

## COMMON LANGUAGE USE: DEFINITIONS

In order to work towards standardizing and coordinating care across the health system it is important to use a common lexicon. This document provides definitions which can be found in existing recent Health PEI policy documents. The purpose of this document is to assist staff and physicians when writing policies and clinical standards, and to encourage a common language use when appropriate. **Please note that this is not a definitive list, and is to be used as a guide.** Attempts to use a common language is encouraged. If you have any questions, please contact the Policy Coordinator at [healthpeipolicy@ihis.org](mailto:healthpeipolicy@ihis.org)

# Health PEI

# Santé Î.-P.-É.

*Strategy & Performance, Last Updated: March 10, 2015*

| Term                            | Definition  | Policy Document                                 |
|---------------------------------|---|---|
| <b>Absence from Work</b>        | Is any absence when an employee does not report for a scheduled shift or any part of such shift in excess of one hour.  | Attendance Management Policy                    |
| <b>Accreditation Canada</b>     | A not-for-profit, independent organization accredited by the International Society for Quality in Health Care (ISQua) that provides national and international health care organizations with an external peer review process to assess and improve the services they provide to their patients and clients based on standards of excellence. | Point of Care Testing Policy                    |
| <b>Accumulated Amortization</b> | Represents the total consumed or used portion of capital assets.  | Tangible Capital Assets Policy                  |
| <b>Admission List</b>           | The point of entry for individuals seeking admission to Long-Term Care beds. Upon successful completion of the application process, and if in hospital a medical discharge order has been received, an individual is eligible to be placed on the admission list.   | First Available Long-Term Care Bed Policy       |
| <b>Adverse Drug Event</b>       | An injury from a medicine or lack of an intended medicine. Includes adverse drug reactions and harm from medication incidents.  | Medication Reconciliation – Acute Care Standard |
| <b>Adverse Event</b>            | An unexpected, undesired and harmful incident directly associated with the care or services provided to the patient, rather than to the patient's underlying medical condition.   | Quality Improvement Activity Policy             |
| <b>Alternate Decision Maker</b> | A person who is authorized to make a decision on behalf of a person who is incapable with respect to treatment.   | Discharge Policy                                |

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| Term   | Definition  | Policy Document                                 |
|--|---|---|
| <b>Alternate Level of Care</b>                                     | When a patient is occupying a bed in a facility and does not require the intensity of resources/services provided in that care setting (e.g. Acute, Complex Continuing Care (Chronic), Mental Health or Rehabilitation), the patient must be designated Alternate Level of Care (ALC) at that time by a physician or her/his designate. The authorized designate may be a long-term care assessor, patient care manager, discharge planner or care team member.                               | Discharge Policy                                |
| <b>Alternate Level of Care - Community Care Awaiting Placement</b> | A patient who remains in an acute care bed and is awaiting placement in a community care facility.  | Nursing Documentation Standard                  |
| <b>Alternate Level of Care - Long-Term Care Awaiting Placement</b> | A patient who remains in an acute care bed and is awaiting placement in a long-term care facility. (Note: This ALC designation will have a financial charge to the patient.)  | Alternate Level of Care Designation and Billing |
| <b>Alternate Level of Care - Long Term Care Awaiting Placement</b> | A patient who remains in an acute care bed and is awaiting placement in a long term care facility.  | Nursing Documentation Standard                  |
| <b>Alternate Level of Care - Palliative</b>                        | Care provided that improves the quality of life of patients and their families facing the problems associated with terminal illness. This designation only applies to acute care facilities and should be used when a patient is either awaiting placement in a palliative care bed (i.e. PE Home), or is awaiting discharge to the Integrated Palliative Care program, or is being palliated in an acute care bed/facility because a more appropriate bed/facility is not available to them. | Nursing Documentation Standard                  |
| <b>Alternate Level of Care - Palliative</b>                        | Care provided that improves the quality of life of patients and their families facing the problems associated with terminal illness. This designation only applies to acute care facilities and should be used when a patient is either awaiting placement in a palliative care bed (i.e. PE Home), or is awaiting discharge to the Integrated Palliative Care Program, or is being palliated in an acute bed/facility because a more appropriate bed/facility is not available to them.      | Alternate Level of Care Designation and Billing |

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| Term  | Definition   | Policy Document                                 |
|---|--|---|
| <b>Alternate Level of Care – Respite / Social</b>                 | The provision of short-term, temporary relief to those patients who are being cared for primarily by family members and who might otherwise require permanent placement in a facility outside the home.  | Alternate Level of Care Designation and Billing |
| <b>Alternate Level of Care (ALC)</b>                              | When a patient is occupying a bed in a facility and does not require the intensity of resources/services provided in that care setting (Acute, Complex Continuing Care (Chronic), Mental Health or Rehabilitation), the patient must be designated Alternate Level of Care (ALC) at that time by a physician or his/her designate. The authorized designate may be a long-term care assessor, patient care manager, discharge planner, or care team member. The decision to assign ALC status is not a Health Information Management responsibility. | Alternate Level of Care Designation and Billing |
| <b>Alternate Level of Care (ALC)</b>                              | When a patient is occupying a bed in a facility and does not require the intensity of resources/services provided in that care setting ( Acute Complex Continuing Care (Chronic), Mental Health or Rehabilitation), the patient must be designated Alternate Level of Care (ALC) at that time by a physician or his/her designate. The authorized designate may be a long term care assessor, patient care manager, discharge planner, or care team member.  | Nursing Documentation Standard                  |
| <b>Alternate Level of Care- Community Care Awaiting Placement</b> | A patient who remains in an acute care bed and is awaiting placement in a community care facility. (Note: It is the intentions of this policy to have this ALC designation have a financial charge to the patient once ISM is set up to perform the necessary functions.)  | Alternate Level of Care Designation and Billing |
| <b>Alternate Level of Care– Other</b>                             | Patients who mainly need nursing management and time to recover. This designation may be applied to any patient who does not need acute care and who does not fit into another ALC category. An appropriate Z-code to reflect the true needs of the patient will be applied by Medical/Health Records from information provided in the patient’s chart.  | Alternate Level of Care Designation and Billing |

