



Team Name: Health Information	Reference Number: ORG.1410.PL.301
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Issue Date: March 11 2015	Subject: Client Identification
Review Date:	
Revision Date:	

SUBJECT:

Client Identification

PURPOSE:

Proper client identification is essential to ensure client safety, and is mandatory prior to any type of assessment, service (including client registration, intake, scheduling of appointments), treatment, medication or intervention to a client (including individual and group visits).

BOARD POLICY REFERENCE:

Executive Limitation (EL-2) Treatment of Clients

POLICY:

1. All health care providers in Southern Health-Santé Sud will positively identify all clients using two identifiers from approved sources prior to the provision of any assessment, service, treatment, medication or intervention.
2. A standardized approach to the use of client identifiers will be used throughout all services; however, different identifiers may be used in different program settings. The identifiers should be consistent within each program and not simply whatever the individual staff person wishes to use.
3. Approved **identifiers** include the following:
 - Name (first and last)
 - Date of Birth
 - Personal Health Information Number (PHIN) – 9 digit
 - Manitoba Health number – 6 digit
 - Address - municipal or civic (e.g. township/range; street number, box number)
 - Health Record Number
 - Direct facial recognition or familiarity
 - Voice recognition if no sensitive client personal health information needs to be shared or disclosed.

4. Approved **sources** include the following:
 - Wristband (contains two identifiers)
 - Manitoba Health Card or other government issued identification
 - Photograph (specific to photograph found on client record)
 - Self-identifying statements (if cognitively well)
 - Guardian or alternate decision maker
 - Demographic label
 - Photo identification
 - Birth certificate

Note: Facility room numbers are NOT acceptable identifiers

5. Facial recognition/familiarity is an acceptable identifier in situations where the health care provider has an established relationship with the client.
6. A double witness is used as a second identifier only if no other sources are available.
7. Formal verification of the client's identity **on initial contact** includes, but is not limited to:
 - 7.1. Asking the client for full legal name, date of birth, Personal Health Information Number (PHIN), address, phone number, name the client prefers to go by.
 - 7.2. Checking the information supplied by the client against formal identification documents such as Manitoba Health Card, Driver's License, Birth Certificate, Certificate of Indian Status Card, Manitoba Identification Card, Passport, Citizenship Card, Manitoba Liquor Control Commission Photo-Identification Card, Armed Forces Card, information in the client database
 - 7.2.1. If formal documentation is not available, other acceptable verification of identity can include a personal introduction from the referral source (Accreditation Canada January 8, 2009) or family member, and/or matching information supplied by the client to information contained in the referral and/or appointment letter.
 - 7.3. Recording accurate, verified identifying information on the client record.
 - 7.4. Client photographs may be placed in client records, in accordance with established protocols.
8. In situations where two client identifiers cannot be determined; provision of assessment, service, treatment, medication or intervention **is** delayed until positive identification can be made.

Note: In an emergency situation and if in the opinion of the attending physician/health care provider, delay in treatment would endanger the client's life, limb, or vital organ, positive identification can be delayed.
9. Where there is doubt of identity (e.g. 2 clients with similar/same names) a third identifier, date of birth will be confirmed. The client will provide the information, including saying the name of their birth month, while the staff verifies the information against the client's record.
10. In programs where provincial policies exist for client identification, Southern Health-Santé Sud staff will adhere to these policies as long as a minimum of two identifiers are used (e.g. Cancer Care Manitoba (CCMB), Manitoba Renal Program (MRP), Diagnostic Services of Manitoba (DSM)).
11. When asking for client identifiers prior to provision of service where misidentification poses a risk of harm, staff will explain to the client that the request is necessary to prevent risk and/or to ensure privacy.

DEFINITIONS:

Alternate Decision Maker: An individual who has decision making capacity and is willing to make decisions on behalf of a client who does not have the capacity to make a decision. An alternate may be legally authorized (e.g. health care proxy or committee) or may be a person designated (e.g. family member) in the absence of a legally authorized individual.

Client: Any individual that is the recipient of healthcare services. Client may be used interchangeably with resident (in personal care homes) and patient (in acute care or transitional care centres).

Double Witnessing: A double witness process involves two health care providers to independently verify the identity of the client by clearly identifying the client.

Established Relationship: A relationship is established when the same staff member has provided service to a client on 3 or more occasions in a 6 week period. Where an interval of 3 months passes between a staff member providing service to the client, that staff member shall follow the same process as for meeting the client for the first time.

