



# Provincial Registration Standards and Practices Manual

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## SECTION 1 - INTRODUCTION

### 1.1 Purpose

The purpose of the Provincial Registration Standards and Practices manual is to describe the standards, rules and business processes related to identity management to be applied when registering clients prior to delivering health services to them.

*Note: The term "client" is interchangeable with the term "patient" throughout this document.*

This manual is **not** intended to be used as or replace site specific procedure manuals that support the business processes and systems, but is intended to support the practice of identity management in a consistent manner across the Alberta health system. Specific registration system's available functionality may limit the ability to apply all standards, rules and best practices.

The business processes include the identification, searching, verification and registration of all individuals interacting with the Alberta health system to provide a consistent client experience.

The prerequisites for accurately creating a client identity are:

- Identifying the client at point of service,
- Searching for the client in the relevant registration system,
- Verifying the client's identity, and,
- Registering the client in the relevant registration system.

### 1.2 Who should use this manual?

This document should be used by any individual within the Alberta health system who is registering a client for health services or accessing an already existing client record.

### 1.3 Why are standards required?

A **standard** is defined as a series of acknowledged and accepted steps. A standard describes what is expected and required of individuals and organizations.

A **rule** is defined as a description of the way things are or should be done. A rule is a prescribed guide for conduct and action.

A **best practice** is defined as a method or technique that is the most efficient and effective way of completing a task or course of action.

As an example, the standard for registration requires all individuals to uniquely identify themselves. One of the rules is that clients are expected to provide identifying documents. One best practice would be to ask the client for their Alberta Personal Health Card or other provincial/territorial health card.

**Why they are required:** Standard processes, when implemented in and across organizations, establish a framework for improved communications, defined

responsibilities for both clients and provider, and performance benchmarking. Once organizations in a particular industry achieve consensus about which activities and flows constitute a given process, they can begin to measure their own processes, identify areas for improvement and potentially compare their results with those of other organizations.

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## SECTION 2 – REGISTRATION STANDARDS

**STANDARD #1**

All individuals accessing the Alberta health system are required to uniquely identify themselves.

**STANDARD #2**

Only true and accurate data about clients is recorded in the registration system. This excludes fetuses, body parts, specimens and non-humans (pets).

**STANDARD #3**

A search of all relevant registration systems will be conducted prior to completing a registration.

**STANDARD #4**

All adult individuals accessing the Alberta health system will present at least two pieces of original supporting documentation to establish their unique identity. Children under 18 will present at least one piece of original supporting documentation to establish their unique identity.

**STANDARD #5**

All client demographic information must be verified with the client before the registration process is completed.

**STANDARD #6**

A unique identifier is assigned to all clients in the Alberta health system.

**STANDARD #7**

A client registration must include a minimum set of demographic information. The minimum demographic information consists of Last Name, First Name, Date of Birth, Gender and a unique identifier.

## SECTION 3 - DEMOGRAPHIC DATA RULES

This section contains the business rules for the demographic data attributes that are stored in the registration systems within the Alberta health system.

### 3.1 Name

	<b>Description</b>
<b>Definition</b>	A name is a word or phrase that constitutes the distinctive designation of a client.
<b>Rules</b>	<p>1. All registrations must include the documented name. The documented name is collected from one of the acceptable original proof of identity documents. The preferred, acceptable list of documentation includes:</p> <ul style="list-style-type: none"> <li>• Valid Driver’s License (including out of province or out of country issued licenses)</li> <li>• Valid Passport (including out of country issued passports)</li> <li>• Canadian Citizenship Card</li> <li>• Canadian Permanent Resident Card</li> <li>• Certificate of Indian Status Card</li> <li>• Valid Alberta Student Identification Card (including other Provincial and/or Territorial Government issued student identification cards)</li> <li>• Valid Provincial/Territorial Health Care Card</li> <li>• Federal, Provincial and/or Territorial Government issued identification with a photograph</li> </ul> <p>Other acceptable documentation includes:</p> <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Marriage Certificate</li> <li>• Legal Change of Name Certificate</li> <li>• Final Divorce Certificate</li> <li>• Citizenship or Immigration status document (Student Permit, Temporary Resident, Interim Federal Health Certificate of Eligibility)</li> <li>• Certified Copy of the Court Order for Name Change</li> <li>• Court of Queen’s Bench Adoption Order</li> </ul>

	<b>Description</b>
	<ol style="list-style-type: none"> <li>2. The documented name should be collected.</li> <li>3. Names are to be recorded accurately and completely within the registration system as they represent the client who is presenting for service.</li> <li>4. Before a name can be changed or updated, individuals are required to provide proof, as documented in one of the accepted proof of identity documents.</li> <li>5. Names cannot consist of only numeric or special characters.</li> </ol>
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Staff will view supporting documentation for all name change requests; this would include legal change of name, marriage, divorce, adoption. As appropriate, based on privacy, business and available system functionality, a note may be entered indicating the date and type of document viewed.</li> <li>2. Truncation: Available system functionality may require that long names be shortened to fit within the name field of the registration system. The integrity of the last name is the priority. If truncation of a name is required, the best practices are: <ul style="list-style-type: none"> <li>• Last Name: Enter the complete last name, if not possible, enter as much of the name as possible.</li> <li>• First and Second Names: Enter as much of the first name as possible, and then, as much of the second name as possible.</li> </ul> </li> <li>3. Clients may provide other names that they are also known by. These should be recorded as alias names. Alias names should be recorded, as available system functionality allows.</li> <li>4. In situations where the documents support discrepancies in the identification, ask the client to confirm which documented name is correct and record that name in the registration system.</li> </ol>

<b>Name Type:</b>	<b>Best Practice:</b>
<b>1. Newborn</b>	<p>Newborns are to be registered in the registration system as:</p> <ul style="list-style-type: none"> <li>• Last Name = <i>Family Name</i>, where <i>Family Name</i> = Mother's or Father's Last Name.</li> <li>• First Name = Female or Male.</li> </ul>
<b>2. Newborn Multiple births</b>	<p>Newborn multiple births are to be registered in the registration system as:</p> <ul style="list-style-type: none"> <li>• Last Name = "Family Name", where "Family Name" = Mother or Father's Last Name.</li> <li>• First Name = indication of birth order and gender, e.g. "TwinA Female, TwinB Male", "TripletA Male, TripletB Female, TripletC Female", etc.</li> </ul> <p><b>NOTE:</b> No space between the descriptor and the letter indicating the birth order.</p>

Name Type:	Best Practice:
<b>3. One name (Last Name only)</b>	Clients with only a last name (i.e. family name) should have the last name entered in both the last name and first name fields, e.g. Mauli Mauli.
<b>4. One Name (First Name only)</b>	Clients with only a first name should have the first name entered in both the first name and last name fields, e.g. Huhulo Huhulo.
<b>5. Preferred First Name</b>	A client may request that they be identified by their preferred first name, nickname or alias name. The client should be recorded by their documented first, middle and last name for consistent identification purposes, e.g. Ty Geo Brown should be recorded as Tyler Geoffrey Brown to match the first, middle and last name that is documented. Another example could be a client with a preferred first name of Betty that has a documented first name of Elizabeth. A preferred name can be recorded in some registration systems and wherever possible the client’s preferred name should be collected and displayed but secondary to the documented first name.
<b>6. Middle Name (preferred First Name)</b>	A client may request that they be identified by their middle and last name only, versus their first and last name. The client should be recorded with their documented first, middle and last name for consistent identification purposes, e.g. John Andrew Smith. An alias or a preferred name combination of the first and middle names reversed can be considered as a secondary identification option if supported by the registration system, e.g. Andrew John Smith.
<b>7. Unknown Name</b>	<p>An “unknown” name may be entered to complete the registration process. Available system functionality may dictate different allowable values for unknown names.</p> <p>The standard default value if name is not known:</p> <ul style="list-style-type: none"> <li>• Last name = Client ID/MRN for the client</li> <li>• First name = Gender of client (i.e. Female or Male)</li> </ul> <p>Do NOT use John Doe, or Jane Doe.</p> <p>See: <a href="#">Section 5.6 Unidentified Client</a></p> <p>The ‘Unknown Name’ Name Type is not to be used for clients requesting confidentiality. In these situations, see <a href="#">Section 5.4 Clients Requesting Confidentiality</a>.</p>



