



# Policy & Procedure

<b>Policy Title:</b>	Patient Identification	
<b>Applies To:</b>	Team Members	
<b>Approved:</b>	<b>Effective:</b>	<b>Next Review:</b>
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	Senior Medical Director, Episodic & Integrated Acute Care Network	

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## PURPOSE

The purpose of this policy is to provide direction to Nova Scotia Health Team Members on confirming a Patient's identity prior to the Patient receiving Services or Procedures by using Person-Specific Patient Identifiers. Nova Scotia Health's responsibility to care for our patients continues beyond end of life. This policy is intended to enhance Patient safety and quality of care by decreasing the potential for Patient identification errors.

## POLICY STATEMENTS

1. Patients requiring Procedures or Services at Nova Scotia Health must have their identity verified using a minimum of two Person-Specific Patient Identifiers. At a minimum, identity must be verified at these specific points:
  - 1.1. Entry to care
  - 1.2. Each time a unique Health Care Provider begins an interaction with a unique Patient
  - 1.3. Transfer of care (for example: shift-to-shift, between HCPs, discharge)
  - 1.4. Between points of Episodic Care (for example: X-Ray, Operating Room, etc.)
  - 1.5. During safety rounds
  - 1.6. Before Patient remains are transferred from place of death
  - 1.7. Before Patient remains leave a Nova Scotia Health facility
2. A third identifier must be used in circumstances where identification may be challenging (for example: lab specimens without the Patient present, the Patient has a common name or the same or similar name to another Patient also being served in the same program or area, or the Patient is nonverbal.)
3. Facial Recognition is only appropriate in settings where there is a long-term, continuous relationship in which the Team Member is familiar with the Patient.
4. All inpatient areas must use Identification (ID) Bracelets or ID Badges (exceptions: Long Term Care and inpatient Mental Health and Addictions settings).
5. Patients who are registered in other areas may be required to wear an ID Bracelet or ID Badge.
  - 5.1. Each program area is responsible to determine the method of Person-Specific Identifier verification depending on the clinical context, including a method for Team Members to respect the Patient's Used Name and pronouns, even when different from the Legal Name and sex assigned at birth.
6. The Patient's Used Name and pronouns must be respected, even when different from the Legal Name and sex assigned at birth.

7. Nova Scotia Health Team Members must verify two Person-Specific Patient Identifiers from a Reliable Source if a Patient does not have capacity or ability to confirm their own identity.
  - 7.1. Exception is Patient remains, where two Nova Scotia Health care providers complete an independent double check to verify two-Person-Specific Patient Identification (at least one of the two HCPs must be an Employee and/or Physician).
8. If a Patient's identity is unknown prior to admission or treatment and there is no family member or Reliable Source available to correctly verify the Patient's identity, the Patient must be issued a Uniquely Assigned Name and Medical Record Number (MRN) to provide interim identification until positive identification is made.
9. All patient remains must have two unique identifiers attached on a single toe tag, wrist bracelet, or ankle bracelet before the remains are transferred from the place of death. The same two unique identifiers should also be present on a label attached to the zipper of the body containment bag before the remains are transferred from the place of death.
10. Only a computer-generated ID Bracelet or ID Badge can be used.
  - 10.1. Handwritten ID Bracelets or ID Badges are not permitted.

**Note:** If computers are not available, a handwritten ID Bracelet or ID badge can be temporarily used but must be replaced with a computer generated one as soon as possible.

**Exception:** For newborn babies, a handwritten ID Bracelet may be used if the computer-generated Bracelet is too large for newborn to wear. A computer-generated ID Bracelet can be placed on the bassinette but must only be used when comparing against the handwritten ID Bracelet found on the baby and cannot be used as the sole form of identification.