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| Term   | Definition  | Policy Document  |
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| <b>Alternative Pay Physicians</b>              | Are physicians whose compensation for physician services is provided on a salary or contract for clinical services basis.   | Professional Work Site for Alternative Pay Physicians Policy |
| <b>Amortization</b>                            | Is the process of allocating the cost of a capital asset over its estimated useful life in order to match expenditures with the revenues generated or public services provided. The method of amortization chosen is intended to allocate the asset cost to the time period of usage.   | Tangible Capital Assets Policy                               |
| <b>Approved Accommodation</b>                  | Any facility approved by Health PEI which provides accommodation to patients requiring outpatient service.  | Out-of-Province Outpatient Accommodation Assistance Policy   |
| <b>Approved for Admission</b>                  | A person assessed at a level of care appropriate for admission into a LTC facility through the use of the Seniors Assessment Screening Tool.  | First Available Long-Term Care Bed Policy                    |
| <b>Best Possible Medication History</b>        | A complete and accurate list of medications – including drug name, dosage, route and frequency – that reflects medication use prior to admission. It is created using a systematic process of interviewing the patient/family/caregiver and a review of at least one other reliable source of information.  | Natural Health Product Interchange Policy                    |
| <b>Best Possible Medication History (BPMH)</b> | A complete and accurate list of medications - including drug name, dosage, route and frequency - that reflects medication use prior to admission. It is created using a systematic process of interviewing the patient/family/ caregiver and a review of at least one other reliable source of information. The BPMH is more comprehensive than a routine primary medication history which may not include multiple sources of information. | Medication Reconciliation – Acute Care Standard              |

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|-----------------------------|---|--|
| <b>Betterment</b>           | Betterments are additions to assets, or a substitution for part of an asset. The distinguishing feature between betterments and a repair is that a betterment is the substitution of a component, which meets at least one of the criteria listed above and also meets the threshold level for the asset class. Betterments are treated as capital assets and added to the original cost of the asset. The useful life of a betterment may be different from the original asset. Therefore, the amortization rate may be different.   | Tangible Capital Assets Policy                               |
| <b>Canned Comment</b>       | Describes a predefined comment which can be inserted within Cerner which related to a specific test order.  | Specimens Collected on Clients Without Identification Policy |
| <b>Capital Asset</b>        | Is a tangible asset that is purchased, constructed or developed and; <ul style="list-style-type: none"> <li>• is held for use in the production or supply of goods and services, for rental to others, for administrative purposes or for the development, construction, maintenance or repair of other capital assets; requires maintenance expenditures as well as replacement in the future; has a useful life extending beyond an accounting period and is intended to be used on a continuing basis; and is not intended for sale in the ordinary course of operations.</li> </ul> | Tangible Capital Assets Policy                               |
| <b>Capital Contribution</b> | Is revenue received for the acquisition of tangible capital assets.   | Tangible Capital Assets Policy                               |
| <b>Care Sets</b>            | An electronic collection of commonly ordered items that provide the ability to select a defined list of orders by a single name such as ‘ED Lab Orders’.  | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Cerner</b>               | Electronic Health Record used by the Province of PEI.   | Specimens Collected on Clients Without Identification Policy |
| <b>Client</b>               | Healthcare provider initiating test request.  | Laboratory Requisitions: Creation and Revision               |
| <b>Client</b>               | Individual initiating the test request.   | Specimens Collected on Clients Without Identification Policy |

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| Term  | Definition  | Policy Document   |
|---|---|---|
| <b>Clients</b>                                  | Any Health Care Provider as described [in the policy], the patient, legal guardian or Power of Attorney.  | Release of Laboratory Information to Clients Policy         |
| <b>Collaborative Emergency Centre (CEC)</b>     | An emergency department that is staffed between the hours of 8:00PM – 8:00AM by a registered nurse(s) (RN) and an emergency medical technician (EMT III) with support from an online physician to provide basic emergency stabilization services.   | Night Time Closure - Collaborative Emergency Centre         |
| <b>Communication Types</b>                      | The method in which an order is received or acted upon based on the scope of practice of the provider placing the order. The communication type chosen by the entering provider determines whether or not the order will route to the ordering physician's Message Centre for co-signature. | Order Management for Patient Care - CPOE Environment Policy |
| <b>Competency Testing</b>                       | Evaluation of a person's ability to perform the steps of a testing procedure.   | Point of Care Testing Policy                                |
| <b>Complaint</b>                                | A complaint is an expression of dissatisfaction by a patient, either written or verbal, about the standard of service, actions or lack of action taken by staff of the organization or the organization itself, affecting an individual, patient, or group of patients.                     | Public Compliments and Complaints Policy                    |
| <b>Complaint Process</b>                        | A complaint process is part of an overall process whereby complaints are documented and follow-up action(s) are taken when needed in order to prevent future situations of a similar nature from occurring.   | Public Compliments and Complaints                           |
| <b>Compliment</b>                               | An expression of admiration or approval directed toward the organization or staff.  | Public Compliments and Complaints Policy                    |
| <b>Computerized Provider Order Entry (CPOE)</b> | A process of electronic entry of provider instructions for the treatment of patients under his or her care. These orders are communicated over a computer network to health care providers fulfilling the order.  | Order Management for Patient Care - CPOE Environment Policy |
| <b>Computerized Provider Order Entry (CPOE)</b> | A process of electronic entry of provider instructions for the treatment of patients under his or her care. These orders are communicated over a computer network to health care providers fulfilling the order.  | Medication Reconciliation – Acute Care Standard             |