Name Type:	Best Practice:
<b>8. Last Name with one character</b>	Entered as proven by a document review. If document review is not possible, enter as client identifies - e.g. Joseph O.
<b>9. First and/or Middle Name with one character</b>	Entered as proven by a document review. If document review is not possible, enter as client identifies - e.g. J R Ewing.
<b>10. Names containing spaces, periods, hyphens, apostrophes and roman numerals</b>	Entered as proven by a document review. If document review is not possible, enter as client identifies – e.g. Sue-Anne Hathaway III, Patrick O’Reilly, David St. Pierre or David St Pierre.
<b>11. Names containing alphabet characters A-Z in either upper or lower case</b>	Entered as proven by a document review. If document review is not possible, enter as client identifies – e.g. Peter deJong.
<b>12. Two-part names separated by either a hyphen or space</b>	Entered as proven by a document review. If document review is not possible, enter as client identifies – e.g. Mary Ann Jennifer Taylor-Ford.

## 3.2 Gender

	<b>Description</b>
<b>Definition</b>	For the purposes of identification, the gender, as declared by the client, is the sexual category for the client portraying the behavioural, cultural, or psychological traits typically associated with one sex.
<b>Rules</b>	<ol style="list-style-type: none"> <li>Administrative Gender is recorded as the client presents or requests.</li> <li>Administrative Gender is a mandatory data attribute and must be collected for all Alberta health system events. Clinical Gender may differ from Administrative Gender. Available system functionality may prevent the collection and/or display of two genders (Administrative and Clinical). The Administrative Gender will be the gender collected and displayed for most registration systems.</li> </ol>
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>All registrations should include an Administrative Gender value of either: F – Female or M – Male</li> <li>Individuals will not be required to provide proof before a correction will be made to their gender.</li> </ol>

<b>Scenario:</b>	<b>Best Practice:</b>
1. Client presenting for service reveals they are in a trans-gender program and currently living as a female, although documented evidence supports an identity as a male, or vice versa.	Staff will register the client in the gender they present or request.
2. A baby is born with an undifferentiated gender.	If the registration system permits the use of any other gender value such as U, Unknown and the Notice of Birth has not been submitted, then the baby can be registered with the applicable clinical gender code. When the baby's administrative gender is determined, staff will change the gender accordingly to either Male or Female.

### 3.3 Date of Birth

	<b>Description</b>
<b>Definition</b>	A date of birth is the year, month and day that an individual was born.
<b>Rules</b>	<p>1. Date of birth is a mandatory data attribute when registering a client. The date of birth recorded at registration must be confirmed by reviewing supporting documentation (if available). The preferred, acceptable list of documentation includes (document being used must have a date of birth):</p> <ul style="list-style-type: none"> <li>• Valid Driver’s License (including out of province or out of country issued licenses)</li> <li>• Valid Passport (including out of country issued passports)</li> <li>• Canadian Citizenship Card</li> <li>• Canadian Permanent Resident Card</li> <li>• Certificate of Indian Status Card</li> <li>• Valid Alberta Student Identification Card (including other Provincial and/or Territorial Government issued student identification cards)</li> <li>• Valid Provincial/Territorial Health Care Card</li> <li>• Federal, Provincial and/or Territorial Government issued identification with a photograph</li> </ul> <p>Other acceptable documentation includes:</p> <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Marriage Certificate</li> <li>• Legal Change of Name Certificate</li> <li>• Final Divorce Certificate</li> <li>• Citizenship/Immigration status document (Student Permit, Temporary Resident, Interim Federal Health Certificate of Eligibility)</li> <li>• Certified Copy of the Court Order for Name Change</li> <li>• Court of Queen’s Bench Adoption Order</li> </ul> <p>2. All registrations are to include a complete date of birth, i.e. year, month and day, as confirmed by supporting documentation.</p>

<b>Description</b>	
	<ol style="list-style-type: none"> <li>3. If documentation is not available, the date of birth represents the birth date provided by the client at the point of encounter.</li> <li>4. Individuals are required to provide acceptable proof before a change, update or correction will be made to their date of birth. Preferred, acceptable documentation is listed under Rule #1.</li> <li>5. If the date of birth is unknown, the registration system default date must be used.</li> <li>6. If the client is not able to provide a complete date of birth, a default value should be used for the components (e.g. year, month or day) that are not known: <ul style="list-style-type: none"> <li>• The default value for an unknown date of birth is 1800-01-01.</li> </ul> </li> </ol>

<b>Scenario:</b>	<b>Best Practice:</b>
1. Client requests to change their date of birth for personal reasons e.g. the date is unlucky.	Staff will request documentation, as noted above, to support the change to date of birth. If documentation is not available, Registration staff will let the client know that the date on the registration system must remain consistent with their health care card for purposes of continuity of health care. The Registration staff will not change the date of birth.
2. Client indicates the date of birth on the Alberta Personal Health Card is different from their date of birth.	Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct the date of birth on their Alberta Personal Health Card.
3. Client indicates the date of birth in the registration system is different from their date of birth.	Staff will correct the date of birth on the registration system provided acceptable documentation as listed under Rule #1 is produced.
4. Client indicates they do not know the day or month of their birth. Supporting documentation contains only a birth year.	Staff will record the year of birth as indicated on the supporting documentation. The default values for month and day will be recorded.

### 3.4 Date of Death

	<b>Description</b>
<b>Definition</b>	<p>For the purposes of Registration Standards, the <b>date of death</b> is the date recorded on the Medical Certificate of Death. The patient registration system will record the date recorded on the Medical Certificate of Death. This may differ from when the pronouncement of death occurs. For consistency of registration, all death dates must match a validation document, which will be the Medical Certificate of Death or Death Certificate.</p> <p><b>Pronouncement of death</b> is the determination that based on a physical assessment, life has ceased – cardiac and respiratory vital signs are absent and the pupils are fixed and dilated.</p> <p><b>Certification of death</b> is the date that the physician/medical examiner certifies that death has occurred and can only be done by a physician or medical examiner. Certification of death records the date of death only and not the time of death.</p>
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. A date of death should be recorded in the registration system only with supporting documentation. A reported date of death must be confirmed with one of the following sources or documentation, these documents may originate from other locations than Alberta:             <ol style="list-style-type: none"> <li>a. Department of Vital Statistics Certificate of Death</li> <li>b. Certificate of Death (from locations other than Alberta)</li> <li>c. Medical Certificate of Death</li> <li>d. Registration of Death</li> </ol> </li> <li>2. Statements from next-of-kin must be confirmed with an acceptable source.</li> </ol>

	<b>Description</b>
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Complete dates of death should be recorded in the registration system.</li> <li>2. If a complete date of death cannot be confirmed, but there is confirmation of a partial date of death; this can be recorded.</li> </ol>

<b>Scenario:</b>	<b>Best Practice:</b>
1. A clinic is notified by a family member that a client has deceased.	Staff will verify the statement against an acceptable source or acceptable documentation.
2. A client dies while in a health care site.	Staff will record the date of death as noted on the Medical Certificate of Death and recorded by the physician in attendance.
3. A patient dies while in Emergency.	The date of death is recorded as on the Medical Certificate of Death and completed by the physician/medical examiner in attendance.
4. The date of death recorded on the Death Certificate is different than the date of death recorded in the record.	<p>The date of death recorded in the registration system is the date on the Medical Certificate of Death.</p> <p>This date can be different than the pronouncement of death, which can occur prior to the completion of the Medical Certificate of Death.</p>
5. A patient dies while in transit to a health care site.	<p>The date of death is recorded in the registration system as the date of death recorded on the Medical Certificate of Death completed by the physician/medical examiner.</p> <p>This date can be different than the pronouncement of death, which can occur prior to the completion of the Medical Certificate of Death.</p>
6. The date death recorded on the Registration of Death is different than the date of death completed by the physician or medical examiner, i.e. death occurred on a day that is different than the date the form was completed	The date of death recorded in the registration system is the date recorded on the Medical Certificate of Death, noting that pronouncement of death can occur at an earlier time or date.

