

IDENTIFICATION AND SECURITY OF NEONATE

This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.

1. AIM

- Correct identification and optimal security of neonate to prevent misidentification

2. PATIENT

- Neonate

3. STAFF

- Medical, nursing and midwifery staff
- Allied Health staff

4. EQUIPMENT

- Identification (ID) bands

5. CLINICAL PRACTICE

- Label neonate's ID bands with the following information:
 - Mother's Surname, baby of (B/O) mother's given name (Identify Twin 1, Triplet 2 etc. if a multiple birth)
 - Date of Birth (DOB)
 - Time of Birth (24-hour clock)
 - Sex – Male or Female
- Verify information on ID bands with parent/support person before attaching the ID bands on the neonate
- Attach ID bands on both of the neonate's ankles as soon as possible after birth
- Maintain ID bands in place over duration of hospital admission
- Ensure correct information and presence of two ID bands on neonate with parent/support person and midwife in the following circumstances;
 - replacement of ID bands on each ankle if missing or loose
 - any instance of mother-neonate separation
 - on return of neonate to either parent/support person
 - daily check as per neonatal care plan
- Ensure ID bands are checked by two staff in the following circumstances;
 - on admission to any new area as part of handover
 - prior to administration of medication, expressed breastmilk or formula
 - prior to any procedure
- Adhere to hospital policy of rooming in
- Communicate to parents that the "Arrivals Lounge" on the postnatal ward is not supervised
- Ensure neonate is never left unattended
- Ensure ID bands on neonate are checked daily by one midwife with one parent and documented on Neonatal Care Plan
- Ensure the neonate has ID bands before any instance of separating from mother if mother-neonate separation is requested by the mother. Document on Separation of Baby Sticker in neonatal care plan and both a parent and a staff member to sign (Appendix 2)
- Ensure identification of both neonate and mother are checked on return of neonate to either parent. Document on Separation of Baby Sticker in neonatal care plan and both parent and staff member to sign

CLINICAL POLICIES, PROCEDURES & GUIDELINES

Approved by Quality & Patient Care Committee
15 February 2018

IDENTIFICATION AND SECURITY OF NEONATE cont'd

- Ensure the neonate has ID bands before separating neonate from mother if mother-neonate separation is required for a medical procedure, and document using the Clinical Procedure Safety Checklist Level 1 (Appendix 1) on eMR
- Check by two staff the identification of the neonate prior to medication administration and prior to a procedure
- Check ID of all neonates on the ward if a neonate is discovered without ID bands and has been separated from its mother
- Ensure transport of neonate in their cot during hospitalisation for falls prevention
- Ensure neonates ID bands are checked and correct by a midwife and a parent on discharge from the hospital
- Lock main Postnatal Wards door during non-visiting times: 1300-1600 hours and 2000–0700 hours

Newborn Care Centre

- Keep Newborn Care Centre (NCC) doors locked at all times
- Give parents NCC information package when the neonate is admitted to the NCC
- Adhere to visiting regulation of NCC: only two visitors (one must be a parent or a person nominated by a parent) per neonate at any one time
- Nominate four primary visitors to visit neonate when parents are not present. Nominated primary visitors will be identified on neonate's notes and provided with an authorisation to visit
- Ensure neonates ID bands are checked and correct by a midwife and a parent on discharge from the hospital

6. DOCUMENTATION

7. Identification bands
 - Neonatal Care Plan
 - Separation of Baby Sticker
 - Clinical Procedure Safety Checklist Level 1 on eMR
 - eMR progress notes

7. EDUCATIONAL NOTES

- Posters highlighting the benefits of rooming-in are affixed to each postnatal woman's room and on walls and doors of postnatal Arrivals Lounges
- Along with increasing security of the baby, rooming in facilitates unrestricted breastfeeding, promotes bonding, reduces cross-infection and helps the mother learn about her baby's patterns of behaviour and feeding
- Transportation of neonates between hospital areas should not occur if ID bands are not in place
- ID badges must be worn and visible by those staff members authorised to transport neonates within the hospital
- Noting presence of neonatal birthmarks or abnormalities on the body will assist in identifying the neonate

