



The Accuracy of Patient Identification in the Target Patient Safety

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ABSTRACT

The purpose of this study is to see that patient identification in hospitals is very important. Accuracy in idealizing patients will make the right service. Patient identification is important so that health care providers are able to provide the right health services to the right patients. This assessment also contains important things that need to be studied in patient identification. Safety is becoming a global issue including in hospitals. Hospitals must strive to meet patient safety targets stipulated in The Minister of Health Regulation number 11 of 2017. Patient identification is useful so that patients get the correct and appropriate standards of service and treatment according to medical needs in addition to patient identification can also avoid medical errors or unexpected events that can affect the patient.

KEYWORDS: Patient Identification, Health Care, Safety

I. INTRODUCTION

Many countries in the world are trying to build to improve the quality and security of community services. Hospital is a service that has an important role for people's lives. Quality hospital services according to professional standards and service standards are the expectations of all hospital users.

It cannot be separated from the influence of the increasing development of informatics technology which currently provides convenience for the public to get information, including information about health, so that public knowledge about health is increasing. In this era of globalization, Indonesia has not been able to compete with hospitals abroad[1]. The focus of the problem that causes this is one of them is the crisis of distrust from the public about the quality of health services where more and more often there are allegations of malpractice and misdiagnoses by health workers.

For this reason, the need to improve the safety of hospital patients in the hope that public confidence in hospital services can increase. This is because the patient safety program can reduce Adverse Events (AE), which can have an impact on increasing service costs, causing conflicts between health workers and patients, causing lawsuits, accusations of malpractices, which eventually lead to negative opinions on hospital services. So many hospitals are competing how to win the competition by giving a sense of satisfaction to patients. Today an important and global issue in health care is patient safety. Patient safety is a very serious global problem[2].

According to Zahra (2021), patient safety is a variable for measuring and evaluating the quality of nursing services that have an impact on health services[3]. According to Upadhyay et al (2021) patient safety is a system established by hospitals to prevent and reduce errors in the care of patients resulting from negligence or neglect of care provided[4]. Hospital patient safety is a form of health service to patients in hospitals that are safe and do not harm patients. All components of hospital health services include doctors, nurses and other health workers.

According to WHO inpatients are at risk of experiencing Adverse Events (AE). Therefore, health services have an important role in providing nursing care to patients, thus ensuring patient safety and reducing Unwanted Events (AE) in hospitals. Hospital patient safety is a system where hospitals make patient care safer which includes risk assessment, identification and management of matters related to patient risk, reporting and analysis of incidents, the ability to learn from incidents and follow-up and the implementation of solutions to minimize the incidence of risks and prevent injuries caused by errors due to carrying out an action or not taking appropriate action. in the take[5].

Safety is becoming a global issue including in hospitals. Hospitals must strive to meet patient safety targets stipulated in The Minister of Health Regulation number 11 of 2017. Patient identification is useful so that patients get the correct and appropriate standards of service and treatment according to medical needs in addition to patient identification can also

avoid medical errors or unexpected events that can affect the patient[6]. Patient Safety Goals are part of the Hospital Accreditation Standard that must be applicable in hospitals that are useful in improving quality health services. Knowledge of health workers in patient safety targets consists of the accuracy of patient identification, improved effective communication, increased safety of drugs that need to be aware of certainty of the right location, precise procedures, and appropriate patient operations, reduction of the risk of infection related to health services, reduction of patient risk of falling[7]. Patient identification is a very basic thing that a health care worker should do. Patient identification is useful so that patients get the correct and appropriate standards of service and treatment according to medical needs in addition to patient identification can also avoid the occurrence of medical errors or unexpected events that can affect the patient [8]. Patient safety in the hospital one of them starts from the accuracy of patient identification. Misidentification of patients at the beginning of service will have an impact on service errors at a later stage [9].

II. METHOD

The method used is a study method that is studied from several journals and other literature sources that come from reliable sources.