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<b>Scenario:</b>	<b>Best Practice:</b>
7. The deceased patient is donating organs and there is medical activity occurring after the date of death, i.e. procurement of organs.	The date of death recorded in the registration system is the date recorded on the Medical Certificate of Death, completed by the physician/medical examiner.  All health care billings that occur post-death will be rejected and will require a manual submission and explanation.
8. Staff member reads about patient in the obituary section of the newspaper.	Information is not updated in the system unless it has been verified against an acceptable source or acceptable documentation.

### 3.5 Address

	Description
<b>Definition</b>	An address is the place where a client can be found or communicated with.
<b>Rules</b>	<p>Where Legislation, Business Processes or Policy requires the capture of addresses, the following rules will apply:</p> <ol style="list-style-type: none"> <li>1. The client is expected to provide the true and accurate address of their primary residence.</li> <li>2. An address has 5 components: <ul style="list-style-type: none"> <li>• Street Address/Rural Route Address (can be 1 or 2 lines)</li> <li>• City</li> <li>• Province/State</li> <li>• Country</li> <li>• Postal Code/Zip Code</li> </ul> </li> </ol>
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Registration staff will collect/confirm a residential address from the client at the time of initial registration and whenever face to face contact occurs. The residential address is considered the primary address. The client may provide other addresses, such as a mailing address.</li> <li>2. Follow the Canada Post Guidelines for recording addresses: <a href="http://www.canadapost.ca/tools/pg/manual/pgaddress-e.asp">http://www.canadapost.ca/tools/pg/manual/pgaddress-e.asp</a></li> <li>3. Avoid special characters such as # , : ; . { } ( )</li> <li>4. Avoid entering anything in address line 1 that is not considered a valid address, e.g. Care of.</li> </ol>



Scenario:	Best Practice:
<p><b>1. Unknown Address</b></p>	<p>When a client’s address cannot be determined, and the registration system requires an address, an “Unknown” address may be entered to complete the registration process.</p> <p>The recommended values to enter if the address is unknown:</p> <ul style="list-style-type: none"> <li>• Address Line 1 = “Unknown”</li> <li>• City = Point of Encounter City</li> <li>• Country = Canada</li> <li>• Postal Code = leave field blank or enter postal code of health care site (if registration system requires a postal code).</li> </ul>
<p><b>2. Out of Country</b></p>	<p>The recommended format value for addresses that are out of country are:</p> <ul style="list-style-type: none"> <li>• To ensure proper processing, the country name must be spelled correctly and in full. (Ex.: UAE is not acceptable for UNITED ARAB EMIRATES). Note: Some systems may support ISO character country codes.</li> <li>• The name of the country must be the last entry on the address. It is placed at the bottom, below the municipality/city name and any Postal Code/ZIP Code information.</li> <li>• Country codes can be verified through the following link: <a href="http://www.iso.org/iso/country_names_and_code_elements">http://www.iso.org/iso/country_names_and_code_elements</a></li> </ul>
<p><b>3. Two residences</b></p>	<p>A child might split their residence between two parents, living with the one parent for two weeks, then with the other parent for two weeks. When the registration system can capture multiple addresses, both addresses should be recorded, with one of the addresses noted as the primary address.</p>

### 3.6 Telephone Number

	Description
<b>Definition</b>	The telephone number is defined as the home, cell or work number provided by the client. The telephone number a client can be contacted at should be one of these telephone types.
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. An area code, along with the telephone number provided, is required.</li> <li>2. Only numeric characters are allowed as a telephone number.</li> <li>3. The telephone number field should be left blank if the client does not have a telephone number.</li> </ol>
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. All telephone numbers that a client has should be collected, e.g. home, cell, and work. Available system functionality may limit the number of phone numbers that can be collected.</li> <li>2. Registration staff will collect a telephone number from the client.</li> <li>3. Registration staff will confirm with the client that the telephone number collected can be shared.</li> </ol>

Scenario:	Best Practice:
1. Client requests that phone number not be shared.	Staff will inform the client that a telephone number is required for contacting the client and it is not always possible to prevent the number from being shared. If the client still insists that their telephone number should not be shared, the Registration staff will request the client to provide an alternate number where they can be reached.
2. Client provides a telephone number and indicates they will be available at that telephone number only in the evenings.	Staff will record the provided telephone number in the telephone field. Information about the availability of the client, e.g. evenings only, should be recorded in a separate notes field, if permitted by available system functionality.
3. Client indicates that they do not have a telephone at their residence.	Staff will inform the client that a telephone number is required for contacting the client. Staff will request the client provide an alternate number, where possible.

<b>Scenario:</b>	<b>Best Practice:</b>
4. Client provides an out-of-country telephone number.	If space and formatting restrictions permit, the number should be captured in the following format: International Access Code (011 to dial out of Canada) Country Code Area Code Local Phone Number, e.g. 011 49 89 123456

### 3.7 Identifiers

	Description
<b>Definition</b>	Identifiers are one of the key data attributes used to uniquely identify an individual. Identifiers, such as Medical Record Numbers (MRNs), Personal Health Numbers (PHNs) and/or Unique Lifetime Identifiers (ULIs) are unique to each stakeholder.
<b>Rules</b>	Each registration within the health care system must include at least one unique identifier.
<b>Best Practices</b>	<ol style="list-style-type: none"><li>1. Unique identifiers may contain both numeric values as well as alpha values.</li><li>2. Always request to view Alberta Personal Health Cards and provincial/territorial personal health cards and record the number and the start and end dates (as applicable) of the health card after verifying the identity of the client to the card.</li><li>3. To confirm health care coverage of the client, it may be necessary to contact provincial/territorial administrators. See: <a href="#">Appendix C – List of Canadian Health Care Contacts</a>.</li></ol>

## SECTION 4 – REGISTRATION BUSINESS PROCESSES

### 4.1 Identify the Client

	Description	Standard
<b>Definition</b>	<p>The first step in the Registration process is to positively identify the client who is presenting for service.</p> <p><b>WHY: Identifying the client is the first step in the registration process</b> and is conducted to ensure the client receiving treatment is who they purport to be, and that the results received from the health system are linked to the correct individual. The information collected during the registration process will be utilized when searching for the client in an EHR/EMR as well as linking clinical information to the correct client.</p>	<p><b>Standard #1</b> All individuals accessing the Alberta health system are required to uniquely identify themselves.</p> <p><b>Standard #4</b> All adult individuals accessing the Alberta health system will present at least two pieces of original supporting documentation to establish their unique identity. Children under 18 will present at least one piece of original supporting documentation to establish their unique identity.</p> <p><b>Standard #5</b> All client demographic information must be verified with the client before the registration process is completed.</p>
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. All individuals accessing the Alberta health service system must be uniquely identified.</li> <li>2. Clients, who are residents of Canada, will be required to provide their provincial health care card (if available).</li> </ol>	

