Progress on Two Patient Identification
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Our top national patient safety goal for 2017 is to improve the accuracy of patient identification. To achieve this, we have focused on the use of two patient identifiers when providing care, treatment, and service.

The practice of using two patient identifiers is crucial to delivering safe patient care. Wrong-patient errors may occur in all stages of diagnosis, care, treatment, or services. The use of two patient identifiers allows our caregivers to reliably identify the individual as the person for whom the service or treatment is intended and match the service or treatment to that individual.

An initial audit this spring, which included more than 260 observations, found 90% compliance in using two patient identifiers. This fall, audits were expanded to 20 observations per clinical service area. The most recent audit, from October, showed 89% compliance across more than 1,100 observations.

Our goal is to be at 100% compliance with two patient identifiers by May 2018. An LMS module to support the initiative launched in late August and was 79% completed as of late October.

Already, we are seeing the successes of this initiative.

Recently, a patient was sent from the Emergency Department to Radiology for imagining. When Jhomar Aquino, the medical radiographer, attempted to ID the patient, he responded with the wrong date of birth. He conferred with another radiographer, Ray Logan. The pair verified the patient’s name matched that on the order, and the patient’s stated address also matched what was documented in the chart. But while the patient indicated the issue in his abdomen, the order was for a head CT. This disconnect triggered a call to the ED to ensure no errors occurred during registration. Staff discovered both the father and son with same name — Sr. and Jr. — were in the Emergency Department at the same time.

Loray Douglas, a customer service specialist in Surgical Services, also came across two patients with the same name who happened to both be in the surgery center at the same time. During identification, Loray discovered the date of birth did not match on the patient’s anesthesia chart, and they were in fact prepping the wrong patient for surgery. The patient in prep was supposed to have a pre-evaluation on his eye; the patient due for surgery that day was still in the waiting room. Loray quickly notified the caregivers that they had the wrong patient.

Thank you to Jhomar, Ray, and Loray for their diligence in following this important practice to help ensure safe patient care.

Two-Patient Identification: Every Patient, Every Interaction

• Prior to providing care, treatment or services, correctly identify the patient by asking him or her to state their full name and date of birth.

• For non-verbal patient identification, or additional information on identification of patients seen in the outpatient settings, please review policy TX 5.09 located under Hospital Policies on the intranet page and Safety Huddle #13.

• Our aim is to provide our patients with the correct care, treatment or service every time.

All caregivers must use two patient identifiers when administering medications, blood, or blood components, when collecting blood samples and other specimens for clinical testing; and when providing treatments or procedures. The patient’s room number or physical location is not used as an identifier.
Earlier this fall, the Department of Surgery hosted the Clinical Robotic Surgery Association’s (CRSA) 9th Worldwide Annual Congress at the UIC Forum. One of the highlights of the two-day congress was a live-streaming of five robotic surgeries from UI Health operating rooms:

- **Dr. Eduardo Fernandes**, Chief Resident in the Division of General, Minimally Invasive, and Robotic Surgery, performed a cholecystectomy, or gallbladder removal, and a Heller Myotomy — essentially, the cutting the esophageal sphincter to treat achalasia, an esophageal disorder — under the supervision of Division Chief Dr. Pier C. Giulianotti.

- **Dr. Francesco Bianco**, Assistant Professor of Surgery, performed two hernia repairs using the new Xi Robotic Surgery System. What was quite unique about this procedure was that Dr. Bianco attempted — successfully — to perform a “solo surgery” without the assistance of another surgeon at the patient side.

- **Dr. Mario Masrur**, Assistant Professor of Surgery, led a robot-assisted gastric bypass procedure.

Live-surgery transmission is highly effective learning tool for both residents and experienced surgeons.

The procedures were streamed in high-definition from the UI Health operating rooms to the UIC Forum. Both external (operating room) and intraoperative views were streamed to the audience.

**UI Health Recognized for Electronic Clinical Equality Measures**

The Joint Commission recognized UI Health as a 2017 Pioneers in Quality Data Contributor for its contributions to electronic clinical quality measure (eCQM) for quality improvement in healthcare. The Pioneers in Quality program assists and recognizes hospitals that report eCQM data and shares best practices for gathering, analyzing, and leveraging eCQM data for quality improvement.

“Gathering care quality data helps us ensure we’re delivering the most effective care to our patients,” says Jodi Joyce, vice chancellor for quality & patient safety. “Our involvement in the Pioneers in Quality program takes that to another level, where we’re sharing our findings and learning how other health systems are working to provide the best outcomes.”

Through eCQMs — which rely on structured, encoded data present in the electronic health record — hospitals can electronically collect and transmit data on the quality of care that patients receive. The electronic data can be analyzed to measure and improve care processes, performance, and outcomes.
Introducing Service Line Spotlight Campaigns

Marketing & Communications launched a new series of service line awareness campaign for internal/external awareness. The “Spotlight Campaigns” take a focused look at the department to showcase what makes it stand out among other institutions in Chicago — in both the services they offer and the care they provide. The Diabetes Center & Endocrinology Clinic is featured in the inaugural campaign, which features:

- Print materials displayed throughout the Hospital and OCC
- Custom website updates, including featured homepage banner and dedicated campaign landing page
- Focused social media promotion

Keep an eye out for upcoming campaigns, and visit SayWhat.UIHealth.Care for fast facts about our Diabetes Program.

Employee As Patients Storyboards

At UI Health, our colleagues are an extension of our family. We support each other on the job — and when care is needed. From preventative care to life-saving surgery, our doctors are honored to provide care and treatment to their fellow staff.

Visit the cafeteria hallway to see some of the stories that exemplify how we care for one another.

Have a story to share? Email uihealthmktg@uic.edu.

HELP US CREATE A BETTER, SAFER, GREENER AT UI HEALTH

The Green Team meets monthly to discuss innovative ways to ensure environmental stewardship and sustainability are at the forefront of patient care and hospital operations.

Encourage your department to become more green! The Marketing team is taking steps toward a greener environment by switching to a digital Roundup version only. If you would like a copy of the Roundup, please contact Sophie Barish at sophiab@uic.edu.