
Audit 14

- 1) **Audit Title**
Impact of Patient Mis-identification Errors and Subsequent Error Rates of This Type.
- 2) **Standard against which the audit topic is to be compared**
To be discussed and agreed locally.
- 3) **Source of standard (or reference document)**
Standards can in part be derived from historical/local data but should also be formulated in light of national/international publications and guidelines.
- 4) **Type of audit – clinical audit, BSSD related (incident reporting), workflow/patient related**
- 5) **Target / compliance percentage to be achieved**
To be agreed locally and in light of relevant guidelines.
- 6) **Item or variable to be audited**
The frequency of patient mis-identification errors.
- 7) **Method: Retrospective / Prospective / Other**
Retrospective or prospective.
- 8) **Data or information to be collected**
Patient mis-identification errors occurring within the period of the audit; any effect on clinical outcome; other adverse effects e.g., unnecessary radiation exposure; reasons for error; remedial actions.
- 9) **Sample details (categories, number of patients, collection time period)**
To be agreed locally, including time period for the audit.
- 10) **Target achieved (yes / no / not applicable)**
Compliance with standards yes/no.
- 11) **Actions to be taken if the target is not met**
Review causes for misidentification, remedial actions (these may include education programmes), re-audit.
- 12) **Timing for re-audit (yes / no / not applicable)**
This audit should be repeated periodically to confirm either compliance with standards or, if needed, that necessary improvements have been made. All departmental staff should be involved proactively in training and educational initiatives to reduce the likelihood of this type of error.