	<b>Description</b>	<b>Standard</b>
<b>Best Practices</b>	<p>3. The client will be required to provide identification documents to prove their identity. The preference is for identification documents with a photo.</p> <p>1. Ask the client for their Alberta Personal Health Card, or other provincial/territorial health card.</p> <p>2. In addition to the Alberta Personal Health Card or other provincial/territorial health card, obtain one other document to identify the client, preferably one with photo-identification (if available).</p> <p>If the client does not have a provincial/territorial health card, then obtain two other documents from the lists below that support their identity. The client’s combined documentation should provide last name, first name, date of birth, gender, address and telephone number. The preferred, acceptable list of documentation includes:</p> <ul style="list-style-type: none"> <li>• Valid Driver’s License (including out of province or out of country issued licenses)</li> <li>• Valid Passport (including out of country issued passports)</li> <li>• Canadian Citizenship Card</li> <li>• Canadian Permanent Resident Card</li> <li>• Certificate of Indian Status Card</li> <li>• Valid Alberta Student Identification Card (including other Provincial and/or Territorial Government issued student identification cards)</li> <li>• Valid Provincial/Territorial Health Care Card</li> <li>• Federal, Provincial and/or Territorial Government issued identification with a photograph</li> </ul> <p>Other acceptable documentation includes:</p> <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Marriage Certificate</li> <li>• Legal Change of Name Certificate</li> <li>• Final Divorce Certificate</li> <li>• Citizenship/Immigration status document (Student Permit, Temporary Resident, Interim Federal Health Certificate of Eligibility)</li> <li>• Certified Copy of the Court Order for Name Change</li> <li>• Court of Queen’s Bench Adoption Order</li> </ul>	

	<b>Description</b>	<b>Standard</b>
	3. For children parents are expected to provide the Alberta personal health care card or other provincial/territorial health care card.	

<b>Scenario:</b>	<b>Business Process:</b>
1. A client presents at a health care site, requesting service.	Staff will request the client provide documentation to confirm the client's health care coverage and identity.

## 4.2 Search for the Client

	Description	Standard
<b>Definition</b>	<p>All demographic information provided by the client on registration is entered into the registration system to search for the client and to establish whether there are previous records for this client.</p> <p><b>WHY:</b> A search can return a client record containing similar demographics, but not represent the client presenting for service. Conducting a thorough search ensures that the correct client record is selected. Choosing a previously created historical record rather than creating a new record ensures continuity of medical care and can potentially reduce the number of duplicate records within the Alberta health system.</p>	<p><b>Standard #3</b> A search of all relevant registration systems will be conducted prior to completing a registration.</p> <p><b>Standard #4</b> All adult individuals accessing the Alberta health system will present at least two pieces of original supporting documentation to establish their unique identity. Children under 18 will present at least one piece of original supporting documentation to establish their unique identity.</p> <p><b>Standard #5</b> All client demographic information must be verified with the client before the registration process is completed.</p>
<b>Rules</b>	<p>1. A thorough search must be conducted prior to verifying a client. A thorough search is a series of searches using various data attributes. The order of search is dependant on the available functionality of each registration system. Where possible the following combinations of demographic attributes should be used when searching for a client:</p> <ul style="list-style-type: none"> <li>• Last name + first name</li> <li>• Last name + first name + date of birth</li> </ul>	



	<b>Description</b>	<b>Standard</b>
	<ul style="list-style-type: none"> <li>• Last name + first name + date of birth + gender</li> <li>• Last name + first name (variations of name)</li> <li>• PHN/ULI</li> <li>• Last name + first name + postal code</li> <li>• Last name + first name + telephone number</li> </ul> <p>2. The preferred, acceptable list of documentation includes:</p> <ul style="list-style-type: none"> <li>• Valid Driver’s License (including out of province or out of country issued licenses)</li> <li>• Valid Passport (including out of country issued passports)</li> <li>• Canadian Citizenship Card</li> <li>• Canadian Permanent Resident Card</li> <li>• Certificate of Indian Status Card</li> <li>• Valid Alberta Student Identification Card (including other Provincial and/or Territorial Government issued student identification cards)</li> <li>• Valid Provincial/Territorial Health Care Card</li> <li>• Federal, Provincial and/or Territorial Government issued identification with a photograph</li> </ul> <p>Other acceptable documentation includes:</p> <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Marriage Certificate</li> <li>• Legal Change of Name Certificate</li> <li>• Final Divorce Certificate</li> <li>• Citizenship/Immigration status document (Student Permit, Temporary Resident, Interim Federal Health Certificate of Eligibility)</li> <li>• Certified Copy of the Court Order for Name Change</li> <li>• Court of Queen’s Bench Adoption Order</li> </ul>	

Best Practices	Description	Standard
	<ol style="list-style-type: none"> <li>1. Enter appropriate attributes to conduct an exhaustive search based on the best search capabilities of the registration system (e.g. last name + first name or last name + first name + date of birth).</li> <li>2. Use a ULI search only after a name search has been conducted.</li> <li>3. Once a response has been received from the search, the selection is made by matching the data attributes on the selected record to the client's documentation and stated demographic information.</li> </ol>	

Scenario:	Business Process:
1. An uncommunicative client presents at a health care site for service.	Staff will not conduct a search. Registration staff will register the client as an Unidentified Client. See: <a href="#">Section 5.6 Unidentified Client</a>
2. A client who cannot communicate presents for health care service accompanied by someone who is able to communicate on their behalf, i.e. family member or interpreter.	Staff will request the person accompanying the client: <ul style="list-style-type: none"> <li>• request the client to provide valid documentation.</li> </ul> If documentation is not available, staff will: <ul style="list-style-type: none"> <li>• request the accompanying person provide the client's last name, first name, and middle name (if known),</li> <li>• request the accompanying person provide the client's date of birth,</li> <li>• request the accompanying person confirm the client's gender,</li> <li>• request the accompanying person provide the client's complete address, including phone number.</li> </ul>
3. A client presents at a health care site and indicates they are from out of province or out of country.	Staff will conduct a thorough search for a client prior to creating a new client registration (refer to Rule #1).
4. A child presents at a health care site with a last name that is different from the parent.	Staff will complete a thorough search (refer to Rule #1) using both the last name as presented as well as the last name of the parent. The parent will be questioned as to the documented name of the child, as well as the preferred name.
5. A client presents for service at a health care site; without an Alberta Personal Health card; and provides an Alberta address.	Staff will conduct a thorough search (refer to Rule #1).

### 4.3 Verify Client Information

	Description	Standard
<b>Definition</b>	<p>All demographic information provided by the client must be verified for accuracy before completing the client registration. It is understood that over time, demographic and contact information may change.</p> <p><b>WHY:</b> Verification is required to ensure accuracy of data and to prevent errors in both client identification as well as data entry. Correct demographic data will ensure all records are accurately linked in the EHR. Many areas of the Alberta health system mandate verification of the client’s identity. Verification of identity is a requirement prior to receiving blood or certain types of medication. It is equally important that a client be verified on initial registration to ensure they are the correct individual prior to receiving any service in the Alberta health system.</p>	<p><b>Standard #4</b> All adult individuals accessing the Alberta health system will present at least two pieces of original supporting documentation to establish their unique identity. Children under 18 will present at least one piece of original supporting documentation to establish their unique identity.</p> <p><b>Standard #5</b> All client demographic information must be verified with the client before the registration process is completed.</p>
<b>Rules</b>	<p>1. Staff will request documentation and ask questions to verify a client’s identity. Identity will be verified by requesting two pieces of identification, preferably a health care card as well as photo-identification (if available). The preferred, acceptable list of original documentation includes:</p> <ul style="list-style-type: none"> <li>• Valid Driver’s License (including out of province or out of country issued licenses)</li> <li>• Valid Passport (including out of province or out of country issued passports)</li> <li>• Canadian Citizenship Card</li> </ul>	

