

NTHSSA-WIDE POLICY	
Title: Client Identification	Policy Number: 10-01-V2
Applicable Domain: Hospital Based Clinical Services	
Additional Domain(s): Community Health Centre Clinical Services, Continuing Care Services, LAB, DI and Pharmacy Services, Oral Health Services, Practitioner Staff, Primary Care Services, Psychiatry, Mental Health and Addictions Services, and Public Health Services	
Effective Date: 13/06/2023	Next Review Date: 13/06/2026
Issuing Authority: NTHSSA CEO	Date Approved: 13/06/2023
Accreditation Canada Applicable Standard: <i>ROP: Client Identification</i>	

GUIDING PRINCIPLE:

There is a documented and coordinated approach for working in partnership with clients and families, ensuring at least two person-specific identifiers are used to confirm that clients, residents and patients receive the service or procedure intended for them.

PURPOSE/RATIONALE:

The Northwest Territories Health and Social Services Authority (NTHSSA) staff shall use at least two (2) person-specific identifiers to confirm that clients receive the service or procedure intended for them at every interface, including telephone consultations and virtual appointments, and before the issuing of confidential documents such as requisitions, or medical records.

Use of person-specific identifiers to confirm that clients receive the service or procedure intended for them can avoid harmful incidents such as privacy breaches, allergic reactions, discharge of clients to the wrong families, medication errors and wrong-person procedures.

1. The person-specific identifiers to be utilized depend on the population served and client preferences. Examples of person-specific identifiers include:
 - a. the client's full, legal name,
 - b. home address (when confirmed by client or family),

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- c. date of birth,
- d. health care number or
- e. an accurate photograph that includes client identifiers such as a drivers license, passport or other government issued photo identification.

DEFINITIONS:

NA

SCOPE/APPLICABILITY:

This policy applies to all NTHSSA staff. Compliance with this document is required of all members of the health care team including but not limited too nurses, practitioners, social workers, midwives, students, and volunteers; and other persons acting on behalf of NTHSSA, including contracted service providers as necessary.

PROCEDURE:

1. Client identification shall be confirmed at every interaction to ensure that clients received the service or procedure intended for them including in person services, telephone consultations or virtual appointments. Whenever possible, ensure client’s privacy is maintained prior to asking them to state their personal information aloud.
2. Client identification is done in partnership with clients and families by explaining the reason for this important safety practice.
3. Clients or their families shall be asked to state their name and date of birth whenever possible. Do not ask the client yes or no questions to obtain this information.
4. When clients and families are not able to provide this information, other resources of identifiers can include wristbands, health records, or government issued identification. Two identifiers may be taken from the same source.
5. The Northwest Territories Health and Social Services Authority (NTHSSA) has adopted The National Patient Safety Agency, Standardizing Hospital Wristbands-Safer Practice Notice Guidelines. In acute care in-patient settings, hospital arm bands are used and are to include the following information:
 - a. last name
 - b. first name
 - c. date of birth
 - d. health care number (if the health care number is not immediately available, a temporary number should be used until it is).

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Note: When utilizing arm bands for acute care services, staff should compare the information on the wristband to the information the patient states whenever possible.

6. In long-term care, continuing care settings where staff are familiar with these clients, one of the two person-specific identifiers can be facial recognition.
7. When completing newborn client identification, the parent/guardian/substitute decision-maker and a healthcare provider, or two healthcare providers are required to be present to confirm newborn client identification using two of the following:
 - a. newborn identification band on mother and infant
 - b. sex of the newborn and date of birth
 - c. sex of the newborn and hospital chart number.
8. In emergency situations, treatments and procedures will not be denied, facility specific unknown patient procedures shall be utilized until the client identity can be conformed using two client identifiers.

PERFORMANCE MEASURES:

At least two person-specific identifiers are used to confirm that clients receive the service or procedure intended for them, in partnership with clients and families.

RL6 incident reports will be monitored by area managers for incidents indicating non-compliance with this policy and procedure.

Staff onboarding records must include orientation and competency assessment to this policy and procedure. Area managers must ensure staff are appropriately trained and deemed competent before deployed to work independently.

Expected compliance is 100%

In acute care settings, 10 monthly chart audits are completed in each unit to assess compliance with patients wearing an armband.

CROSS-REFERENCES:

NA

ATTACHMENTS:

NA


REFERENCES:

World health Organization. (2007). Patient Identification. Patient Safety Solutions. www.who.int/patientsafety/solutions/patientsafety/PS-Solution2.pdf
[Newborn Identification: A National Patient Safety Initiative \(thesullivangroup.com\)](http://thesullivangroup.com/r3_17_newborn_identification_6_22_18_final.pdf)
[r3_17_newborn_identification_6_22_18_final.pdf \(jointcommission.org\)](http://jointcommission.org/r3_17_newborn_identification_6_22_18_final.pdf)

APPROVAL:

June 13, 2023

Date



NTHSSA Chief Executive Officer