III. RESULT

The goal of patient safety is to drive specific improvements and patient safety that highlight problematic areas—in health providing evidence and—solutions—outcomes. — consensus — based on the advice of experts. Patient identification is a very basic thing that must be done by a health worker. Patient identification is useful so that patients get the correct and appropriate standards of service and treatment according to medical needs, in addition to patient identification is also able to avoid the occurrence of medical errors or unexpected things that can affect the patient[10]. Patient identification is a very important thing that needs to be considered in the provision of health services by every provider, one of which is a nurse. Nurses must be able to identify patients in order to provide nursing care to avoid errors in the provision of nursing care. In identifying the patient, the nurse must first know the status of the patient, whether the patient is an inpatient or an outpatient. Here's how to identify inpatients and outpatients
How to Identify Inpatients / ER:

1. Ask the patient directly (open question): the patient's full name and date of birth or medical record number.
2. For unconscious patients ask directly to the patient's family / waitress (full name of the patient and date of birth or medical record number).

3. Match the patient's full name and date of birth or medical record number on the patient's bracelet with data on the relevant form (e.g. examination form, SIT).
How to Identify Outpatients: Ask directly / open questions to the patient (full name and date of birth of the patient) The role of health workers in carrying out proper identification can be Minimize the occurrence of incidents. Misidentification can be caused by three things, namely errors in the installation of labels, writing errors, and errors in identity confirmation to patients or families. This is very important to ensure safety for patients in the provision of health services[11]

Patient Safety Targets The issue of patient safety gives birth to a new paradigm about the quality of service. The quality of good service alone does not only mean to patients without regard to how the degree of risk and safety elements are received by patients. A hospital is a place that provides health services to patients, with various types of health workers, including nurses and doctors. Health workers working in hospitals will be responsible for improving the quality of health services in managing patient safety risk management in hospitals [5][12]. The patient safety program needs to be cultivated in the hospital. Based on the results of arruum, Salbiah, Manik (2015) on patient safety risk management, it was found that the regulation of patient safety systems needs to be designed that includes identification, planning, implementation, and support[13].

Patient safety goals include the achievement of the following: 1) Accuracy of patient identification 2) Improved effective communication 3) Improved safety of medicines that must be wary of 4) Certainty of surgical location in the correct patient 5) Reduction of risk of infection related to health services 6) Reduction of the risk of patient injury due to The goal of patient safety is to make a push in specific improvements and patient safety that highlights problematic areas — in health care, provide evidence and — solutions — results — consensus based on expert advice. Patient identification is a very basic thing that must be done by a health worker. Patient identification is useful so that patients get the correct and appropriate standards of service and treatment according to.

The safety of services in the hospital one of them starts from the accuracy of patient identification. Because the misidentification of the patient is identified as the root cause of many errors that occur. Patient identification is the first patient safety target. Errors due to patient misidentification occur in almost all aspects or stages of diagnosis and treatment so that the accuracy of patient identification is needed. Patient identification is carried out at a time before performing nursing actions or other procedures, administration of drugs, transfusion of blood or

blood products, blood draw and retrieval of other specimens for clinical trials.

How to identify the patient is by date of birth, patient name, medical record number and rod-coded bracelet. Room or bed numbers cannot be used for identification. Patient misidentification can occur in almost many aspects, which can result in serious impacts for patients such as medication errors, drug errors, wrong blood transfusions, administering treatment procedures to the wrong person, can even lead to the delivery of the baby to the wrong family. Patient safety standards that have been established by JCI (Joint Commission International) are the targets of implementing patient safety in hospitals or called the National Patient Safety Goals for Hospitals include correct patient identification, improving effective communication, using drugs safely, certainty of location, procedures and appropriate patients, lowering the risk of infection, and identifying the risk of patient falls.

The patient safety program aims to reduce the number of Unexpected Events that often occur in patients during hospitalization so that it is very detrimental to both the patient himself and the hospital. In recent years countries have realized the importance of patient safety.

In Indonesia patient safety is a patient right guaranteed in Law No. 44 of 2009 on Hospitals, for that the hospital needs to minimize errors that may occur in every action taken against patients in the hospital[14]

One of the efforts to minimize these events is to establish a Patient Safety Team at the Hospital which is in charge of identifying and reviewing events related to patient safety. Based on research Toole et al (2020), stated that nurses do not always identify patients, especially when performing routine nursing actions, on the grounds of busyness or not having time and avoid patient boredom. When there is an error in the identification of the patient or the inaccuracy of the implementation of the identification procedure, the nurse does not record and report because there is still a bad taste or hesitation in other officers who do not carry out the identification procedure properly[15].

