badge on the right or left upper chest (clearly visible from the front view).
 - 1.3.2. Ensure Client does not attach their ID Badge to anything other than the front of their person (e.g. not on foot boards of beds, above beds, on inanimate objects, etc.).
 - 1.4. **Replace the ID Band or ID Badge when a Client is transferred between inpatient units or health facilities.**
 - 1.5. **Replace any damaged or missing ID Bands or ID Badges**
 - 1.6. **Replace an ID Band or ID Badge that is removed** for a test or procedure as soon as the test or procedure is completed.
 - 1.7. **Instruct Clients** to not remove ID Bands/ID Badges until discharged.
 - 1.8. **If a Same Name Alert** has been identified:
 - 1.8.1. Place a Same Name Alert sticker or write the words "Name Alert" on the ID band or ID badge.
 - 1.8.2. Advise the Client they must not remove the sticker or notification until discharged.
 - 1.8.3. Place Same Name Alert notices on the:
 - Medication cabinet
 - Client's health record
 - Health record storage area
 - Client list locator board
 - All treatment requisitions
 - On or above the Client's bed
 - 1.8.4. Remove all Same Name Alert notices when the Client is discharged or transferred from the care area.

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2. For areas using Facial Recognition through a photograph as a Person-Specific Client Identifier, it is the responsibility of the Health Care Provider to:
 - 2.1. **Obtain Verbal Consent** from the Client to take the photograph (Refer to Appendix C for Script for obtaining Verbal Consent).
 - 2.2. **Take a photograph** on the first visit (if possible).
 - 2.2.1. Delete photograph from digital camera and computer drive as soon as the photo is printed/ attached to the electronic treatment record.
 - 2.3. **Confirm the Client's identity** at the time the photograph is taken, by two independent Health Care Providers and a witness before the photograph is labeled.
 - 2.4. **Clearly note on the back of the photograph** the Client's name and at least two other Person Specific Client Identifiers
 - 2.5. **Document the date and time** the photograph was taken on the back of the photograph.
 - 2.6. **Document in the Client's health record** that a photograph was taken for the purpose of Client identification.
 - 2.7. **Send the photograph to Health Information Services** for all ambulatory care areas at the end of the Client's encounter or when the Client is no longer followed under that program area.
3. If a Client's identity is unknown prior to admission or treatment and there is no family member or Reliable Source available to correctly verify the Client's identity, the Client must be issued a Uniquely Assigned Name and Medical Record Number (MRN) to provide interim identification until positive identification is made.
 - 3.1. If a Client is identified as unknown initially and subsequently becomes identified, all ID bands/badges must be changed to reflect the Client's real identity.
 - 3.2. Health Records must be alerted and advised so that the encounter information can be linked to this Client's medical record.

Note: All reconciliation of diagnostic tests, procedures, and cross matches of blood, etc. are to be completed before any changes to the record have been made.

4. If a Client does not have capacity or ability to confirm their identity, the Health Care Provider must verify two Person-Specific identifiers from a Reliable Source.

REFERENCES

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- World Health Organization (2007). Patient Identification. Patient Safety Solutions. <http://www.who.int/patientsafety/solutions/patientsafety/PS-Solution2.pdf>

APPENDIX A

Definitions

Client	Refers to all Clients, patients, residents and consumers-including veterans- within the Nova Scotia Health Authority.
Client's Official Name	<p>The name that appears on their birth certificate or passport. If these names are different, use the name that the Client identifies with as their official name.</p> <p>A provincial health card may not have a Client's Official Name on it and this is why two Person-Specific Identifiers are needed.</p>
Facial Recognition	<p>Direct observation of the Client matches the visual memory associated with the Client's Official Name. The Facial Recognition identification may occur when the Client is known to the individual providing care or may require that a family or Health Care Provider familiar with the Client confirms their identity. Facial Recognition is only appropriate in settings where there is a long term/continuing care relationship in which the team member is familiar with the Client. In most program areas, photographs are taken to assist Health Care Providers with Facial Recognition. If someone is working in the area that is not familiar with the Clients (e.g. student, new staff member), this identifier would not be appropriate to use and two other identifiers would need to be used.</p>
Health Care Provider	Health Care Provider includes employees, volunteers, physicians, and students.
Identification (ID) Badge	<p>An identification document created with the use of a computer generated label.</p> <ul style="list-style-type: none">• It must not be hand written.• It must contain at least two Person-Specific Client Identifiers (one of which can be a Facial Recognition).

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NOTE: (1) Date of Birth must **not** be included on an ID Badge. If this is located on the computer generated label, it must be removed or “blackened out” prior to using the ID Badge.

(2) Since Official Name and date of birth are considered the same identifier, two additional identifiers must be included on the badge.

Identification (ID) Band

An identification bracelet that includes Client’s full official name, date of birth, and Medical Record Number (MRN) or Health Card Number.

Medical Record Number (MRN)

Facility or program generated number for the Client’s medical chart, also referred to as a health record number (HRN).

Person-Specific Client Identifier(s)

At least two Person-Specific identifiers must be verified prior to all encounters within NSHA.