11. When verifying Patient identity:
  - 11.1. The Patient's privacy must always be considered and respected.
  - 11.2. The Patient's Used Name and pronouns must always be respected.
12. Nova Scotia Health systems may require input of a Patient's Legal Name which they do not use. Patients must always be verbally called by their Used Name, rather than the name on their documentation, if they are different.
13. A Same Name Alert must be issued when two or more Patients with the same Legal Name (first and last name) are admitted/cared for in the same unit, medical Service, or treatment area.
14. Laboratory specimens arriving in the laboratory without the Patient present must have a third Person-Specific Patient Identifier noted on the label in addition to the Patient's Legal Name and date of birth.
15. When Patients or Essential Care Partners are not able to confirm information verbally, other sources for confirmation of identification must be obtained (refer to the Person-Specific Patient Identifier definition for a full list of acceptable forms of identifiers.)

16. Facial Recognition photographs (such as, for inpatient kardexes, ID Badges, care records) must be updated every year or when a Patient's appearance has changed (for example: change in hair or facial hair, etc.)
17. Measurement of compliance of verifying two Person Specific Patient Identifiers must be performed by each program area at least twice annually (refer to [Appendix C: Sample Audit Tool](#)). This information will be used to inform quality improvement initiatives in that area.

### Use of ID Badges

1. The Health Care Provider must obtain Verbal Consent from the Patient prior to providing the Patient with an ID Badge to wear (refer to [Appendix B](#)).
2. The ID Badge must not be handwritten.
3. The ID Badge must contain at least two Person-Specific Patient Identifiers (one of which can be Facial Recognition.)
4. 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.

5. Patients are responsible for placing Badges on themselves, when possible. Badges must be placed on the right or left chest area (clearly visible to Health Care Providers from a front view.)

### PRINCIPLES AND VALUES

1. **Prevention of Harm:** Accurate Patient identification processes reduce the risk of harmful events or medical errors that may include, but are not limited to:
  - 1.1. Inaccurate medication administration or blood transfusion
  - 1.2. Adverse reactions to known allergens
  - 1.3. Performing wrong-person Services, Procedures, or investigations
  - 1.4. Privacy and/or confidentiality breaches
  - 1.5. Discharge or release of Patients or Patient remains to the wrong families, facilities, or Service
  - 1.6. Deadnaming and/or misgendering
2. **Effectiveness:** Use of an ID Bracelet or ID Badge allows for quick and easy access to Person-Specific Patient Identifiers, particularly in cases where urgent care or intervention is required.
3. **Consistency:** Use of a standardized process for Patient identification promotes consistency, clarity, and accountability in each program and Service area.

4. **Collaboration:** Before any consultation, investigation, Procedure, test, or intervention, active identification processes are preferred for identification purposes (for example: using open ended questions such as 'what is your name?'). Engaging Patients and families in the Patient identification process promotes Patient safety and Patient and family-centered care.
5. **Protection of Vulnerable Persons:** Patients may have difficulty or an inability to verify their identity accurately. It is important to have multiple methods of verifying Patient identity to accommodate all Patients.
6. **Respect for Privacy:** Sensitivity to the personal nature of Patient information is acknowledged and appropriately respected.
7. **Respect for autonomy:** Persons who have a preference to not wear an ID Badge or Bracelet must be offered alternative methods of verifying Patient identity.

## PROCEDURE

1. Each program/Service/unit is responsible to determine the method of Person-Specific Identifier verification depending on the clinical context, including a method to ensure Team Members respect the Patient's Used Name and pronouns, if different from Legal Name and sex assigned at birth.
2. **Prior to any** Service or Procedure, the Nova Scotia Health Team Member, as appropriate, is responsible to:
  - 2.1. Verify the Patient's identity using at least two Person-Specific Patient Identifiers against the health record or Procedure/treatment requisition form.
    - 2.1.1. Lab specimens require three Person-Specific Patient Identifiers.
    - 2.1.2. Verify two Person-Specific Patient Identifiers from a Reliable Source if Patient does not have capacity or ability to confirm two identifiers.
      - 2.1.2.1. Exception is patient remains, where two Nova Scotia Health care providers complete an independent double check to verify two-Person-Specific Patient Identification. (at least one of the two HCPs must be an Employee and/or Physician)
  - 2.2. If using an **ID Bracelet:**
    - 2.2.1. Initial the ID Bracelet at the time it is initially verified against the health record and placed on a Patient. This advises other Health Care Providers that it was verified when it was attached and who verified the identification.
    - 2.2.2. Place the ID Bracelet on the Patient's right or left wrist.
      - 2.2.2.1. Ankle can be used if wrist is not available.
  - 2.3. If using an **ID Badge:**