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| <b>Conflict of Interest</b>               | Any situation in which an individual or corporation is in a position to exploit a professional or official capacity in some way for their personal or corporate benefit.  | Professional Work Site for Alternative Pay Physicians Policy        |
| <b>Contract for Service Physicians</b>    | Includes those physicians who have a binding Contract for Clinical Service with Health PEI.   | Clinical Service Contract Worked Hours Policy                       |
| <b>Cost</b>                               | Is the amount of consideration given to acquire, construct, develop or better a capital asset and includes all costs directly attributed to acquisition, construction, development or betterment of capital assets including installing it at the location and in the condition necessary for its intended use. | Tangible Capital Assets Policy                                      |
| <b>Critical Test Result</b>               | A test result that, if left untreated, could be life threatening or place the patient at serious risk.  | Point of Care Testing Policy  |
| <b>Current Medications</b>                | All medications a patient takes regularly.  | Patient Rights & Responsibilities Policy                            |
| <b>Definitive Test Result</b>             | A test result that may result in a clinical management decision or diagnosis.   | Point of Care Testing Policy  |
| <b>De-identified</b>                      | All personal/identifying information removed.   | De-Identifying Patient Care Report – Collaborative Emergency Centre |
| <b>Designate</b>                          | Means the individual assigned by a Network/Site/Program Medical Director to perform duties required under this policy. The Designate has reasonable knowledge sufficient to perform these duties.   | Clinical Service Contract Worked Hours Policy                       |
| <b>Designate Health Care Professional</b> | A registered health professional (Examples are: Registered Nurse, Physiotherapist).   | Alternate Level of Care Designation and Billing                     |
| <b>Designated Smoking Area</b>            | An outdoor area of a public place or workplace that is designated as a smoking area under subsection 8 (1) of the <i>Smoke-Free Places Act</i> .  | Electronic Cigarettes Policy  |
| <b>Designated Smoking Room</b>            | A room that is designated as a smoking area under subsection 8 (1) of the <i>Smoke-Free Places Act</i> .  | Electronic Cigarettes Policy  |

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| Term                              | Definition   | Policy Document                                 |
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| <b>Designated Travel Provider</b> | The designated travel provider refers to the mode of travel or specific carriers with whom Health PEI has a contractual agreement to provide travel services through the Out-of-Province Travel Support Program.   | Out-of-Province Travel Support Program Policy   |
| <b>Discharge Planner</b>          | The health professional(s) responsible for arranging a patient's transition to the appropriate discharge destination, (e.g. LTC, community care).  | First Available Long-Term Care Bed Policy       |
| <b>Discharge Planner(s)</b>       | The health professional(s) responsible for arranging a patient's transition to the appropriate discharge destination, (e.g. LTC, community care).  | Alternate Level of Care Designation and Billing |
| <b>Discrepancy</b>                | Any inconsistency between the BPMH and the admission medication orders.  | Medication Reconciliation – Acute Care Standard |
| <b>Disposals</b>                  | Result when the ownership of a capital asset is relinquished. A disposal will result in reducing the asset cost, accumulated amortization and any related deferred capital contributions.  | Tangible Capital Assets Policy                  |
| <b>Distance Interpretation</b>    | The interpreter is not physically present during the process.  | Language Interpretation Policy                  |
| <b>Documentation</b>              | Refers to charts, charting, recording, nurses' notes and progress notes. Documentation is written or electronically generated information about a patient that describes the care (observations, assessment, planning, intervention and evaluation) or service provided to that patient. | Nursing Documentation Standard                  |
| <b>Electronic Cigarette</b>       | A device used to mimic smoking without combustion occurring  | Electronic Cigarettes Policy                    |
| <b>Enterprise Risk Management</b> | Coordinated activities to direct and control an organization with regard to risk.  | Enterprise Risk Management Policy               |
| <b>Environment</b>                | Inanimate objects and surfaces in the proximate environment of the patient that may be a source of, or may be contaminated by microorganisms.  | Hand Hygiene Policy                             |
| <b>Essential Escort</b>           | An essential escort can include a parent, guardian or designate who accompanies the patient for medically necessary reasons.   | Out-of-Province Travel Support Program Policy   |



