Patient Identification Audit Tools Definitions

The following definitions and examples apply to the key areas in the Patient Identification (PI) Audit Tools i.e.:

1. Identification Bands
2. Surgical Safety Checklist
3. Perioperative Patient Record
4. Procedure Informed Consent Form

1. Identification Bands (as per the Queensland Bedside Audit (QBA))

Patient Identification (ID) Band- Information Sheet
Wristbands containing patient information have been the standard method of identifying patients in hospitals for many years. Patient identification bands are a critical tool to prevent errors associated with mismatching patients and their care. The Australian Commission on Safety and Quality in Health Care (ACSQHC) has developed specifications for a standard national patient identification band. The specifications set out standards for the useability, content and colour of patient identification bands in Australia.

<table>
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<tr>
<th>Single White ID Band</th>
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<tr>
<td><img src="image_url" alt="Image of Single White ID Band" /></td>
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Single Red ID Band

Core Identifiers (MRN, Name, DOB) written in black text on white background

Further information can be found on The Australian Commission on Safety and Quality in Health Care website http://www.safetyandquality.gov.au/our-work/patient-identification/

Newborn Identification - Information Sheet

The state-wide neonatal clinical pathway is used in all Queensland Health birthing facilities. This clinical pathway is a standardised, evidenced-based multidisciplinary management plan, which identifies an appropriate sequence of clinical interventions, timeframes, milestones and expected outcomes for the baby.

The section 'Baby Identification is checked and correct' is complete at 2-24hr in the pathway when:

1. The pathway is signed by minimum two staff and if variance, the variance noted.

OR

2. The pathway is signed by one staff member and a witness to birth i.e. partner.

On transition to the ward area staff from the birth suite hand over responsibility of care to ward staff – baby is identified by both members of the staff at this clinical handover of care.
2. Surgical Safety Checklist
The tools incorporate key questions to audit patient identification in the surgical safety checklist, as highlighted below.

For Queensland Health staff, please go to QHEPS for further information on the Surgical Safety Checklist and the 3C's.
3. Perioperative Patient Record
The tools incorporate key questions to audit patient identification in the perioperative patient record, as highlighted below.

For Queensland Health staff, please go to QHEPS for further information on the Perioperative Patient Record Pathway.

4. Procedure Informed Consent Form
The tools incorporate key questions to audit patient identification in the informed consent form, as highlighted below.

We recognise and appreciate that there may be gaps in the scope and questions included in these tools, however, as this is a **Work in Progress**, future versions will build upon the existing scope and questions, and incorporate staff feedback and suggestions for improvement.

The Patient Safety and Quality Improvement Service, Clinical Excellence Division, welcomes feedback on the audit tools and the measurement plans, to ensure the tools meet the needs of Hospital and Health Services. We appreciate any feedback you can provide for the next version.

Please email Patient Safety and Quality Improvement Service on PSQIS_Comms@health.qld.gov.au for feedback or comments.