- 2.3.1. Instruct and assist the Patient as necessary to attach their ID Badge on the right or left upper chest (clearly visible from the front view.)
- 2.3.2. Ensure Patient does not attach their ID Badge to anything other than the front of their person (for example: not on foot boards of beds, above beds, on inanimate objects, etc.)
- 2.4. For Patients who are not required to wear an ID bracelet/badge for Services provided, refer to program area specific Procedures for identification standards.
- 2.5. Replace the ID Bracelet or ID Badge when a Patient is transferred between inpatient units or health facilities.
- 2.6. Replace any damaged or missing ID Bracelets or ID Badges.
- 2.7. Replace an ID Bracelet or ID Badge that is removed for a test or Procedure as soon as the test or Procedure is completed.
- 2.8. Instruct Patients to not remove ID Bracelets/ID Badges until discharged.
- 2.9. If a Same Name Alert has been identified:
  - 2.9.1. Place a Same Name Alert sticker or write the words "Name Alert" on the ID Bracelet or ID badge.
  - 2.9.2. Advise the Patient they may not remove the sticker or notification until discharged.
  - 2.9.3. Place Same Name Alert notices on all of, but not limited to, the following, as applicable:
    - Medication cabinet
    - Patient's health record
    - Health record storage area
    - Patient list locator board
    - Patient's individual ID Bracelet
    - Nova Scotia Health generated ID Badge
    - Requisitions
    - On or above the Patient's bed
  - 2.9.4. Remove all Same Name Alert notices when the Patient is discharged or transferred from the care area.
3. Patients may see the name that they do not use in some health record systems and communications due to the complexity of Nova Scotia Health's information systems and the inability of some systems to share information. Provide Patients with contact information for Health Information Services to discuss any concerns.

- 3.1. Refer to resources below if further information is required:
  - [PrideHealth Guide to Pronouns](#)
  - [Nova Scotia Health and IWK Health Pride Network's Meeting Diverse Patient Needs: Using Pronouns and Gender-Inclusive Language](#)
4. For areas using Facial Recognition through a photograph as a Person-Specific Patient Identifier, it is the responsibility of the Health Care Provider to:
  - 4.1. Obtain Verbal Consent from the Patient to take the photograph (Refer to [Appendix B](#) for a script for obtaining Verbal Consent.)
  - 4.2. Take a photograph on the first visit, if possible.
    - 4.2.1. Delete photograph from digital camera and computer drive as soon as the photo is printed and/or attached to the Patient health record (whether electronic or paper-based).
  - 4.3. Ensure identity is confirmed by two independent Health Care Providers and a witness at the time the photograph is taken, before the photograph is labeled.
  - 4.4. Clearly note on the back of the photograph the Patient's Legal and Used Name (as applicable) and at least two other Person-Specific Patient Identifiers.
  - 4.5. Document the date and time the photograph was taken on the back of the photograph.
  - 4.6. Document in the Patient's health record that a photograph was taken for the purpose of Patient identification.
  - 4.7. Ensure the photograph is sent to Health Information Services following transfer, discharge, or end of Service encounter.
    - 4.7.1. If the Patient returns to that unit or begins Services with another unit, another photograph should be taken.
5. When Patient identity is unknown, the Nova Scotia Health Team Member, as appropriate, is responsible to:
  - 5.1. Issue a Uniquely Assigned Name and Medical Record Number (MRN) when necessary.
  - 5.2. Change all Uniquely Assigned Name ID Bracelets/Badges to reflect the Patient's accurate identity if the Patient is accurately identified.
  - 5.3. Alert Health Information Services so that the encounter information can be linked to this Patient's health 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.