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| <b>Facility Designate</b>  | Is the assigned position (e.g. charge nurse) identified at each hospital to coordinate patient transfers and communicate with sending and receiving hospitals.  | Repatriation and Transfer Policy               |
| <b>Financial Support</b>   | Financial support in the context of this policy is defined as subsidization of 50% or 100% of fare cost using the designated travel provider.   | Out-of-Province Travel Support Program Policy  |
| <b>First Available Bed</b> | An appropriate unassigned care bed that can be offered to a medically discharged patient from acute care.   | Discharge Policy                               |
| <b>First Available Bed</b> | An appropriate unassigned Long-Term Care bed that can be offered to: <ul style="list-style-type: none"> <li>• a medically discharged patient from acute care;</li> <li>• a person in the community where his/her needs cannot safely be met.</li> </ul> | First Available Long-Term Care Bed Policy      |
| <b>Form</b>                | Is a document (printed, electronic, labels or tags) used to record data, information, or results from performing a procedure. After data collection, information or results are entered onto a form and it then becomes a record.                       | Controlled Document Review and Approval Policy |
| <b>Genetic testing</b>     | The analysis of a patient's chromosomes, DNA, RNA or gene product for the purposes of identifying abnormalities which may indicate presence of or increased risk for a specific disease or disorder.  | Referred-out Laboratory Testing Policy         |
| <b>Hand Hygiene</b>        | A comprehensive term that refers to hand washing, hand antiseptics, and actions taken to maintain healthy hands and fingernails.  | Hand Hygiene Policy                            |
| <b>Hand Washing</b>        | A method of hand hygiene that uses warm water and soap to achieve the removal of organisms from the hands. The process takes 40-60 seconds. Appendix A has details regarding performance of hand washing.   | Hand Hygiene Policy                            |
| <b>Hand Wipes</b>          | Towelettes saturated with an antimicrobial agent or soap, and used as an alternative to washing hands with plain soap and water.  | Hand Hygiene Policy                            |

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|--|---|---|
| <b>Health Care Associated Infection (HCAI)</b> | An infection occurring in a patient during the process of care in a hospital or other health care facility which was not present or incubating at the time of admission. This includes infections acquired in the facility but appearing after discharge and occupational infections among staff of the facility.   | Hand Hygiene Policy                                 |
| <b>Health Care Directive</b>                   | A document made in accordance with the Consent to Treatment and Health Care Directive Act before or after the coming into force of this Act, in which the maker sets out decisions or wishes or instructions respecting treatment, or appoints a proxy, or both.  | Patient Rights & Responsibilities Policy            |
| <b>Health Care Provider</b>                    | <ul style="list-style-type: none"> <li>• a qualified medical practitioner</li> <li>• a qualified healthcare professional (registered nurse, physiotherapist, psychologist, etc)</li> <li>• health care facility</li> <li>• organization or program involved in the direct care of the patient</li> </ul>  | Release of Laboratory Information to Clients Policy |
| <b>Health Care Providers</b>                   | A generic term used to refer to staff, physicians, and health care personnel who provide services within the programs of Health PEI.  | Patient Rights & Responsibilities Policy            |
| <b>Health Care Setting</b>                     | <p>Any location where health care is provided, including emergency care, pre-hospital care, hospital care, long-term care, home care, ambulatory care and facilities and locations in the community where care is provided, (e.g., infirmaries in schools, residential or correctional facilities).</p> <p>Note: Definitions of settings overlap, as some settings provide a variety of care, e.g., chronic care or ambulatory care provided in acute care, complex care provided in long-term care, etc.</p> | Routine Practices Policy                            |
| <b>Health Information</b>                      | Is a broad term that has identifying information about an individual in oral or recorded form pertaining to that person's health or health services provided to the individual, collected in the course of providing those health services.   | Release of Laboratory Information to Clients Policy |

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| Term                                     | Definition  | Policy Document   |
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| <b>Health Information System (HIS)</b>   | The resources, devices, and methods required to optimize the acquisition, storage, retrieval, and use of information in health and biomedicine. HIS tools include not only computers but also clinical guidelines, formal medical terminologies, and information and communication systems.   | Electronic Health Record<br>Interoperability Management         |
| <b>Health PEI Inventory List</b>         | List of all Health PEI approved Professional Work Sites, lease or owned that are used for Alternative Pay Physician's medical practice.   | Professional Work Site for<br>Alternative Pay Physicians Policy |
| <b>Health PEI Professional Work Site</b> | The provision of adequate and appropriate space for their practice which can include the following: examination room(s), physician office, reception area including staff area and patient waiting area, storage space adequate and appropriate for filing and general storage, and any other areas as may be required for the operation of an active medical office. | Professional Work Site for<br>Alternative Pay Physicians Policy |
| <b>Health Record</b>                     | The patient's official health record (a hybrid of paper and electronic documentation).  | Patient Rights & Responsibilities<br>Policy                     |
| <b>Healthcare Facility</b>               | A facility providing 24 hour patient care (acute or long term) and under the direction of Health PEI.   | Laboratory Requisitions: Creation<br>and Revision               |
| <b>Healthcare Provider</b>               | Refers to physicians, professional and non-professional workers, and others engaged in the delivery of health services.   | Patient Safety Incident Reporting<br>Policy                     |
| <b>Healthcare Provider</b>               | A qualified medical practitioner; Nurse Practitioner; a qualified healthcare professional (registered nurse, physiotherapist, psychologist, dentists and orthodontists etc); healthcare facility; organization or program involved in the direct care of the patient.   | Laboratory Requisitions: Creation<br>and Revision               |
| <b>Household Income</b>                  | Household income is defined as the combined income of the applicant and spouse (if applicable).   | Out-of-Province Travel Support<br>Program Policy                |
| <b>Incident</b>                          | Any event, accident or unusual situation which is not consistent with the routine operation of a health facility, or the provision of a health service or the routine care of patients, residents or clients within the health system.  | Quality Improvement Activity<br>Policy                          |

