WHO AM I?

Mary P. Mc Nicholl,
Haemovigilance Practitioner
Positive Patient Identification

- Basic patient safety skill.
- Prevents a host of potentially catastrophic patient outcomes.
- Must involve patient unless unable to identify him / herself (in this case, involve family member/carer).

**BUT:-**

- Is an activity that is performed frequently & can often be seen as a relatively unimportant task.
Who Am I?

Alexander Browne

Alex Browne

Sandy Browne

John Alexander Browne

Alex Brown

Sandy Brown

Western Health and Social Care Trust
<table>
<thead>
<tr>
<th>Admissions Officer</th>
<th>What patient is really thinking …</th>
<th>Patient response</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is your name?</td>
<td>Is she asking me my name? I really do not care what they call me, I feel so unwell, I wish this pain would ease …</td>
<td>John Browne</td>
</tr>
<tr>
<td>Did you say John Brown?</td>
<td></td>
<td>Yes…</td>
</tr>
<tr>
<td>Is your date of birth 31.10.43?</td>
<td>Is she asking me my date of birth? What did she say? … I did not hear her very well … too sore to care … I will just agree …</td>
<td>Yes…</td>
</tr>
<tr>
<td>Staff member taking pre-transfusion sample</td>
<td>What patient is really thinking ...</td>
<td>Patient response</td>
</tr>
<tr>
<td>------------------------------------------</td>
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</tr>
<tr>
<td>Is your name John Brown?</td>
<td>Is he asking me my name? I really do not care what they call me, I feel so tired ...</td>
<td>Yes...</td>
</tr>
<tr>
<td>Is your date of birth 31.10.43?</td>
<td>Is he asking me my date of birth? What did he say ... I did not hear him very well ... too tired too care ... I will just agree ...</td>
<td>Yes...</td>
</tr>
</tbody>
</table>
Blood Bank contact Clinical Area to confirm patient’s official first name & spelling of surname.

Clinical Area inform Blood Bank that patient is Alexander John Browne.

Sample rejected.
Impact of sample / form labelling errors

- Substantial time & effort for Blood Bank & Clinical Staff to investigate & safely resolve issues.
- Patients having to undergo a second venepuncture.
- Resource issues when staff have to repeat task.
- Potential delay in getting compatible blood for patient in emergency situation.
Extent of problem with patient not being correctly identified

- 26 patients (approx 9 per month) – patient details on Admissions system different from Laboratory system (which were confirmed as correct by Clinical Area).

Discrepancy Details

- Incorrect first name: 58%
- Incorrect spelling of first name: 15%
- Incorrect date of birth: 4%
- Incorrect spelling of surname: 23%
What is the evidence to support correct positive patient identification?

- 62% of serious transfusion incidents were caused by human error, often due to misidentification of patient at sampling or at time of transfusion (SHOT, 2013).

- At each step of the transfusion process & every other intervention in medicine, identification of right patient is absolutely essential (SHOT, 2013).

- Systems should be designed to include prompts and defaults where these will contribute to safe and effective care, and to accurate recording of information on first entry (Francis Report, 2013).

- Need for all HSC staff to be aware of the importance of patient verification processes at every stage of care (Public Health Agency, 2015 – SAIs relating to misidentification of patients).

Appears to be lack of specific information for staff on how to ‘Positively’ identify the patient.
Addressing the problem of poor patient identification

- Development of safety routines for common tasks (e.g. patient identification) provides powerful defence against simple mistakes that may progress and cause harm.
- WHSCT Hospital Transfusion Team (HTT) developed ‘Who Am I?’ flowchart to inform staff how to undertake positive patient identification check prior to obtaining a pre-transfusion sample.
Patient Identification
prior to obtaining a Pretransfusion Sample

Who am I?

I am alert, orientated & able to communicate with you

Ask me (using open ended questions):
- What is my official first name as it appears on my birth certificate?
- How do I spell my name?
- What is my surname, how do I spell my surname?
- What is my date of birth?

These details and my unique identification number must correspond exactly with details on my wristband, pretransfusion sample & request form.

I am unable to tell you who I am

Next of kin or carer available

Ask my next of kin or carer to confirm (using open ended questions):
- What is my official first name as it appears on my birth certificate?
- How do I spell my name?
- What is my surname, how do I spell my surname?
- What is my date of birth?

Details on my wristband will be Unique Identification Number and Gender
These details must correspond exactly with details on my pretransfusion sample and request form.

Next of kin or carer not available

Two members of staff must confirm that my first name, surname, date of birth and unique identification number on my wristband corresponds exactly with my casenotes, pretransfusion sample and request form.

As soon as my identification details are available and I am stable, i.e., NOT in middle of surgery/transfusion, I need a new wristband with my official first name, surname, date of birth, and unique identification number. Inform Blood Bank so that results can be matched to me. If I need another transfusion, repeat my sample.

If I am not wearing an accurately labelled wristband, do not take a pretransfusion sample from me.

If emergency situation and there is a discrepancy with my identification details, do not take a pretransfusion sample; use emergency uncrossmatched 0 negative blood until discrepancy resolved.
Reaudit - Pre-transfusion samples rejected due to patient details discrepancy

ALTNAGELVIN BLOOD BANK

2014 = 26 (9 patients/month)
2015 = 38 (9 patients/month)
Moving forward

- Discussion with Admissions Office Managers regarding how patients are identified when admitted to hospital.

- SODD (Standards of Demographic Details) guidelines do not mention need for open ended questions when obtaining patient details.

- ‘Who Am I?’ flowchart being revised to be used by staff involved in registering patients onto computer systems.
Recommendations to improve practice

- Correct patient identification - core clinical skill & must be given formal consideration by GMC & NMC (SHOT, 2011).
- Actively involve patient (where possible) - use open ended questions - when asking patients to state their first name (official name), surname & date of birth.
- Each staff member should take own responsibility for patient identification – should not rely on steps taken before or after (SHOT, 2012).
- Patients are often keen to be helpful & answer ‘Yes’ without paying full attention or may be hard of hearing (Davidson & Bolton-Maggs, 2014).

Staff member can inform the patient they must ask their name etc to make sure the sample is labelled correctly - not because they do not know who patient is!
Remember ... Who am I?

Ask me and I can tell you but .... do not forget to get me to tell you:-

• My official first name & how I spell my first name.
• My surname & how I spell my surname.
• My date of birth.

It is important to follow procedure even though it can be quite prescriptive - evidence demonstrates that when we disregard procedure, errors occur.