This previous research suggests that errors in patient identification can result in other errors in health care. In 2000 the Institute of Medicine in the United States published a report that surprised many ("wake up call): "TO ERR IS HUMAN", Building a Safer Health System.

The report presented the study at hospitals in Utah and Colorado as well as New York. In Utah and Colorado, there were 2.9% of unexpected events or adverse events, of which 6.6% died. While in New York, KTD is 3.7% with a mortality rate of 13.6%. The death rate from KTD in hospitalizations across the United States amounts to 33.6 million per year ranging from 44,000 to 98,000 per year.

WHO publication in 2004, collected hospital research figures in various countries; The United States, The United Kingdom, Denmark, and Australia, found AE with a range

of 3.2 - 16.6%. With these data, various countries immediately conducted research and developed Patient Safety Systems [16].

A five-nation international survey conducted by the Communio Lectures, Ramsay Health Care Clinical Governance Unit in 2002, in sick and treated adult patients showed 19% believed that a mistake had been made, 11% believed a drug or dose error occurred, and 13% believed that serious health problems were caused by errors in service or care[17].

In Indonesia the patient safety movement began when the Association of Hospitals Throughout Indonesia (PERSI) took the initiative to form a Hospital Patient Safety Committee in 2005, then changed to the Hospital Patient Safety Institute (IKPRS). In 2012, the Minister of Health established the Hospital Patient Safety Committee (KKPRS). Patient Safety Incident Report in Indonesia based on its type of 145 incidents reported by almost injury (KNC) as many as 69 cases (47.6%), AE as many as 67 cases (46.2%), and others as many as 9 cases (6.2%). Based on the data above shows that there are still many patient safety problems that should be prevented by implementing IPSG (International Patient Safety Goal)[14].

Although there have been reports of incidents obtained, the calculation of events related to patient safety is still very limited. Hospital patient safety is a system where hospitals make patient care safer which includes risk assessment, identification and management of matters related to patient risk, reporting and analysis of incidents, the ability to learn from incidents and follow-up and the implementation of solutions to minimize the incidence of risks and prevent injuries caused by errors due to carrying out an action or not taking appropriate action.

Here are seven safety standards that must be applied by the hospital:

1. Patient and family rights have the right to be informed about the plan and results of the service including the possibility of incidents.

2. Educate patients and families The hospital provides education to patients and their families about the obligations and responsibilities of patients in patient care. This is because safety in providing services can be improved by involving patients in the service process. To improve safety, patients must be involved in the service process. Therefore, hospitals must have systems and mechanisms in educating patients and their families about the obligations and responsibilities of patients in patient care.

3. Patient safety and continuity of hospital services must ensure patient safety in continuity of service and ensure coordination between personnel and between service units.

Criteria in patient safety in continuity of service are as follows:

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1) There is a thorough coordination of services starting when the patient enters, examination, diagnosis, service planning, treatment measures, referrals and when the patient is discharged from the hospital.

2) There is coordination of services tailored to patient needs and resource feasibility on an ongoing basis so that at all stages of service transition between service units can run well and smoothly.

3) There is service coordination that includes improved communication to facilitate family support, nursing services, social services, consultations and referrals, primary health services and other follow-up.

4) There is communication and information transfer between health professions so that the coordination process can be achieved without obstacles, safe and effective.

5) The use of performance-enhancing methods to conduct evaluations and programs to improve patient safety[18]

Hospitals design new processes or improve existing processes, monitor and evaluate performance through data collection, intensively analyze incidents, and make changes to improve patient performance and safety.

Leadership role in improving patient safety.

1) Leaders encourage and ensure the implementation of patient safety program implementation programs in an integrated manner in the organization.

2) Leaders ensure proactive programs to identify patient safety risks and programs to reduce or reduce incidents.

3) Leaders encourage and foster coordination communication between units and individuals with regard to decision making about patient safety.

4) Leaders allocate strong resources to measure, review, and improve hospital performance and improve patient safety.

5) Leaders measure and assess the effectiveness of their contribution in improving hospital performance and patient safety.

6) Educate staff about patient safety 1) The hospital has an educational, training, and orientation process for each position covering the position with clear patient safety. 2) The hospital organizes continuous education and training to improve and maintain staff competence and support an indiscipline approach in patient service. 3) Hospitals should conduct training on group cooperation to support indiscipline and collaborative approaches in order to serve patients.