Facial Recognition: What you observe matches the visual memory associated with the name and the client is identified as previously known.

Family Unit: A social unit of individuals as defined by the mother of the newborn.

Guardian: The parent of a minor, or a person appointed guardian of a minor by a court of competent jurisdiction.

A mature minor is defined as someone who has the capacity to fully appreciate the nature and consequences of a proposed health treatment, and is capable of giving informed consent. It is not based on age, but on the capacity to understand.

Health Care Provider: Refers to all employees (including contracted individuals, students, fee-for-service physicians and volunteers) of Southern Health-Santé Sud who provide direct care or indirect non-contact care as a result of the duties/tasks of their position. A Health Care Provider spans the continuum of services/care that a client may receive from a Southern Health-Santé Sud facility or program.

Health Record Number (HRN) band: The band is labeled with the infant's health record information (surname, sex, health record number, primary physician). The HRN band is attached to the infant's limb upon receipt of their admission forms.

Identifiers: Refers to the person-specific items of information, by which the client can be distinguished from others, not the source of the information or the medium on which it resides (e.g. wrist bands are not identifiers). The two client identifiers must be directly associated with the individual and the same two identifiers must be directly associated with the medications, blood products, specimen containers (such as on an attached label), other treatments or procedures. (The Joint Commission 2008)

Examples include: stated name matching the name on the chart or medication, etc.; date of birth on identification matches date of birth on chart. Visual recognition of a known client, or matched to a photograph on the client record may be one identifier.

Quadruple Identification Band Set (QBS): A set of four (4) clear plastic identification bands with identical numbers on each band. The bands are applied at the time of delivery and are attached as follows:

- 2 short bands for the newborn (one for wrist and one for opposite ankle)
- 1 long band for the mother
- 1 long band for the support person.

The band information includes mother's surname, given name and MB Health number, date and time of birth, sex of the baby, name of mother's attending physician.

Source: Method of gathering information that is specific to the client.

Support Person (as per **Identification of the Newborn/Neonate and the Family Unit**): A person as designated by the mother.

Telephone Healthcare – An interaction that occurs over the telephone, between the caller/client or family member and a health care professional in ambulatory care and community settings. It includes assessing and prioritizing health and/or psycho-social issues, and results in making safe, effective and appropriate recommendations within that limited interaction.

Unidentifiable Client: Individual entering a facility who is unable or unwilling to provide any self-identifying information, either verbally or written.

PROCEDURE:

Acute Care

1. Prior to the provision of assessment, service, treatment, medication or intervention to a client, the health care provider will use at least two (2) client identifiers to ensure service provision to the correct client.
2. All clients shall have an identification wristband applied as soon as possible for inpatient and outpatient care. This wristband shall remain in place for the entire time period that the client remains in the facility.
3. All wristbands will contain at a minimum, two client identifiers from the identifiers list above.
4. The client's identification wristband will be the primary source prior to providing assessment, service, treatment, medication or intervention.
5. The client will be asked to self-identify their name as a second identifier.
6. Where a client is unable to self-identify and is accompanied by a family member, the family member will state the name of the client.
7. Where there is doubt of identity (e.g. 2 clients with similar/same names) a third identifier, date of birth will be confirmed. The client will provide the information, including saying the name of their birth month, while the staff verifies the information against the client's record.
8. In an emergency situation and if in the opinion of the attending physician/health care provider, delay in treatment would endanger the client's life; limb, or vital organ, positive identification can be delayed.
9. An unidentified client registered/admitted through the emergency department will be issued temporary, unique identifiers until positive identification is made. Where the identity of the client is unknown, the wristband listing "Unknown, Unknown" and Health Record Number (HRN) will be used as identifiers. If there is more than one unknown client, use Unknown1, Unknown1, etc.

Identification of the Newborn/Neonate and the Family Unit

1. The nurse completes the QBS bands including:

- Mother's name
- Sex
- Date of birth
- Time of birth
- MHSC number
- Care Provider

One QBS is used for each newborn in a multiple birth. The mother and support person will have as many bands as they have newborns. Handwrite A, B, C, etc. on the appropriate multiple bands.

2. *On admission of the mother*, the nurse compares the QBS band numbers and the mother's information with the mother (preferably) and/or support person by showing them the matching numbers on the bands and reading aloud to them the numbers and the spelling of the mother's given and surname.