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| Term  | Definition  | Policy Document   |
|---|---|---|
| <b>In-person interpretation</b>             | The interpreter is in the room with the healthcare provider client/patient.   | Language Interpretation Policy  |
| <b>Inter-facility Repatriation/Transfer</b> | The movement of a patient to another hospital, with transfer of duty of care.   | Repatriation and Transfer Policy  |
| <b>Interoperability</b>                     | The ability of two or more systems or components to exchange information and to use the information that has been exchanged.  | Electronic Health Record Interoperability Management                                    |
| <b>Interpretation</b>                       | Refers to the process by which a spoken or signed message in one language is relayed, with the same meaning, in another language.   | Language Interpretation Policy  |
| <b>Intra-facility Repatriation/Transfer</b> | The movement of a patient to a different unit within a particular hospital.   | Repatriation and Transfer Policy  |
| <b>Just Culture</b>                         | An environment which seeks to balance the need to learn from mistakes and the need to be accountable for the quality of work in a fair way.   | Patient Safety Incident Reporting Policy  |
| <b>Law Enforcement Agency</b>               | The RCMP, municipal police or such other law enforcement agency as defined in subsection 1. (e) of the <i>Freedom of Information and Protection of Privacy Act</i> .  | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |
| <b>Law Enforcement Disclosure Form</b>      | The form created for the purpose of disclosure to law enforcement under subsection 37.(1) (o) of the <i>Freedom of Information and Protection of Privacy Act</i> (Appendix A).  | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |
| <b>Law Enforcement Proceeding</b>           | A criminal, quasi-criminal or other regulatory proceeding which could result in a penalty or sanction imposed on an individual.   | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |
| <b>Leases</b>                               | May be classified as operating or capital leases. Payments for an operating lease are coded to operating expenditures. A capital lease is a lease that, from the point of view of the lessee, transfers substantially all the benefits and risks incident to ownership of property to the lessee. | Tangible Capital Assets Policy  |

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|--|---|---|
| <b>Living Donor</b>                          | A person who donates one of a paired organ (such as kidneys) or a portion of an organ (such as a lobe of the liver or lung). The donor's organ system is still able to function after the donation. Persons who donate hematopoietic stem cells to a sibling, either through bone marrow harvest or through peripheral blood collection are included in this policy. Persons who wish to donate stem cells through OneMatch Stem Cell and Marrow Network are not covered by this policy. Their expenses are covered by the OneMatch Stem Cell and Marrow Network. | Living Donor Reimbursement Policy   |
| <b>Living Donor Paired Exchange Registry</b> | The registry is operated by Canadian Blood Services and allows for incompatible donor-recipient pairs, or a single non-directed anonymous donor, to enter a registry to increase the chances of finding compatible donor matches for organ transplantation.   | Living Donor Reimbursement Policy   |
| <b>LTC Admissions Committee</b>              | Comprised of representatives from Long-Term Care, Home Care, and Acute Care and responsible for overseeing admissions to nursing homes. There are three local committees, (one per county) with oversight provided by the Executive Director of Home-Based and Long-Term Care. The Committee is responsible for processing applications and establishing priority admissions for persons whose circumstances are defined under Section 1 of this policy.  | First Available Long-Term Care Bed Policy   |
| <b>Manager</b>                               | Means a nurse manager, program coordinator, program manager, supervisor or a designate of any of these.   | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |

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| Term                                | Definition   | Policy Document   |
|-------------------------------------|--|---|
| <b>Medical Directive</b>            | An indirect physician order for prescription, treatment, intervention or procedure that is used to expedite patient care and may be applied to a patient when specific conditions and circumstances exist. The physician effectively delegates the directive to a specific individual or group of competent individuals providing that the patient strictly satisfies the criteria set out in the directive. This may include legacy terms such as Standing Orders, and Transfer of Function. Any alerts generated should be managed in consultation with the most responsible provider. | Order Management for Patient Care - CPOE Environment Policy |
| <b>Medical Transfer</b>             | Interfacility or intrahospital transfer of patients. Intrahospital transfer is to a different unit within the same hospital and is usually to obtain a specific kind of care. Interfacility transfer is to another hospital with transfer of duty of care.   | Discharge Policy  |
| <b>Medically Discharged</b>         | A patient who no longer requires acute care inpatient service(s) and is identified by his/her physician (or designate) on the order sheet as no longer requiring acute care inpatient service(s).  | First Available Long-Term Care Bed Policy                   |
| <b>Medically Discharged Patient</b> | Person who: <ul style="list-style-type: none"> <li>• no longer requires acute care inpatient services; and</li> <li>• is identified by the attending physician on the order sheet as no longer requiring acute care inpatient services; and</li> <li>• has a designation of Alternate Level of Care- LTC Awaiting Placement, or Alternate Level of Care - Community Care Awaiting Placement.</li> </ul>  | Alternate Level of Care Designation and Billing             |
| <b>Medically Necessary</b>          | Is determined by the treating physician.   | Out-of-Province Travel Support Program Policy               |
| <b>Medically Required</b>           | Determined by the physician as mandatory to protect and enhance the health status of a patient and could adversely affect the patient's condition if omitted.  | Out-of-Province Outpatient Accommodation Assistance Policy  |

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|---|--|---|
| <b>Medication Reassessment Alert</b>                    | A notification to the prescriber to reassess a medication order.   | Medication Reassessment Alert Policy                        |
| <b>Medication Reconciliation</b>                        | A formal process of obtaining a complete and accurate list of each patient’s current home medications (creating a BPMH), using that list when writing admission, transfer and/or discharge medication orders, and comparing the list against the patient’s admission, transfer and/or discharge orders, identifying and bringing any discrepancies to the attention of the prescriber and, if appropriate, making changes to the orders. | Order Management for Patient Care - CPOE Environment Policy |
| <b>Medication Reconciliation</b>                        | A formal process of obtaining a complete and accurate list of each patient’s current home medications (creating a BPMH), using that list when writing admission, transfer and/or discharge medication orders, and comparing the list against the patient’s admission, transfer and/or discharge orders, identifying and bringing any discrepancies to the attention of the prescriber and, if appropriate, making changes to the orders. | Medication Reconciliation – Acute Care Standard             |
| <b>Medications with Customized Administration Times</b> | Any medication found in the document Provincial Custom Medication Administration Times (e.g. Moxifloxacin PO, when ordered Daily, will automatically default to 0700 rather than the usual Daily time of 0900).  | Medication Schedule Changes Policy                          |

