

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

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| SECTION I: | PATIENT FOCUSED FUNCTIONS |
| CHAPTER 2: | Provision of Care, Treatment and Services |
| PROCEDURE 2.35: | Patients Identification |
| REVISED: | 04/13/09; 09/28/09, 4/1/13; 7/25/16; 02/18 |
| Governing Body Approval: | 04/25/13; 07/28/16; 04/18 |

PURPOSE: Connecticut Valley Hospital (CVH) has established a procedure to ensure correct identification of patients prior to the performance of all medical and treatment procedures.

SCOPE: All CVH staff

POLICY:

In order to improve the accuracy of patient identification at critical junctions in a patient's hospital stay and to improve the effectiveness of communication among caregivers, CVH has implemented a patient identification system in an effort to reduce patient related errors requiring that two different identifiers are utilized when providing care, treatment, or services to the patient.

PROCEDURE:

I. Methods of Identification

- A. At the time of admission, the designated staff person creates a digital image (photograph) of the patient. A second identifier is asking the patient his/her name. If a patient refuses to have his/her picture taken, a third acceptable alternative is to ask the patient his/her date of birth. If the patient is unable to state name and/or date of birth, two staff who know the individual shall identify the patient.
- B. Throughout the hospital **whenever** medication is administered, vital signs and accu-checks are taken, or diagnostic and laboratory studies are obtained, diet trays are served, hospital staff will identify the correct patient by using the two forms of identification as described above.
- C. Dietary Services generates printed meal tickets for all patients receiving diet trays. *The paper tickets contain two patient identifiers, including patient name and date of birth.*
- D. The patient digital photographs created in GPD is stored in a secured limited access file on the hospital network. In the ASD Rehabilitation Units, photographs are not stored, but are removed from the database immediately after the pictures are produced.
- E. Hospital staff produces two pictures of the patient. One is placed in the medication kardex and the other is placed in the medical record. Anywhere else where patients who

are supervised by the Psychiatric Security Review Board (PSRB) are treated, hospital staff produces an additional picture for the identification packets on those patients.

- F. The CVH Police produce picture identification cards for patients who participate in activities in Page Hall Treatment Mall and for patients who have grounds privileges. The picture identification card contains the patient's picture, full name, and date of birth and MPI number.
- G. Picture identification cards are provided for designated patients in the General Psychiatry Division (GPD).
- H. Hospital staff are not authorized to produce additional images (without the patient's permission), except for use in an emergency, i.e., Elopement, unconsciousness, and serious injury.
- I. Unit treatment staff informs the admission hospital staff, medical records and/or police when a patient is discharged.
- M. On the unit, nursing staff ensure that the patient's picture is filed with the record at the time of discharge. All other copies of the patient's picture are destroyed.
- N. Annually, at the Treatment Planning meeting, treatment staff evaluates the patient's picture. If the picture does not resemble the patient any longer, staff arranges to have the patient's picture retaken and replaced in the kardex, Medical Record, picture identification cards, and/or other places the photo is required.

II. Patient Education

- A. At the time of admission and annually, the patient identification system is explained to the patient, the rationale for the hospital's system of identification, the patient's role in cooperating with the system, the circumstances under which such identifiers are utilized and how the hospital disposes of such identifiers when the patient is discharged.
 - 1. Will be used for identification purposes only;
 - 2. Will not be released without written authorization, except in cases where mandated by law, and to emergency personnel;
 - 3. Following discharge, the photo will be maintained with their medical record per the State of Connecticut retention requirements, and
 - 4. Following discharge, the digitalized image will be deleted from the respective dedicated computer (General Psychiatry Division).