2.1 Mother and/or support person verify the accuracy of the information and record and sign their verification in the Integrated Progress Notes (IPN).

2.2 If the mother and/or Support person is unable to verify the accuracy of the QBS band information, verify the accuracy of the QBS band information with a second nurse. Verification of the QBS band information is documented in the IPN with both nurses' signatures.

2.3 *After delivery* and prior to applying the QBS bands, the nurse checks the QBS band numbers with the mother and/or Support person. If the mother and/or Support person is unable to verify the accuracy of the information, verify the accuracy of the QBS band information with a second nurse. Verification of the QBS band information is documented in the IPN with both nurses' signature.

3. The circulating nurse attending the delivery records the QBS band number on the obstetrical record and the Newborn Care Map.

4. **QBS bands are applied to the mother and newborn at the time of delivery** and before the newborn leaves the room in which the delivery took place, or before the newborn leaves the room where immediate post delivery management occurred (e.g. High-Risk Infant Resuscitation/Management Room). If the support person is in attendance at the birth, the support person QBS band is applied at this time.

4.1 In emergency situations, bands are applied by nursing staff as soon as possible.

4.2 If not in attendance at delivery, the support person's band will be retained in the mother's chart, stapled to the Physician's Order Sheet, until the support person is available. The band is applied by a nurse to the support person's wrist with the mother in attendance. Before application of the support person's QBS band, check to ensure the mother's QBS band matches the support person's band. Document the name of the support person in the mother's health record on the Birth Summary form next to the QBS band identification number.

4.3 If there is no designated support person identified by the mother, the extra QBS band will be destroyed by cutting it up with scissors and putting all the pieces in the confidential waste container.

5. The nurse checks for the presence of the QBS band on the mother and newborn once a shift and documents the check on the Newborn Care Map.

6. The nurse instructs the mother and support person to wear their QBS bands until the newborn has been discharged.

7. **In any instance where replacement QBS bands are applied**, the nurse checks the newly recorded information on the bands as in #1. The nurse documents on the IPN that the number on all 4 bands has been checked and changed, including who prepared the replacement bands, the reason for replacement and the date and time of placement of the QBS bands on mother and documentation shall include the old and new band numbers.
 - 7.1 **Mother is an inpatient**
Documentation on the IPN in both the mother's and newborn's health record
 - 7.2 **Mother is not an inpatient**
Documentation on the IPN in the infant's health record
8. **Identification bands for Newborns/Neonates born outside the facility**
 - 8.1 **Quadruple Band Set**
When newborns/neonates born outside the facility are admitted to the facility with the mother, the receiving nurse and ambulance attendant will identify the newborn/neonate, verify the mother's information and check this information with mother/support person as in Number 1 (under **Identification of the Newborn/Neonate and the Family Unit**). The bands shall be applied to the family unit as soon as possible.
9. **Newborns/Neonates of a mother readmitted**
 - 9.1 When an infant is re-admitted with the mother, the infant will have the 2 QBS bands applied and verified as in Number 1 (under **Identification of the Newborn/Neonate and the Family Unit**).
 - 9.2 If an infant is not admitted but is visiting with the mother for a prolonged time period, the QBS band with mother's identification information is applied to the infant to establish their identify and prevent error with inpatient newborns.
10. All newborns shall have 2 QBS bands and 1 with HRN identification number but at minimum have 1 QBS and 1 HRN ID band or 2 QBS.
11. A newborn is **NOT** to leave the patient care area without a QBS band and/or HRN band present on a limb.
12. Newborns are only released to Southern Health-Santé Sud personnel wearing Southern Health-Santé Sud photographic identification or the mother or support person wearing a QBS band matching the newborn's band.
 - 12.1 The QBS band of the mother/support person is compared with the QBS of the infant prior to, and every time, the infant is given to the mother/support person.
13. On discharge, it is the responsibility of the nurse caring for the newborn to verify the QBS bands on newborn, mother, and/or support person are identical and to document the QBS band number on the infant's health record.
 - 13.1 On discharge from a postpartum unit, the signature of the mother/support person is required in the Newborn Care Map. The signature verifies the QBS band numbers on the newborn match the band of the mother/support person.
 - 13.2 On discharge to the care of Child and Family Services (CFS), the nurse checks the CFS worker's photographic identification, photocopy is added to Newborn Health Record and documents the worker's name on the newborn's care map, along with a statement indicating photo identification was presented and verified before release of the newborn/neonate to the care of CFS.