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| Term   | Definition  | Policy Document   |
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| <b>Natural Health Products (NHPs)</b>        | Natural Health Products (NHPs) are described by Health Canada as substances found in nature that are manufactured and sold for medical or health-related uses, such as treating or preventing diseases. They are often called complementary or alternative medicines and include: vitamins and minerals, herbal remedies, homeopathic medicines, traditional medicines (e.g. Chinese medicines), probiotics, amino acids and essential fatty acids. NHPs must be safe to use as over-the-counter products and do not require a prescription to be sold. Products needing a prescription are regulated as drugs under the Food and Drug Regulations. | Natural Health Product Interchange Policy                   |
| <b>Net Book Value</b>                        | Represents the difference between the cost of a capital asset and its accumulated amortization. The net book value is, therefore, the unconsumed cost of a capital asset attributable to its remaining service life.  | Tangible Capital Assets Policy                              |
| <b>Network/Site/Program Medical Director</b> | An appointment made by Executive Director of Medical Affairs and Diagnostic Imaging of the Medical Staff, or person(s) eligible for appointment to the Medical Staff, to the position of Network/Site/Program Director (hereafter referred to as Supervisor). Position is accountable to the Executive Director of Medical Affairs and Diagnostic Imaging with respect to all matters agreed to under their job description or description of work agreement.   | Clinical Service Contract Worked Hours Policy               |
| <b>Non-genetic testing</b>                   | Testing which does not meet the definition of genetic testing.  | Referred-out Laboratory Testing Policy                      |
| <b>Nurse Review</b>                          | A practice that requires a nurse to review an order and then confirm that it has been reviewed.   | Order Management for Patient Care - CPOE Environment Policy |
| <b>Nurse Witness</b>                         | A practice of co-signature which allows a second nurse/clinician to verify the pertinent details of an order or a process.  | Order Management for Patient Care - CPOE Environment Policy |



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| Term                  | Definition   | Policy Document  |
|-----------------------|--|--|
| <b>Objective Data</b> | Objective data are observable (e.g. crying, swelling, bleeding) and measurable data (e.g., temperature, blood pressure) obtained through observation, physical examination, and laboratory and diagnostic testing.   | Nursing Documentation Standard                               |
| <b>Oral Care</b>      | Refers to taking care of the inside of a patient’s mouth. Practicing oral care keeps teeth, gums, tongue, palate and inner cheeks healthy and is part of overall health.   | Oral Care - Stroke Patients Protocol                         |
| <b>Order</b>          | A direction provided by an provider for a specific task (e.g. diagnostic imaging order, medication order) to be available for and/or administered to a specific patient. This includes legacy terms such as protocols.   | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Order Action</b>   | Any action that can be taken on an order (e.g. cancel, suspend).   | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Order Priority</b> | A designation or code assigned to orders that affects the start time of the order and the urgency with which it must be actioned (e.g. Stat).  | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Order Sets</b>     | A paper-based group of orders, supporting standardized evidence-based practice, which go together for specific treatments, protocols, or logical care components related to a problem, condition, procedure or a process. (eg. MED Community Acquired Pneumonia Admit Order Set) | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Outpatient</b>     | The patient has been registered for the purposes of specimen collection, but has not been admitted to hospital.  | Specimens Collected on Clients Without Identification Policy |
| <b>Patient</b>        | Any person receiving services from Health PEI; also includes those referred to as clients and residents and, where appropriate, legal guardians, authorized substitute decision makers or legal proxy of the patient.  | Patient Safety Incident Reporting Policy                     |
| <b>Patient</b>        | A generic term used to describe any person receiving care including patients, clients, and residents from a health care provider(s) affiliated with Health PEI.  | Patient Rights & Responsibilities Policy                     |

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| Term                             | Definition   | Policy Document   |
|----------------------------------|--|---|
| <b>Patient</b>                   | A generic term used to describe any patient, client or resident.   | Routine Practices Policy  |
| <b>Patient</b>                   | A generic term used to refer to patients/residents/clients in the health system.   | Hand Hygiene Policy   |
| <b>Patient</b>                   | A generic term used to describe any patient, client or resident.   | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |
| <b>Patient Safety Incident</b>   | An event or circumstance which could have resulted, or did result, in unnecessary harm to the patient.   | Patient Safety Incident Reporting Policy  |
| <b>PEI Resident</b>              | A PEI resident is defined as anyone who is legally entitled to remain in Canada and who makes his or her home and is ordinarily present, on an annual basis, for at least six months plus a day in Prince Edward Island.   | Out-of-Province Travel Support Program Policy   |
| <b>Personal Information (PI)</b> | <p>Means recorded information about an identifiable individual, including:</p> <ul style="list-style-type: none"> <li>• name, home or business address, home or business phone number;</li> <li>• the individual’s race, national or ethnic origin, color or religious or political beliefs or associations;</li> <li>• the individuals age, sex, marital status or family status or family status;</li> <li>• an identifying number, symbol or other particular assigned to the individual;</li> <li>• the individual’s fingerprints, blood type or inheritable characteristics;</li> <li>• information about the individual’s health and health care history including information about a physical or mental disability;</li> <li>• information about the individual’s education, financial, employment or criminal history;</li> <li>• anyone else’s opinion about the individual; and</li> <li>• the individual’s personal views or opinions, except if they are about someone else.</li> </ul> | Disclosure of Personal Information to Law Enforcement Agencies - Without Consent Policy |