## REFERENCES

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WRHA Policy 110.060.040, Patient Identification in Diagnostic Imaging, April 2010

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## RELATED DOCUMENTS

### Policies

[Privacy and Confidentiality of Personal Health Information - Policy and Procedure - NSHA AD-AO-030](#)

[Respectful Workplace - Policy and Procedure - NSHA AD-HR-020](#)

### Other

[Pride Health Guide to Pronouns](#)

[Nova Scotia Health and IWK Health Pride Network's Meeting Diverse Patient Needs: Using Pronouns and Gender-Inclusive Language](#)

### Appendices

[Appendix A: Definitions](#)

[Appendix B: Script for Obtaining Verbal Consent](#)

[Appendix C: Sample Audit Tool](#)

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## Appendix A: Definitions

<b>Episodic Care</b>	A single encounter with an admitted patient focused on a presenting concern(s), identified medical condition(s), or referred consultation.
<b>Essential Care Partner</b>	A person who provides physical, psychological, or emotional support, as deemed important by the Patient. This care can include support in decision making, care coordination, and continuity of care. Essential Care Partners can include family members, close friends, or other caregivers and are identified by the Patient or substitute decision maker.
<b>Facial Recognition</b>	<p>Team Members' direct observation of the Patient that matches the visual memory associated with the Patient's name. Facial Recognition identification may occur when the Patient is known to the Team Member providing care or may require that a family member or Health Care Provider familiar with the Patient confirms their identity. Facial Recognition is only appropriate in settings where there is a long-term, continuous relationship in which the Team Member is familiar with the Patient. In most program areas, photographs are taken to assist Health Care Providers with Facial Recognition.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Note:</b> If someone is working in the area that is not familiar with the Patient (for example: student, new Team Member), this identifier would not be appropriate to use, and two other identifiers must be used instead.</p> </div>
<b>Health Care Provider</b>	Team Members who provide direct Patient care.
<b>Identification (ID) Badge</b>	A computer-generated label that is attached to the Patient's clothing, on the right or left upper chest.
<b>Identification (ID) Bracelet</b>	Normally worn on the wrist, includes Patient's Legal Name, date of birth, and Medical Record Number (MRN) or Health Card Number (HCN).
<b>Medical Record Number (MRN)</b>	Facility or program generated number for the Patient Health Record, also referred to as a health record number (HRN).
<b>Patient</b>	All individuals including clients, residents, and members of the public who receive or have requested health care or Services from Nova Scotia Health and its Health Care Providers.

<b>Patient's Legal Name</b>	<p>The name under which an individual is registered in a province or territory, or federally. For non-Canadian citizens, the Legal Name is the name under which they are registered in Canada and is found on their immigration documents.</p>
	<p><b>Note:</b> A provincial health card may have a name other than the Patient's Legal Name on it, which is why two Person-Specific Identifiers are needed.</p> <p>As per this policy, Team Members must use the name that the Patient uses when communicating with/about them. Team Members may need to input a name which the Patient does not use into the Nova Scotia Health registration systems.</p>
<b>Person-Specific Patient Identifier(s)</b>	<p>At least two Person-Specific identifiers, limited to the list below, must be verified prior to all Patient encounters within Nova Scotia Health:</p>
	<p><b>Note:</b> Room numbers and Patient initials are not Person-Specific Patient Identifiers.</p> <p>Passports and Social Insurance Numbers cannot be documented as Person-Specific Patient Identifiers.</p>
	<ul style="list-style-type: none"> <li>• Patient's Legal Name</li> <li>• Date of birth</li> <li>• Medical Records Number (MRN)</li> <li>• Health Card Number (HCN)</li> <li>• Provincial/Territorial government issued ID (e.g., driver's license)</li> <li>• RCMP number (verified on the badge/card)</li> <li>• Home address (only if verified by the Patient and/or Essential Care Partner)</li> <li>• Armed Forces number (verified on the badge/card)</li> <li>• Indigenous Status Card (verified on the badge/card)</li> <li>• Student visa number (verified on the badge/card)</li> <li>• Work visa number (verified on the badge/card)</li> <li>• Facial Recognition (*see definition above)</li> <li>• Reliable Source</li> </ul>