8. RELATED POLICIES/ PROCEDURES/CLINICAL PRACTICE LOP

- Admission of the Neonate to Postnatal Services
- Rooming In for Healthy Babies SESLHNP/158
- MoH Clinical Procedure Safety PD2014_036
- MoH Patient Identification Bands PD2014_024

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IDENTIFICATION AND SECURITY OF NEONATE cont'd

9. RISK RATING

- Medium

10. NATIONAL STANDARD

- CS – Communicating for Safety

11. REFERENCES

- Clinical Excellence Commission. Patient Identification Bands. PD2014_024, 2014. Department of Health.
- National Centre for Missing & Exploited Children. For Healthcare Professionals: Guidelines on prevention of and response to infant abductions 10th edition 2014 (Online). <http://www.missingkids.com>.
- Cloherty, J.P., Eichenwald, E.C., Stark, A.R. Manual of Neonatal Care, 2008. Lippincott Williams & Wilkins.

REVISION & APPROVAL HISTORY

Reviewed and endorsed Maternity Services LOPs group 5/12/17
Replaced the following :
Identification of Neonate – Approved Quality & Patient Care Committee April 2016
Reviewed and endorsed Obstetrics LOPs group 7/54/16
Previously titled *Identification of Babies Guideline*
Approved Clinical Performance & Quality Committee 19/2/07
Reviewed and endorsed Maternity Services Clinical Committee 13/2/07
Approved Quality Council 18/12/01
Neonatal Security – Approved Quality & Patient Care Committee April 2016
Reviewed and endorsed Obstetrics LOPs group 7/4/16
Previously titled : *Neonatal Security Procedure*
Approved Patient Care Committee 5/2/09
Endorsed Obstetric Clinical Guidelines Group November 2008

FOR REVIEW : DECEMBER 2020

APPENDIX 1

Clinical Procedure Safety Checklist Level 1	
Patient's Name _____	MRN _____
Correct Patient Identification Confirmed <input type="checkbox"/>	Known Allergy/Adverse Reaction Check Yes <input type="checkbox"/> No <input type="checkbox"/>
Informed consent <input type="checkbox"/>	
Procedure Name	
Procedure 1	_____
Procedure 2	_____
Procedure 3	_____
Proceduralist's Name: _____	Date: _____
Proceduralist's Signature: _____	Designation: _____
50894 050613	

APPENDIX 2

Reason baby separated from mother: _____	Baby's ID bands checked when separated: <input type="checkbox"/> Yes <input type="checkbox"/> No
Separated Date and Time: _____	
Signatures: _____	Staff _____
Parent _____	Staff _____
Reunited Date and Time: _____	Baby's ID bands checked on return: <input type="checkbox"/> Yes <input type="checkbox"/> No
Signatures: _____	Staff _____
Parent _____	Staff _____

Information on RHW website at <http://www.seslhd.health.nsw.gov.au/rhw/>

Baby Name Bands at RHW

Your baby will have two identification bands attached to each ankle while in hospital. They will be placed on your baby immediately following birth and before any separation of mother and baby occurs (should that be necessary).

Your name, your baby's date and time of birth, and the gender of your baby will be written on the bands and checked with you and your partner before being placed on your baby's ankles. Please be aware that both of these identification bands must remain on your baby while in our care. Ensure you notify a staff member if one or both bands become loose or are misplaced.

These identification bands are checked each day by the midwife caring for you and your baby, and when your baby is transferred between areas of the hospital.

When transferring between areas or after any period of separation between mother and baby, a midwife will check your baby's identification bands with you.

Your baby's identification will be checked again prior to discharge. Please do not remove any forms of identification until you have left the hospital.