	<b>Description</b>	<b>Standard</b>
	<ul style="list-style-type: none"> <li>• Canadian Permanent Resident Card</li> <li>• Certificate of Indian Status Card</li> <li>• Valid Alberta Student Identification Card (including other Provincial and/or Territorial Government issued student identification cards)</li> <li>• Provincial/Territorial Health Care Card</li> <li>• Federal, Provincial and/or Territorial Government issued identification with a photograph</li> </ul> <p>Other acceptable documentation includes:</p> <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Marriage Certificate</li> <li>• Legal Change of Name Certificate</li> <li>• Final Divorce Certificate</li> <li>• Citizenship/Immigration status document (Student Permit, Temporary Resident, Interim Federal Health Certificate of Eligibility)</li> <li>• Certified Copy of the Court Order for Name Change</li> <li>• Court of Queen’s Bench Adoption Order</li> </ul> <ol style="list-style-type: none"> <li>2. Registration information will be verified by requesting two pieces of identification, preferably a health care card as well as photo-identification (if available) for the client.</li> <li>3. All demographic information will be confirmed with the client for accuracy.</li> <li>4. Individuals are required to provide acceptable proof before a change, update or correction will be made to their first, middle or last name and/or date of birth.</li> <li>5. Staff will visually confirm that the client’s demographic information matches the documentation presented by the client or their sponsor (i.e. family member, relation, close friend, co-worker, guardian or interpreter).</li> <li>6. If the client presents with no documentation, the registration will be initiated with the verbal information provided by the client. The client or their sponsor (i.e. family member, relation, close friend, co-worker, guardian or interpreter) will be asked to provide documentation to conclude the initial registration process.</li> </ol>	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Staff will request the client state the information without prompting; do not read the information to the client for confirmation e.g. “What is your current address and telephone number”.</li> </ol>	

	<b>Description</b>	<b>Standard</b>
	<ol style="list-style-type: none"> <li>2. Staff will request documentation that contains current information.</li> <li>3. Staff will question the client if the information on the documentation provided does not match what they have stated. An example may be an Alberta Personal Health Card which may have a preferred name (e.g. Betty White) versus a documented name on a driver's licence (e.g. Elizabeth White).</li> <li>4. Staff will request proof of changes to demographic information by asking for documentation as noted in Rule #4.</li> <li>5. Staff will confirm any change by repeating it back to the client, after the change has been entered and prior to saving the client record.</li> <li>6. Staff will perform a final comparison to the source documents once the information has been entered into the registration system and prior to saving the record.</li> <li>7. Staff are expected to validate the requested changes by viewing the supporting documentation.</li> </ol>	

<b>Scenario:</b>	<b>Business Process:</b>
<ol style="list-style-type: none"> <li>1. It is noted that the date of birth and/or name on the Alberta Personal Health Card differs from the date of birth and/or name in the registration system. Client's documentation identifies the correct date of birth and/or name to be the date of birth and/or name in the registration system.</li> </ol>	<p>Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct the date of birth and/or name on their Alberta Personal Health Card.</p>
<ol style="list-style-type: none"> <li>2. It is noted that the date of birth and/or name on the Alberta Personal Health Card differs from the date of birth and/or name in the registration system. Client's documentation identifies the correct date of birth and/or name to be on the Alberta Personal Health Card.</li> </ol>	<p>The date of birth and/or name, as supported by documentation, will be corrected in the registration system.</p>
<ol style="list-style-type: none"> <li>3. It is noted that the date of birth and/or name on the Alberta Personal Health Card and in the registration system do not match the documentation presented. The Alberta Personal Health Card and the registration system are both incorrect.</li> </ol>	<p>The date of birth and/or name, as supported by documentation, will be corrected in the registration system. Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct their date of birth and/or name on their Alberta</p>

Scenario:	Business Process:
	Personal Health Card.
4. A client presents for service at a health care site with no documentation and requires immediate treatment, e.g. soccer coach brings an injured player to an Emergency Department.	The client will be registered with as much information as can be confirmed. Where possible, registration staff will confirm the information with the client or legal next-of-kin (when or if they arrive at the health care site).
5. A client presents at a health care site and declares their gender to be different from that noted in the registration system.	<p>If the gender in the registration system is determined to be a clerical error, the gender will be updated to the gender as stated by the client.</p> <p>Registration staff will register the client in the gender they present or request.</p> <p>If the client indicates they are undergoing a gender reassignment, staff will update the gender in the registration system to the gender requested by the client. Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct the gender on their Alberta Personal Health Card.</p>
6. When reviewing a client’s address information, staff note that the client’s street address shows as unknown.	Staff will indicate to the client that some information is not on the file. Staff will request the client confirm all demographic information. The information will be corrected in the registration system.
7. A client presents at a health care site and indicates they are currently homeless. Search results show a previous record with a complete address and phone number.	See: <a href="#">Section 5.1 Homeless Client.</a>

## 4.4 Register the Client

	Description	Standard
<p><b>Definition</b></p>	<p>All demographic information as provided by the client is entered into the registration system.</p> <p><b>WHY:</b> This completes the registration process and allows the client to proceed for health service.</p>	<p><b>Standard #2</b> Only true and accurate data about clients is recorded in the registration system. This excludes fetuses, body parts, specimens and non-humans (pets).</p> <p><b>Standard #4</b> All adult individuals accessing the Alberta health system will present at least two pieces of original supporting documentation to establish their unique identity. Children under 18 will present at least one piece of original supporting documentation to establish their unique identity.</p> <p><b>Standard #6</b> A unique identifier is assigned to all clients in the registration system.</p> <p><b>Standard #7</b> A client registration must include a minimum set of demographic information. The minimum demographic information consists of Last Name, First Name, Date of</p>

	Description	Standard
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. Every registration in the Alberta health system <i>should</i> include a ULI as one of the unique identifiers.</li> <li>2. A ULI is <b>not</b> assigned to a client that cannot be positively identified, or where the minimum data set is not met.</li> <li>3. The client will be assigned to a registration category for billing purposes, if applicable.</li> </ol> <p>Registration staff will:</p> <ol style="list-style-type: none"> <li>4. Request the documented first and last name, as well as all other names that the client typically uses, e.g. nicknames.</li> <li>5. Request the client spell their names.</li> <li>6. Request the gender.</li> <li>7. Request the date of birth. Request the client state the month as a word.</li> <li>8. Request the primary residential address.</li> <li>9. Request at least one telephone number.</li> <li>10. Request the client state the information without any prompting.</li> <li>11. Record as much information as available from the client.</li> </ol> <p>Registration staff will <b>NOT</b>:</p> <ol style="list-style-type: none"> <li>12. Read the information to the client for confirmation.</li> <li>13. Ask the client to verify the information on the screen.</li> </ol>	Birth, Gender and a unique identifier.
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Name: The client’s documented name is recorded as the primary name for the registration as confirmed when verifying the client information (Refer to Section 4.3).</li> <li>2. Date of Birth: The client’s date of birth, as verified by documentation, is recorded.</li> <li>3. Gender: The client’s gender is recorded as the client presents/requests.</li> <li>4. Address: The client’s address is recorded as the client provides.</li> <li>5. Telephone: The client’s telephone number is recorded as the client provides.</li> </ol>	



	Description	Standard
	<p>6. If the client’s documentation indicates they are from outside Alberta or Canada, if necessary, for billing purposes, staff will ask if the client:</p> <ul style="list-style-type: none"> <li>- Has ever visited a hospital or doctor’s office in Alberta?</li> <li>- Has been in the health care site before?</li> <li>- Has ever lived in Alberta?</li> </ul>	