Personal Care Home (PCH) and Transitional Care

1. Prior to the provision of service, treatment, medication or intervention to a client, the health care provider will use at least two (2) client identifiers to ensure service provision to the correct client.
2. Where the client has consented, a photo of the client will be placed adjacent to the Medication Administration Record (MAR) and on the Integrated Care Plan. The photo will serve as the primary source.
3. Photos shall be updated annually or when significant change in physical appearance occurs. The photo must be clearly dated and re-assessed during the quarterly resident care review.
4. The health care provider will use a second client identifier prior to the provision of assessment, service, treatment, medication or intervention.
5. Where a client is unable to self-identify and is accompanied by a family member, the family member will verify the name of the client. Staff may use facial recognition as a second identifier, after the relationship is established.
6. Where there is doubt of identify (e.g. 2 clients with similar/same names) a third identifier, date of birth will be confirmed. The client will provide the information, including saying the name of their birth month, while the staff verifies the information against the client's record.
7. In an emergency situation and if in the opinion of the attending physician/health care provider, delay in treatment would endanger the client's life; limb, or vital organ, positive identification can be delayed.

Ambulatory Care (Chemo, Dialysis, Diagnostics, Rehab Services)

1. Prior to the provision of assessment, service, treatment, medication or intervention to a client, the health care provider will use at least two (2) client identifiers to ensure service provision to the correct client.
2. All clients will be identified using two identifiers from the approved sources list according to this policy or provincial program specific policies (e.g. CCMB, MRP, DSM).
3. Providing telephone health care poses risks for client identification and should be treated the same as face-to-face encounters, requiring 2 client identifiers.
 - 3.1. If initial contact with a client is made via the telephone, the verification procedure is the same as the formal verification of the client's identity **on initial contact** (see # 7 in policy section).
 - 3.2. In situations of continuing one-to-one service provision, where the staff 'know' the individual, voice recognition may serve as one identifier **if no** client health information needs to be shared or disclosed.
 - 3.3. In situations where client health information needs to be shared with the client, or verbal consent to disclose client health information needs to be obtained, 2 client identifiers other than voice recognition are required.
 - 3.4. Whenever client information is shared with the client or disclosed to others, or verbal consent to disclose information is obtained during telephone conversations, the two client identifiers used should be noted as part of the regular documentation of the episode of service.

Emergency Medical Services (EMS)

1. Prior to the provision of assessment, service, treatment, medication or intervention to a client, the health care provider will use at least two (2) client identifiers to ensure service provision to the correct client.
2. Approved **sources** include the following:
 - Wristband (contains two identifiers)
 - Manitoba Health Card or other government issued identification
 - Photograph (specific to photograph found on client record)
 - Self-identifying statements (if cognitively well)
 - Guardian or alternate decision maker
 - Demographic label
 - Photo identification
 - Birth certificate
3. Where there is doubt of identity (e.g. 2 clients with similar/same names) a third identifier, date of birth will be confirmed. The client will provide the information, including saying the name of their birth month, while the staff verifies the information against the client's record.

Community (Palliative, Public Health, Community Mental Health, Primary Health Care, Home Care, Rehab Services)

1. Prior to the provision of assessment, service, treatment, medication or intervention to a client, the health care provider will use at least two (2) client identifiers to ensure service provision to the correct client.
2. At every client visit the health care provider will use two of the following to identify the client:
 - 2.1. Self-identifying statements including name and date of birth
 - 2.2. Greet the client by name and observe the response
 - 2.3. Facial recognition/familiarity – may be used as one of the identifiers once staff has provided service to the client **a minimum of 3 times or more in a 6 week period**, which establishes a relationship
 - 2.4. Verify name and address/location with the client and/or client care plan
 - 2.5. Verification of client by photo identification
 - 2.6. Verification of client by family member/caregiver
3. Where there is doubt of identity (e.g. 2 clients with similar/same names) a third identifier, date of birth will be confirmed. The client will provide the information, including saying the name of their birth month, while the staff verifies the information against the client's record.
4. Providing telephone health care poses risks for client identification and should be treated the same as face-to-face encounters, requiring 2 client identifiers.
 - 4.1. If initial contact with a client is made via the telephone, the verification procedure is the same as the formal verification of the client's identity **on initial contact** (see # 7 in policy section).
 - 4.2. In situations of continuing one-to-one service provision, where the staff 'know' the individual, voice recognition may serve as one identifier if no client health information needs to be shared or disclosed.
 - 4.3. In situations where client health information needs to be shared with the client, or verbal consent to disclose client health information needs to be obtained, 2 client identifiers other than voice recognition are required.
 - 4.4. Whenever client information is shared with the client or disclosed to others, or verbal consent to disclose information is obtained during telephone conversations, the two client identifiers used should be noted as part of the regular documentation of the episode of service, in the Progress Notes.