7) Communication is the key for staff to achieve patient safety. Hospitals plan and design patient safety information management processes to meet internal and external information needs. As well as transmitting data and information must be timely and accurate.

The hospital must establish a Hospital Patient Safety Team (TKPRS) in the implementation of patient safety. This team is appointed by the head of the hospital as the executor of patient safety activities. Members of the hospital's patient safety team consist of hospital management and elements of the health profession in the hospital[6]

The tasks of this team are:

1. Build a patient safety program in the hospital in accordance with the specificity of the hospital.

2. Develop policies and procedures related to hospital patient safety programs.

3. Carry out a role to conduct motivation, education, consultation, monitoring, and assessment of the applied hospital patient safety program.

4. Cooperate with the hospital's education and training department to conduct internal training in the safety of hospital patients.

5. Record, report incidents, analyze incidents, and develop solutions for learning.

6. Provide input and consideration to the head of the hospital in the framework of making hospital patient safety policies to make activity reports to the head of the hospital. Hospital patient safety is a system where the hospital makes patient care safer[11].

The objectives of the hospital's patient safety system are:

1. The creation of a culture of patient safety in hospitals

2. Increased hospital accountability for patients and the community.

3. Decreased incidence of unexpected events (KTD) in the hospital.

4. Implementation of prevention programs so that no EA occurs.

WHO recommends that measures against the implementation of patient identification in health services are as follows:

1. Ensure that the health care organization has a system.

a. Emphasize the responsibility to the health worker to check the patient's identity and match the patient to the correct treatment (e.g. lab results, specimens, procedures) before treatment is given.

b. Use at least two identifiers (e.g. name and date of birth) to verify the patient's identity upon admission or transfer to another hospital or other treatment and before taking care of treatment. It should not be from identification using the patient's room number.

c. Standardize patient identification approaches in various facilities in the healthcare system. For example, the use of white ribbons, where standardized shapes or markers and specific information (e.g. names and dates of birth) can be written, or apply biometric technology.

- d. Provide a clear protocol for identifying patients who do not have an identity or distinguishing the identity of the patient of the same name. It then also develops and uses a non-verbal approach to identify comatose patients or confused patients.
- e. Encourage patients to participate in all stages of the process.
- f. Labeling containers used for blood and other specimens in front of the patient.
- g. Provide clear protocols for maintaining the identity of patient samples during the pre-analysis, analysis, and post-analysis processes.
- h. Establish a clear protocol for questioning laboratory results or other test findings that do not match the patient's clinical history.

2. Conduct training on procedures to check the identity of patients into orientation and continue professional development for health workers.

3. Educate the patient / patient's family about the relevance and importance of correct patient identification in a positive way and also respect the privacy of the patient / family of the patient.

There are five elements that must be met on the target of patient identification accuracy, namely:

1. There are regulations governing the implementation of patient identification.
2. Patient identification is carried out using a minimum of 2 (two) identities and must not use the patient's room number or the patient's location is treated in accordance with hospital regulations.
3. Patient identification is carried out before the implementation of actions, diagnostic and therapeutic procedures .
4. Patients are identified prior to the administration of drugs, blood, blood products, specimen retrieval, and dietary administration.
5. The patient is identified before radiotherapy administration, receiving intravenous fluids, hemodialysis, blood draw or other specimen retrieval

With respect to services in hospitals, the system whose parts are existing units must function properly. This function allows for unity, cohesion between units, between officials and harmony between organizations. In order for the hospital to achieve its goals, the coordination function plays an important role in the process, so as to create optimal quality of service for patients.

IV. CONCLUSION

The knowledge of health workers related to identification really needs to be improved. Although most of the nurses have known exactly the patient identification procedure. Most nurses know that patient identification is done before taking action/care to the patient, but do not know the must identify the patient and verify the patient's data. The thing that often happens nurses do not identify patients according to the procedure, meaning that the problem that is often missed by nurses is to verify data by comparing patient data with bracelets. The identity of the patient, and only ask the patient's name. Some things are the cause of employee's lack of knowledge on the implementation of patient identification accuracy due to high employee turnover.

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