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| Term  | Definition  | Policy Document   |
|---|---|---|
| <b>Personal Protective Equipment (PPE)</b>      | Gowns, gloves, masks, facial protection (i.e., masks and eye protection, face shields or masks with visor attachment), or respirators that can be used by a Health Care Worker (HCW) or other staff to provide a barrier that will prevent potential exposure to infectious microorganisms.                 | Routine Practices Policy                                    |
| <b>Pharmacist Verification</b>                  | The process by which a pharmacist reviews, assesses, and confirms the details of a medication order for which verification is required.   | Order Management for Patient Care - CPOE Environment Policy |
| <b>Physician Co-sign</b>                        | The process by which a physician provides his/her endorsement of an order or document for which co-signature is required at the earliest possible time.   | Order Management for Patient Care - CPOE Environment Policy |
| <b>Physician Stop</b>                           | The date/time that an order is discontinued. The prescriber does NOT receive an MRA notification and the medication supply from pharmacy is stopped.  | Medication Reassessment Alert Policy                        |
| <b>Plan of Care</b>                             | A document developed following a patient assessment that identifies the nursing diagnoses to be addressed. The plan of care includes the objectives, nursing interventions, and time frame for accomplishment and evaluation. It should be formulated with input from the patient and the patient's family. | Nursing Documentation Standard                              |
| <b>Point of Care</b>                            | The place where three elements occur together: 1) the patient, 2) the health care provider, 3) the care or treatment involving contact with the patient or his/her surroundings (within the patient zone). Point-of-care products should be accessible without leaving the patient zone.                    | Hand Hygiene Policy   |
| <b>Point of Care Testing (POCT) Coordinator</b> | A Medical Laboratory Technologist from the Health PEI Laboratory Services Program who works with the designated Provincial Laboratory Clinical Lead/Division Head to provide oversight of the POCT Program.   | Point of Care Testing Policy                                |

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| Term  | Definition  | Policy Document   |
|---|---|---|
| <b>Point-of-Care Risk Assessment (PCRA)</b> | <ul style="list-style-type: none"> <li>Evaluates the likelihood of exposure to an infectious agent: For a specific interaction; With a specific patient; In a specific environment (e.g., single room, hallway); Under available conditions (e.g., no designated hand washing sinks)</li> </ul> | Routine Practices Policy                                    |
| <b>PowerPlans</b>                           | An electronic group of orders, supporting standardized evidence-based practice, which go together for specific treatments, protocols, or logical care components related to a problem, condition, procedure or a process. (eg. Community Acquired Pneumonia Admission powerplan).               | Order Management for Patient Care - CPOE Environment Policy |
| <b>Prescriber</b>                           | A person authorized by the law of any province or territory to practice medicine or dentistry, or a person authorized in writing by the Minister of Health & Wellness to give a prescription.   | Medication Reconciliation – Acute Care Standard             |
| <b>Primary Medication History (PMH)</b>     | An initial medication history taken at the time of admission by a healthcare provider.  | Medication Reconciliation – Acute Care Standard             |
| <b>Primary Use</b>                          | Includes the use of information for care and treatment in the delivery of health services to a patient.   | Release of Laboratory Information to Clients Policy         |
| <b>Private Residence</b>                    | A place where persons, families, or small self-formed groups live independently.  | Living Donor Reimbursement Policy                           |
| <b>Procedure Document</b>                   | Provides instructions for how to perform the steps in a given process activity and answers the question, “How do I do this activity”. There should be procedures (instructions) for critical activities in each Quality System Essential process and work process.                              | Controlled Document Review and Approval Policy              |
| <b>Proficiency Testing</b>                  | An external testing program in which blind samples are received from an external agency, e.g., College of American Pathologists, and processed as patient samples by regular testing personnel.   | Point of Care Testing Policy                                |
| <b>Provider</b>                             | A generic term to describe any authorized health care provider, regulated or unregulated, who is acting within their scope of practice.   | Order Management for Patient Care - CPOE Environment Policy |

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| Term  | Definition   | Policy Document  |
|---|--|--|
| <b>Provider</b>                                   | A generic term to describe any authorized health care provider, regulated or unregulated, who is acting within their scope of practice.  | Medication Reconciliation – Acute Care Standard              |
| <b>Provincial Safety Management System (PSMS)</b> | PSMS is an electronic means of capturing, tracking, trending and reporting safety events.  | Public Compliments and Complaints Policy                     |
| <b>Proxy</b>                                      | The person or persons appointed by the maker of a directive to make decisions on his or her behalf, and includes an alternate in the event that the person or persons appointed is unable to act.  | Patient Rights & Responsibilities Policy                     |
| <b>Quality</b>                                    | excellence; the extent to which an organization meets patients' needs and exceeds their expectations.  | Quality Improvement Activity Policy                          |
| <b>Quality Control</b>                            | A set of procedures designed to monitor the technical performance of the test including accuracy and precision. The term refers to the testing of samples of known concentration that are periodically tested like a patient sample to validate the testing process. | Point of Care Testing Policy                                 |
| <b>Quality Health Care</b>                        | Providing safe, dependable, and quality care that promotes the best possible health outcomes.  | Patient Rights & Responsibilities Policy                     |
| <b>Read-back Process</b>                          | The process of reading back verbatim a telephone or verbal order to verify accuracy.   | Order Management for Patient Care - CPOE Environment Policy  |
| <b>Referred-out testing</b>                       | All laboratory tests which are not performed within Health PEI.  | Referred-out Laboratory Testing Policy                       |
| <b>Regularly Scheduled Hours</b>                  | Those regularly scheduled hours of work as defined in the physician's contract of employment or contract for clinical services.  | Professional Work Site for Alternative Pay Physicians Policy |