- Client’s Official Name and date of birth (Used together)
- Medical Records Number (MRN)
- Provincial Health Card Number (PHN)
- Government issued ID such as a passport number or driver’s license
- RCMP number (verified on the badge/card)
- Armed forces number (verified on the badge/card)
- Student visa number (verified on the badge/card)
- Work visa number (verified on the badge/card)
- Facial Recognition (*recommended to be used in areas where Clients are known to the area e.g. long term care, mental health and addictions, ambulatory care areas)
- Home address (only if verified by the Client and/or family; note that home address is the identifier that is most likely to change between visits)
- Reliable Source

NOTE: Room numbers and Client initials are **not** Person-Specific Client Identifiers

Procedure	An intervention, treatment and/or investigation. An ID Band/ID Badge is recommended but not required for identification purposes but can be used.
Reliable Source	A reliable source is anyone who may be accompanying the Client or is knowledgeable of who the client is. This may include, not limited to, Substitute Decision Maker, another Health Care Provider, RCMP/Police, or someone within the Client's circle of care.
Same Name Alert	<p>Process for alerting Health Care Providers when two (2) or more Clients with the same first and last name are admitted to the same unit, medical service, or treatment area.</p> <p>Same Name Alert stickers are placed on:</p> <ul style="list-style-type: none">• Medication cabinet• Client's health record• Health record storage area• Client list locator board• Client's individual ID Band• NSHA approved ID Badge• On or above the Client's bed
Service	<p>Any Client encounter or interaction with a health care provider is considered a service; confidential health care information is being shared. A service requires that two Person-Specific Identifiers are verified. Examples of Services that are not considered Procedures include: Consultations, assessments, education sessions with a Client, telehealth discussing a Client's care. An ID Band/ID Badge is not required for identification purposes but can be used.</p>
Uniquely Assigned Name	<p>If a Client's identity is unknown prior to admission or treatment and there is no family member or Reliable Source available to correctly verify the Client's identity, the Client must be issued a uniquely assigned name and medical record number (MRN) to provide interim identification until positive identification is made. Refer to facility specific policies for site specific unique names.</p>

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Verbal Consent

A verbal agreement between a Client and the organization. A consensual agreement is required before a photograph is taken for the purpose of Facial Recognition through a photograph.

APPENDIX B

SCRIPT FOR OBTAINING VERBAL CONSENT

1. Prior to creating a **Client ID Badge for the purpose of Facial Recognition**, the Health Care Provider must obtain verbal consent from the Client.

1.1. SCRIPT to obtain Verbal Consent:

My name is **X** and I work for the Nova Scotia Health Authority. As part of the Client Identification process, and to ensure patient safety, we would like to use an ID Badge. This ID Badge will include (Name, MRN/PHN, Photo) of you. You will need to attach it to your chest so that it is easily visible to staff/care providers. This badge is a way to help us identify you, particularly in an emergency situation. Wearing this badge is voluntary. If you do not wear this ID Badge, we will require you to bring photo identification with you and we will be asking you to verify who you are before every interaction we have with you. Are you ok with wearing an ID Badge during your encounter with us?

1.1.1. *If yes- Proceed with creating an ID badge*

1.1.2. *If no- Document the refusal in the health record and proceed with verifying ID with at least two Person-Specific Client Identifiers prior to each service and procedure.*

2. Prior to taking a **photograph of a Client for the purpose of Facial Recognition**, the Health Care Provider must obtain verbal consent from the Client.

2.1. SCRIPT to obtain Verbal Consent:

My name is **X** and I work for the Nova Scotia Health Authority. As part of the Client identification process, and to ensure patient safety, we use photographs as a way to help us identify you. Having your picture taken is voluntary. We assure you that we will only use your picture as a way to identify you for your care. We will keep your picture for **X** amount of time and the picture will be stored (*note where the picture will be kept*). If we do not take your picture, we will require you to bring photo identification with you and will be asking you to verify who you are before every interaction we have with you. Are you ok with me/us taking a picture of you for this process?

2.1.1. *If yes- Proceed and take the photograph*

2.1.2. *If no- Document the refusal in the health record and proceed with verifying ID with at least two Person-Specific Client Identifiers prior to each service and procedure.*

APPENDIX C Sample Audit Tool

Two Person-Specific Client Identifier Audit

Date: _____

Completed by: _____

Department/Unit: _____

In the grids below, each numbered column represents an individual Client. For each Client, record the identifiers used by placing checkmarks in the appropriate cell adjacent to the Person-Specific Client Identifier description.

Observations:

IDENTIFIER USED	1	2	3	4	5
Official Name <u>AND</u> Date of Birth					
Medical Records Number (MRN)					
Provincial Card Number (PCN)					
Government issued ID such as a passport number or driver's license					
RCMP Number, Armed Forces Number, Student Via Number, Work Visa Number					
Facial Recognition					
Home Address					
Other: Specify _____					

Plan for Follow Up:

[Replacing the Following District Health Authority Policies/Version History](#)

- AVH-215.005 Patient Identification
- CBDHA C-1-A-80 Radiation Oncology Patient Identification
- CBDHA A-3-060 Patient Identification
- CBDHA 3-B- 70 Patient Photos- Identification
- CH 30-040 Patient Identification and Same Name Alert
- CHA 101-012 Patient Identification and Same Name Alert
- GASHA 6-10 Admission and Identification of a Patient
- GASHA 2-10 Patient Identification
- NSCC SOP-SA.03.001: Patient Identification in RT Department
- SSH-AD-110-223 Patient Identification
- SWH- 600.126 Patient Identification Using Two Patient Identifiers
- SWH- 516.0 Patient Identification

Version History

(To Be Completed by the Policy Office)

Major Revisions (e.g. Standard 4 year review)	Minor Revisions (e.g. spelling correction, wording changes, etc.)
New to the NSHA 2017-10-02	

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