Scenario:	Business Process:
<p>1. A client indicates the name on their Alberta Personal Health Card is incorrect.</p>	<p>Staff will register/update the client information using the name that can be supported by the viewing of documentation from the acceptable list of documentation.</p> <p>Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct the name on their Alberta Personal Health Card.</p>
<p>2. A client requests that their name be changed from Theodore to Billy in the registration system.</p>	<p>If staff can confirm the client has government-issued documents to support the name change, the name can be updated accordingly.</p> <p>If the client does not have documentation, staff will record the new name as an alias name in the registration system. If only one name is allowed in the registration system, the documented name should be retained and the client informed of this.</p>
<p>3. A client requests that their address be updated in the registration system.</p>	<p>Staff will update the address in the registration system.</p>
<p>4. A client does not want their telephone number recorded in the registration system.</p>	<p>Staff will inform the client that at least one telephone number is required for contact reasons. Staff will request a phone number from the client that can be recorded in the registration system.</p>
<p>5. A client requests that their child’s last name be changed to match their own name.</p>	<p>Staff will request proof of the new documented name for the child. See: <a href="#">Section 4.3 Verify Client Information</a> Rule #1. If satisfactory</p>

<b>Scenario:</b>	<b>Business Process:</b>
	<p>proof is provided, the name can be updated and will become the primary name registered. The previous name can be added as an alias (based on available system functionality).</p> <p>If satisfactory proof cannot be provided, the new name can only be recorded as an alias name in the registration system. If only one name is allowed in the registration system, the documented name should be retained and the client informed of this.</p>
<p>6. A client indicates their gender is different from that noted on the Alberta Personal Health Care Card and the registration system.</p>	<p>Staff will register the client in the gender they present or request.</p> <p>Staff will direct the client to contact Alberta Health or an authorized Registry Agent Office to correct the gender on their Alberta Personal Health Card.</p>

## SECTION 5 - UNIQUE REGISTRATION BUSINESS PROCESSES

### 5.1 Homeless Client

	Description	Standard
<b>Definition</b>	A Homeless Client or a Client with no fixed address is a client that may be a temporary or permanent resident in the province of Alberta. The terms indigent and transient are synonymous with homeless.	
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. Registration staff will collect as much demographic information as possible from any individual that presents for health service and indicates that they are homeless, indigent or transient.</li> <li>2. Registration staff will request supporting documentation (if available) to ensure that the identity of the individual matches who they purport to be.</li> <li>3. A thorough search must be performed. See: <a href="#">Section 4.2 Search for the Client</a>.</li> <li>4. In cases where the identity is in doubt, a new record should be created versus overlaying an existing record.</li> </ol>	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. When a client has no fixed address and the registration system requires an address, an "indigent" address may be entered to complete the registration process.</li> <li>2. The recommended values to enter if the client is considered indigent: <ul style="list-style-type: none"> <li>• Address Line 1 = "No Fixed Address", or address of temporary shelter</li> <li>• City = Point of Encounter City</li> <li>• Country = Canada</li> <li>• Postal Code = leave field blank or enter postal code of health care site (if registration system requires a postal code).</li> </ul> </li> </ol>	

<b>Scenario:</b>	<b>Business Process:</b>
1. A client presents for services and indicates they are currently homeless. A thorough search does not locate any prior record in the registration system.	The registration is completed with the minimum data set of values recorded. The address is completed using "No Fixed Address" and point of encounter city in the required fields. The postal code of the health care site is entered if it is a mandatory field. If a field is not required from a registration system perspective, it is left blank.
2. A client indicates they are homeless and a search response displays a record with a prior address and phone number.	The registration is updated to indicate that the current address for this individual is "No Fixed Address." Refer to: Scenario and Business Process #1.

## 5.2 Identity Theft

	Description	Standard
<b>Definition</b>	Identity theft occurs when one or more individuals receive health care services by fraudulently using the identification of another individual. Identity theft can result in life-threatening situations in the health system; e.g. one individual may receive specialized treatment intended for another. Most cases of identity theft will be identified by health care sites.	
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. Each reported case of Identity Theft will be reviewed individually for the most appropriate course of action.               <ol style="list-style-type: none"> <li>1. If registration is required for the purposes of receiving medical care, the client will be registered using the Unidentified Client Standard. See: <a href="#">Section 5.6 Unidentified Client</a>.</li> </ol> </li> <li>2. Staff will report all cases of suspected identity theft to a supervisor.</li> <li>3. Staff will contact site Security Personnel for all registrations where it is believed that the individual presenting for service is not the same client as the documentation or demographic information being used.</li> <li>4. All cases of suspected and known Identity Theft are to be reported to the Police by the victim and/or the victimized party. Alberta Health tip line should also be notified at 1-866-278-5104.</li> </ol>	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Request additional documentation to validate identity as presented.</li> <li>2. Do not update demographic information retrieved through searching with information being presented. If there is any doubt as to the identity of the individual presenting, a new registration should be started.</li> <li>3. Prior to any changes/updates being made to either clinical or administrative records, careful consideration must be given to the impact of these changes on the electronic health record for the client.</li> <li>4. If a client presents stating that they believe that their identity has been assumed for the purposes of health care fraud, advise the client to contact the Police Department and Alberta Health. As well, advise your immediate supervisor.</li> </ol>	

**Scenario:**

**Business Process:**

<b>Scenario:</b>	<b>Business Process:</b>
1. A client presents at a health care site with identification and requires immediate medical attention. The registration clerk reviews the identification and believes that the identification does <b>not</b> belong to the client presenting.	Staff will: <ol style="list-style-type: none"> <li>1. Request additional identification,</li> <li>2. Register the client using the unknown naming convention,</li> <li>3. Notify their direct supervisor,</li> <li>4. Contact Security.</li> </ol>
2. A client presents at a Pharmacy with a prescription and the pharmacist notes that this prescription is contra-indicated based on the prescription filled previously at another pharmacy. The client states they did not receive the previous medication.	The client is requested to report the circumstances to the Police as well as to the Alberta Health Tip Line in cases of suspected or confirmed abuse of the personal health card. The tip line telephone number is 1-866-278-5104. The pharmacist must start a new record for this client and may use the Unknown Name convention.

### 5.3 Newborn, Born In Alberta

	Description	Standard
<b>Definition</b>	An Alberta Newborn is a child born in Alberta that is 28 days or less at the time of registration.	
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. Registration of a newborn born in a health care site is a two step process and requires entry into the health care site's registration system as well as Alberta Health's Alberta Health Care Insurance Plan (AHCIP) registration system. This system is currently accessed through the Alberta Health registration system known as Person Directory (PD). Entry of information into Alberta Health's PD registration system is necessary to assign a Unique Lifetime Identifier (ULI) to the newborn and start the process used to identify and track all registered births for the Newborn Metabolic Screening (NMS) program. It is also used to help determine a newborn's eligibility for AHCIP coverage.</li> <li>2. An Alberta ULI should be assigned through Alberta Health's PD registration system within 24 hours of birth and prior to the newborn's discharge from the health care site.</li> <li>3. All newborns should be added to the health care site's registration system as soon as possible after birth.</li> <li>4. All demographic information for the newborn should match between Alberta Health's PD registration system and the health care site's registration system.</li> <li>5. The health care site should record the first and middle name(s) and any other core demographics that were not recorded at the time of initial registration, in both the health care site's registration system as well as Alberta Health's PD registration system, prior to discharging the newborn from the health care site.</li> <li>6. All newborns that are <b>NOT</b> born in a health care site and not later admitted for treatment do not need to be registered in the health care site's registration system. Registration in Alberta Health's PD registration system is still required. This could be done by the health care site closest to the place of residence of the family or a designated health care site, by an attending midwife, by Public Health or through Alberta Health. Site specific procedures may apply.</li> <li>7. If a newborn dies in a health care site, the date of death must be entered into the health care site's registration system and the Alberta Health's PD registration system as soon as possible after the notification of death.</li> </ol>	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. The Add Newborn functionality in Alberta Health's PD registration system is only used for</li> </ol>	