	<p><b>Note:</b> Home address is the identifier most likely to change between visits.</p>
<b>Procedure</b>	An intervention, treatment, and/or investigation, whether in-person or via virtual care. An ID Bracelet/ID Badge is recommended but not required for identification purposes.
<b>Reliable Source</b>	Anyone who may be accompanying the Patient or is knowledgeable about who the Patient is. This may include, but is not limited to, an Essential Care Partner, family member, substitute decision maker, another Health Care Provider, law enforcement agent, or someone within the Patient's circle of care.
<b>Same Name Alert</b>	<p>Process for alerting Health Care Providers when two or more Patients with the same Legal Name (first and last name) are admitted to the same unit, medical Service, or treatment area.</p> <p><b>Note:</b> See procedure document for appropriate placement of Same Name Alerts.</p>
<b>Service</b>	<p>Any Patient encounter or interaction with a Health Care Provider is considered a Service when confidential health care information is being shared. A Service requires that two Person-Specific Identifiers are verified. ID Bracelet/ID Badge are optional in these settings.</p> <p>Examples include, but are not limited to, consultations, assessments, virtual care, autopsy, and education sessions with individual Patients or groups.</p>
<b>Uniquely Assigned Name</b>	<p>Interim identification issued by Nova Scotia Health to a Patient who is unable to identify themselves, whose identity is unknown, and for whom there is no family member or Reliable Source available to verify the Patient's identity.</p> <p><b>Note:</b> Refer to site and registration application-specific processes for guidance on Uniquely Assigned Names.</p>
<b>Used Name</b>	May be different than the name under which an individual is registered in a province, territory, or federally, but is the name used by the Patient. Used Name must be respected and used during Patient interactions.
<b>Verbal Consent</b>	A verbal agreement between a Patient and the organization. Consent is required before a photograph is taken for the purpose of Facial Recognition using a photograph.

## Appendix B: Script for Obtaining Verbal Consent

1. Prior to creating a **Patient ID Badge for the purpose of Facial Recognition**, the Health Care Provider must obtain Verbal Consent from the Patient.
  - 1.1. SCRIPT to obtain Verbal Consent: My name is [*name*], my pronouns are [*pronouns*], and I work for Nova Scotia Health. As part of the Patient identification process, and to ensure Patient safety, we would like to use an ID Badge. This ID Badge will include (*Legal 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. Wearing this Badge is voluntary. Are you ok with wearing an ID Badge during your encounter with us?
  - 1.2. If yes: proceed with creating an ID Badge.
  - 1.3. If no: document the refusal in the health record and proceed with verifying identity with at least two Person-Specific Patient Identifiers prior to each Service and Procedure.
2. Prior to taking a **photograph of a Patient for the purpose of Facial Recognition**, the Health Care Provider must obtain Verbal Consent from the Patient.
  - 2.1. SCRIPT to obtain Verbal Consent: My name is [*name*], my pronouns are [*pronouns*], and I work for Nova Scotia Health. As part of the Patient identification process, and to ensure Patient safety, we use photographs to help us identify you. Having your picture taken is voluntary. We assure you that we will only use your picture to identify you for your care. We will keep your picture for [*length of time*] amount of time and the picture will be stored [*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 to take the photograph
    - 2.1.2. If no: document the refusal in the health record and proceed with verifying identity with at least two Person-Specific Patient Identifiers prior to each Service and Procedure.

### Appendix C: Sample Audit Tool

#### Two Person-Specific Patient Identifier Audit

Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

Department/Unit: \_\_\_\_\_

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

Observations:

Identifier Used	1	2	3	4	5
Legal Name					
Date of Birth					
Medical Records Number (MRN)					
Health Card Number (HCN)					
Provincial Government-issued ID (e.g., driver's license)					
Federal Government-issued ID (e.g., RCMP Number, Canadian Forces ID, Student/Work Visa Number)					
Facial Recognition					
Home Address					
Other: Specify					

Plan for follow-up:

## VERSION HISTORY

Version:	Effective:	Approved by:	What's changed:
Original	2017-10-02	Executive Leadership Team	N/A
Revised	2022-09-20	Clinical Operations Council	Updated based on new Accreditation standards
Revised	2024-04-16	Senior Director, Episodic & Integrated Acute Care Network Senior Medical Director, Episodic & Integrated Acute Care Network	Minor revision: <ul style="list-style-type: none"><li>○ Revisions to clarify inclusion of care of patient remains</li></ul>