5. **Mental Health**

- 5.1 Mental Health Crisis Response Teams may encounter Unidentifiable Clients during telephone triage. If the identity of the client is unknown, the staff/team will make every effort to establish identity; however, due to the nature of the work, individual judgment must be used and an effort made to develop a relationship in which the client provides the required identifiers.

6 **Home Care**

- 6.1 The Home Care Case Coordinator and/or Direct Service Nurse shall complete the initial formal verification of client identity.
- 6.2 Home Care will provide identifying information for all clients. This will include the client's full name, Personal Health Information Number, current address and birth date which will be used by all Home Care staff to assist in verifying the client's identity. This information shall be located on the client care plan and nursing service request form and will be located in the client files.
- 6.3 If staff are unable to identify a client using the above named client identifiers, the staff member shall contact their supervisor for further direction prior to providing service. The Supervisor shall:
 - 6.3.1 Advise the caller to delay service until identification can be verified
 - 6.3.2 Clarify nature of the discrepancy
 - 6.3.3 Verify the client information in Procura.
 - 6.3.4 If discrepancy still exists, contact family or support person
 - 6.3.5 Provide direction to Direct Service Staff
 - 6.3.6 Document and follow-up
- 6.4 Where Standard Guideline cannot be met, an individualized plan shall be developed, documented and communicated to all staff involved in the provision of care.
- 6.5 **The Case Coordinator shall:**
 - 6.5.1 Prior to the visit, confirm the client's first and last name and address/service location with client/family over the telephone when arranging the intake/admission visit.
 - 6.5.2 At the intake/admission visit:
 - 6.5.2.1 Ask the client their first and last name and date of birth.
 - 6.5.2.2 Confirm the address/location where the service will be provided.
 - 6.5.2.3 Review Manitoba Health Card to confirm the client's full name, address and birth date.
 - 6.5.2.4 Clarify discrepancies between information on Manitoba Health Card and information provided by client.
 - 6.5.2.5 Make the client aware of 2 client identification guidelines.

6.6 **Home Care Treatment Clinic:**

- 6.6.1 At the intake/admission visit:
 - 6.6.1.1 Ask the client their first and last name and date of birth
 - 6.6.1.2 Confirm client address
 - 6.6.1.3 Review Manitoba Health Card to confirm the client's full name, address and birth date.
 - 6.6.1.4 Clarify discrepancies between information on Manitoba Health Card and information provided by client.

IMPORTANT POINTS TO CONSIDER:

- Client photos must be dated and updated as needed or minimally once a year.
- Client identification is not limited to two identifiers. When in doubt as to the client's identity an additional identifier should be used.
- If using date of birth as an identifier, ask the client to provide the name of their birth month, e.g. (January), then day, followed by year.

SUPPORTING DOCUMENTS

[ORG.1410.PL.301.SD.01](#) Poster - Notification of reason for verification

REFERENCES:

Accreditation Canada, Required Organizational Practices Handbook. Jan 2014.

Central RHA, Two Client Identifiers, AD 138.00. Sept 2010.

South Eastman Client Identifiers RM-1 February 2011

Prairie Mountain Health Client Identification July 2014

WRHA, Home Care Client Identity Verification Guidelines. April 2011.

WRHA Community Mental Health Program Practice Guidelines November 2011

WRHA Adult Mental Health Regional Program Practice Guideline June 2012

WRHA Emergency Program Practice Guidelines Sept 2011

WRHA Home Care Guidelines April 2011

WRHA Primary Care Operational Guideline

The Joint Commission. Electronically retrieved Jan 22, 2014

http://www.jointcommission.org/mobile/standards_information/jcfaqdetails.aspx?StandardsFAQId=145&StandardsFAQChapterId=77