	Description	Standard
	<p>newborns born in Alberta.</p> <ol style="list-style-type: none"> <li>2. When registering the newborn for an Alberta ULI in Alberta Health’s PD registration system, all required fields must be filled in. For specific procedures, refer to the Alberta Health PD Registration User Guide, Sections 2 and 3: <a href="https://ab-ehr-learningcentre.albertanetcare.ca/person_directory_registration_user_guide_v-2.1.pdf">https://ab-ehr-learningcentre.albertanetcare.ca/person_directory_registration_user_guide_v-2.1.pdf</a></li> <li>3. A standard naming convention is used for all un-named newborns in Alberta Health’s PD registration system. The recommended naming convention for newborns is:               <ul style="list-style-type: none"> <li>• Last name = Last name as recorded on the Physician Notice of Birth. If the birth mother’s last name is used and it is different than the father’s last name, an alias with the last name of the father should be added to minimize the number of duplicate identities that might be created.</li> <li>• First name = If the child’s given name is not known yet, the No First Name check box must be selected. The name can be added later.</li> </ul> </li> <li>4. A standard naming convention is used for all un-named newborns in health care site registration systems. The recommended naming convention for newborns is:               <ul style="list-style-type: none"> <li>• Last name = Last name of birth mother or father,</li> <li>• First name = gender, i.e. Male or Female.</li> </ul> </li> </ol>	

Scenario:	Business Process:
<p>1. A child is born at a health care site.</p>	<p>Staff will register the newborn in the health care site’s registration system. Staff will access Alberta Health’s PD registration system within 24 hours to complete the registration and acquire a new Alberta ULI.</p> <p>At or prior to discharge, staff will update the newborn’s record with the newborn’s name (if known), in both the health care site’s registration system and Alberta Health’s PD registration system.</p>
<p>2. A child is born outside of a health care site, e.g. born at home and is <b>NOT</b> admitted to the health care site.</p>	<p>The child would not be registered in the health care site’s registration system. The child should be registered in Alberta Health’s PD registration system by Alberta Health (the parents should be instructed to call Alberta Health to facilitate the registration of the child). Alternately, the child could</p>



<b>Scenario:</b>	<b>Business Process:</b>
	be registered in Alberta Health’s PD registration system by an attending midwife, by Public Health or by staff within a health care site.
3. A child is born outside of a health care site, e.g. born at home or born en-route and <b>IS</b> admitted to the health care site.	The child should be registered in the same manner as a child born at the health care site. Refer to: Scenario and Business Process #1

## 5.4 Clients Requesting Confidentiality

	Description	Standard
<b>Definition</b>	A client may request their demographic information and/or the demographic information of their dependants be made confidential due to concerns that their personal safety will be compromised if demographic information is linked or referenced to associated third parties (e.g. next of kin, emergency contacts or family members).	
<b>Rules</b>	Any expressed wishes of an individual, together with other relevant factors, must be considered when deciding how much health information to disclose.	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. A second Alberta PHN/ULI should not be issued to the client to support the confidentiality request.</li> <li>2. Staff will request the client provide an alternate address and phone number.</li> <li>3. Staff should follow site procedures to handle personal safety situations.</li> </ol>	

Scenario:	Business Process:
<ol style="list-style-type: none"> <li>1. A client presents at a health care site, indicating concerns for personal safety, requesting that the address recorded on their health record be removed from view.  Example: client who is concerned about abusive spousal relationship.</li> </ol>	<p>Staff will receive a client's request to make their record confidential. Staff will request an additional address from the client to record on the client's file. Staff will follow the site procedures for handling clients requesting confidentiality of their demographic and clinical information.</p>

## 5.5 Pre-Registration, Recurring Visits or Non Face to Face Registration of a Client

	Description	Standard
<b>Definition</b>	A client may be required to pre-register for services in advance of receiving the service. Pre-registration visits can be scheduled many months prior to an actual health care site visit and are often done as a non-face to face registration. Client demographics may change in the interim, and consequently must be verified with the client when they actually present for service.	<b>Standard #2</b> Only true and accurate data about clients is recorded in the registration system. This excludes fetuses, body parts, specimens and non-humans (pets).
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. All demographic data collected through a pre-registration process must be verified with the client when they present for service.</li> <li>2. Staff will follow all the registration process standards when a client is pre-registered for service or presenting for a recurring visit.</li> <li>3. As part of the registration process, staff will ensure they have uniquely identified the client and will update the client's demographic information.</li> </ol>	<b>Standard #5</b> All client demographic information must be verified with the client before the registration process is completed.
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. Each time the client presents for a pre-registered service or a recurring visit, staff will verify the client's information. See: <a href="#">Section 4.3 Verify Client Information</a>.</li> <li>2. Staff will inform all clients that are contacted for pre-registration that they are to bring documentation to verify the information gathered during the pre-registration.</li> </ol>	

Scenario:	Business Process:
<ol style="list-style-type: none"> <li>1. A client is scheduled for ongoing treatment, over a 6 month period, at the health care site. On arrival at the health care site, the client is directed to the unit providing the treatment, not the registration desk.</li> </ol>	When the client presents for treatment or appointment, staff will request the client verify all the demographic information in the registration system.
Scenario:	Business Process:

2. A client is registered and referred to another health care site for health services (e.g. for laboratory work) and the submitted documentation from the provider contains demographic error(s) relating to the client's identity.

When documentation received from pre-registering a client contains demographic errors relating to the client's identity, staff must contact the client or the provider to verify the accuracy of the information submitted and then correct any errors or omissions.

## 5.6 Unidentified Client

	Description	Standard
<b>Definition</b>	<p>An Unidentified Client is a client that presents or is presented for health services and whose identity cannot be determined due to one or more factors including:</p> <ul style="list-style-type: none"> <li>• Client is unconscious, uncommunicative and or combative,</li> <li>• Client cannot identify themselves or provide any demographic information that would support a positive identity.</li> </ul>	
<b>Rules</b>	<ol style="list-style-type: none"> <li>1. Each health care site will have specific procedures for assigning Identifier Types and numbers (e.g. Medical Record Number) for the unidentified client.</li> <li>2. An Alberta ULI is <b>not</b> assigned to an unidentified client but a site unique identifier <b>is</b> assigned.</li> <li>3. Site specific procedures apply.</li> <li>4. All fields that can be left blank (registration system dependent) should be left blank. See to Section 3.3 Unknown Date of Birth Rule.</li> <li>5. Name Fields: Do not use John or Jane Doe. See: <a href="#">Section 3.1 Name</a>.</li> </ol>	
<b>Best Practices</b>	<ol style="list-style-type: none"> <li>1. All unidentified clients are to be registered in the registration system for the purpose of assigning an identifier such as a MRN. The creation of a temporary transitory client identity is permitted in these circumstances.</li> <li>2. If the identity of the client cannot be determined through the identity interview process, an identifier under which a partial identity can be recorded will be assigned.</li> <li>3. When a client's name cannot be determined, and the registration system requires a name, an "unknown" name may be entered to complete the registration process. Available system functionality may dictate different allowable values for unknown names. Do NOT use John Doe, or Jane Doe. The recommended default value if name is not known: Last name = Client ID/MRN for the client, First name = gender of client (i.e. Male or Female).</li> <li>4. The address field for all unidentified clients is to be completed using "Unknown" as the first line of the address and the City/Town of the health care site as the City/Town. All fields that can be left blank (registration system dependent) should be left blank.</li> </ol>	

<b>Scenario:</b>	<b>Business Process:</b>
1. A client presents for health service and does not speak English and has not brought an interpreter or supporting documentation.	This client is registered as an unidentified client (following appropriate procedures as outlined in site specific documents) until additional demographic information can be gathered through an interpreter or from immediate family.
2. A client presents alone and appears to have amnesia.	This client is registered as an unidentified client (following appropriate procedures as outlined in site specific documents) until additional demographic information can be gathered.
3. A client refuses to provide any identifying demographic information on registration but requires medical care.	This client is registered as an unidentified client (following appropriate procedures as outlined in site specific documents) until additional demographic information can be gathered.
4. A client is brought in by ambulance and is incoherent and unable to communicate. EMS provides EMS documentation which includes patient demographic information that was collected at the scene. There is no family present to confirm the patient's identity.	This client is registered as an unidentified client (following appropriate procedures as outlined in site specific documents). Additional demographic information will be required to confirm identity.

## Appendix A – Definitions/Acronyms

Term	Definition
AB	An acronym for the Province of Alberta.
ADT system	An acronym for a system that is used to track client Admissions, Discharges and Transfers.
AHCIP	An acronym for Alberta Health Care Insurance Plan.
AH	An acronym for the Department of Health, Government of Alberta.
Archiving	The process of saving data for later reference or use.
Client	For the purposes of this document, a client is defined as a human being interacting with the health care delivery system and does not include non-humans (animals), body parts or fetuses.
Clinical Information	Includes any information captured on the client health record by providers, e.g. test results, image results and dictated reports from health service delivery.
Custodial Parent	The parent with whom the child lives for the greater part of the year.
Demographic	Pertaining to characteristics of the client, such as name, gender, date of birth and address.
DOB	An acronym for Date of Birth.
Downstream Applications	Any computer system (target) that is fed data from another computer system (source).
EHR	An acronym for Electronic Health Record.
EMR	An acronym for Electronic Medical Record system, a system used in physician offices for registering clients.
Health System	Label applied to the entire continuum of care within the Alberta health environment from initial registration for eligibility to final delivery of health care services.
Documented Name	The name of a client recognized on official records, especially as recorded on a birth certificate or as changed by legal process.
MDS	An acronym for Minimum Data Set, which is the minimum demographic information collected on a client. It consists of Last Name, First Name, Date of Birth, Gender and a unique

Term	Definition
	identifier.
MRN	An acronym for Medical Record Number. A unique number assigned at a health care site for an individual's service delivery records. Utilized for filing of paper records and unique identification of electronic records.
Name Token	A name token is one component of a name, e.g. first name, middle name or last name.
Newborn Metabolic Screening (NMS) program	The purpose of the NMS program is to identify and treat infants for metabolic disorders that can lead to severe physical disabilities, developmental delay, other health problems or even death. The newborn screen is carried out on a blood sample collected from a baby's heel between 24 hours and 72 hours of age.
OIPC	An acronym for Office of the Privacy Commissioner.
PD	An acronym for Person Directory, the AH source system containing all the ULI's/PHN's created in the Alberta health system.
Patient	Another term for "Client".
Personal Health Card	A card issued by a Canadian province demonstrating that the client is eligible for health care services.
PHN	An acronym for Personal Health Number, also understood to be a unique lifetime identifier with confirmed eligibility.
Policy	A set of ideas or a plan of what to do in particular situations that has been agreed officially by a group of people, a business organization, a government or a political party.
Registration System	The data collection system used by a Health Service Provider to register clients, e.g. ADT, EMR, Radiology Information System (RIS), Laboratory Information System (LIS), PHP, and others.
Rule	An accepted description or instruction that states the way things are or should be done, and tells you what you are allowed or are not allowed to do, i.e. a prescribed guide for conduct or action.
Stakeholder	A stakeholder is recognized as a source that contributes a unique source id, e.g. RSHIP is not a stakeholder, but Aspen is. Stakeholders are custodians of source data.
Standard	A level of quality, a series of steps that is generally accepted, an acknowledged measure established or widely recognized as a model of authority or excellence.
Test Data	A set of data developed specifically to test the adequacy of a computer application.



Term	Definition
Trusted Source	A stakeholder who follows agreed upon (common) practices to ensure their data is of high quality, i.e. their data can be trusted.
ULI	An acronym for Unique Lifetime Identifier.
Unique Identifier	Any <a href="#">identifier</a> which is guaranteed to be unique among all identifiers used for those objects and for a specific purpose, such as a ULI in Alberta.
Unidentified Client	A client that presents or is presented for health services and whose identity cannot be determined.
Valid	Some documents are issued with start or end dates or expiry dates (i.e. provincial health cards, passports, driver's licenses). The term valid is used when the start date is not in the future and the end or expiry dates have not been reached.
Validate, Validation	The process of authenticating documentation presented by a client to support their claims to an identity or eligibility in a program.
Verification	The checking or investigating undertaken by the registration clerk/service provider to confirm or substantiate a claim or a statement made by a client.

## **Appendix B – List of Authorized Registry Agents**

Albertans may register for AHCIP coverage and update their information at participating registry agent locations across the province, free of charge.

Please refer to this link for a complete and current listing of all participating Alberta Registry Agents:

<http://www.health.alberta.ca/AHCIP/registration-locations.html>

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## Appendix C – List of Canadian Health Care Contacts

### Physician's Resource Guide

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#### Province/territory contact information and claim submission time limits

**British Columbia**

Medical Services Plan  
1515 Blanshard Street  
Box 9035  
Station Provincial Government  
Victoria BC V8W 9E2  
Phone: 250-386-7171  
Fax: 250-952-3101  
Time limit: 3 months

**New Brunswick**

Department of Health and Wellness  
PO Box 5100  
Fredericton NB E3B 5G8  
Phone: 506-453-2283  
Fax: 506-453-2726  
Time limit: 6 months

**Northwest Territories**

Department of Health and Social Services  
Health Services Administration  
Second floor, IDC Building  
Bag #9  
Inuvik NT X0E 0T0  
Phone: 1-800-661-0830  
Fax: 867-777-3197  
Time limit: 6 months

**Nunavut**

Health Insurance Programs  
Department of Health and Social Services  
Bag 003  
Rankin Inlet NT X0C 0G0  
Phone: 1-800-661-0833  
Fax: 867-645-8092  
Time limit: 1 year

**Manitoba**

Manitoba Health  
300 Carlton Street  
Winnipeg MB R3B 3M9  
Phone: 204-786-7101  
Fax: 204-783-2171  
Time limit: 6 months

**Newfoundland and Labrador**

Newfoundland and Labrador Medical Care Plan  
P.O. Box 5000  
Grand Falls - Windsor NL A2A 2Y4  
Phone: 709-292-4000  
Fax: 709-292-4053  
Time limit: 6 months

**Nova Scotia**

Medical Services Insurance  
PO Box 500  
Halifax NS B3J 2S1  
Phone: 902-468-9700  
Fax: 902-490-2275  
Time limit: 6 months

**Ontario**

Ministry of Health and Long-Term Care  
Support Services Manager  
75 Albert Street  
Ottawa ON K1P 5Y9  
Phone: 613-783-4401  
Fax: 613-237-3246  
Time limit: 6 months

**Physician's Resource Guide**

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**Prince Edward Island**  
Department of Health and Social Services  
Medicare Division  
PO Box 3000  
Montague PE C0A 1R0  
Phone: 902-838-0900  
Fax: 902-838-0940  
**Time limit: 6 months**

**Québec \***  
Services médicaux hors du Québec  
Régie de l'assurance-maladie du Québec  
Case postale 6600  
Québec QC G1K 7T3  
Phone: 1-800-463-4776  
Fax: 418-646-9251  
**Time limit: 2 years**

**Saskatchewan**  
Saskatchewan Health  
3475 Albert Street  
Regina SK S4S 6X6  
Phone: 306-787-3475  
Fax: 306-787-3761  
**Time limit: 6 months**

**Yukon**  
Department of Health and Social Services  
Health Services Branch  
PO Box 2703  
Whitehorse YT Y1A 2C6  
Phone: 867-667-5209  
Fax: 867-393-6486  
**Time limit: 6 months**

\* Québec does not participate in the medical reciprocal program.

**Valid Insured Health Services Plan Cards**  
**Cartes valides des régimes de soins de santé assurés**



Interprovincial Health Insurance Agreements Coordinating Committee - April 2014  
Comité de coordination des ententes interprovinciales en assurance-santé - Avril 2014