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| Term  | Definition   | Policy Document                                 |
|---|--|---|
| <b>Repairs and Maintenance</b>                | Is the normal cost incurred to maintain the service potential of a capital asset without significant extension of useful life. These expenditures are charged to an operating account in the period in which they are incurred on the basis that it is the only period benefitted. Replacement of minor parts, lubricating and adjusting of equipment, repainting and cleaning are examples of the type of maintenance charges that occur regularly and are treated as operating expenditures. | Tangible Capital Assets Policy                  |
| <b>Repatriation</b>                           | The return of a patient originating from one hospital or geographic region to that hospital or geographic region, after admission elsewhere.   | Repatriation and Transfer Policy                |
| <b>Required Organizational Practice (ROP)</b> | Evidence-based practices focused on high priority areas that have been identified by Accreditation Canada as central to improving the quality and safety of health services.   | Medication Reconciliation – Acute Care Standard |
| <b>Responsibility</b>                         | An obligation for which there is accountability. It should be noted that the term “responsibility” within the document titled “Your Rights & Responsibilities” is not a legal concept.   | Patient Rights & Responsibilities Policy        |
| <b>Right</b>                                  | An expectation for which there is accountability. It should be noted that the term “right” within the document titled “Your Rights & Responsibilities” is not a legal concept.   | Patient Rights & Responsibilities Policy        |
| <b>Risk</b>                                   | The chance of something happening that will have an impact on objectives; measured in terms of impact and likelihood.  | Enterprise Risk Management Policy               |
| <b>Risk Management Framework</b>              | The set of components that provide the foundations and organizational arrangements for designing, implementing, monitoring, reviewing, and continually improving risk management throughout an organization.   | Enterprise Risk Management Policy               |
| <b>Risk Management Plan</b>                   | A plan identifying the strategy, activities, resources, responsibilities, and timeframes for implementing and maintaining risk management.   | Enterprise Risk Management Policy               |

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| Term  | Definition  | Policy Document                                      |
|---|---|--|
| <b>Routine genetic/molecular testing</b>    | Are those genetic/molecular tests listed in Appendix A.   | Referred-out Laboratory Testing Policy               |
| <b>Scheduled Medications</b>                | All maintenance doses administered according to a standard, repeated cycle of frequency (e.g. q4h, QID, TID, Daily, q7d).   | Medication Schedule Changes Policy                   |
| <b>Secondary Use of Health Information:</b> | Includes all use of health information other than that for primary use.   | Release of Laboratory Information to Clients Policy  |
| <b>Sentinel event</b>                       | An unexpected incident, related to system or process deficiencies, which leads to death or major and enduring loss of function for the recipient of healthcare services.  | Quality Improvement Activity Policy                  |
| <b>Service Destinations</b>                 | Service destinations in this policy refer to Halifax, Nova Scotia, Fredericton, New Brunswick, Moncton, New Brunswick, and St John, New Brunswick.  | Out-of-Province Travel Support Program Policy        |
| <b>Service-oriented Architecture (SOA)</b>  | A set of principles and methodologies for designing and developing software in the form of interoperable services. These services have well-defined business functionalities that are built as software components which can be reused for different purposes.  | Electronic Health Record Interoperability Management |
| <b>Smoking</b>                              | The carrying of or having in their possession a burning cigarette, cigar or pipe containing burning tobacco or the burning of tobacco in any other manner.  | Addiction Treatment – Smoke-Free Environment         |
| <b>Soft Stop</b>                            | The date/time that an order is due to be reassessed. The corresponding MRA notification is communicated 24 hours prior to the soft stop date/time. The order remains active in the electronic chart, tasks are still generated for nursing and the medication supply continues from pharmacy (until the order is discontinued). | Medication Reassessment Alert Policy                 |
| <b>Specialty genetic/molecular testing</b>  | Are any genetic/molecular tests which are not included within the category of routine genetic/molecular tests.  | Referred-out Laboratory Testing Policy               |
| <b>STAT Dose</b>                            | A dose that is to be administered within 30 minutes.  | Medication Schedule Changes Policy                   |

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| Term                              | Definition   | Policy Document   |
|-----------------------------------|--|---|
| <b>Straight Line Amortization</b> | Is a method of allocating capital asset costs to an accounting period. This method reflects an equal yearly amortization charge over the useful life of an asset. The periodic charge is a percentage of the cost of the asset based on the estimated useful life so that the net book value will be zero by the estimated retirement date.  | Tangible Capital Assets Policy                              |
| <b>Subjective Data:</b>           | Subjective data are information from the client's point of view ("symptoms"), including feelings, perceptions, and concerns obtained through interviews. Subjective data may include statements or feedback from family members or a friend.   | Nursing Documentation Standard                              |
| <b>Substitute Consenter</b>       | If a person has not given consent before death, or is under the age of sixteen, or did not understand the nature and consequences of transplanting tissue from his or her body after death; a consent for the removal of tissue for the purpose of implanting the tissue in a living human body may be given by any one of the following:<br>1) Guardian, 2) Spouse, 3) Child, 4) Parent, 5) Sibling, 6) Other next of kin 7) Co-resident with knowledge of wishes. In the event of a dispute between two or more persons of the classes above, the dispute shall be decided in accordance with the order in which those classes are listed. | Organ and Tissue Donor Policy                               |
| <b>Suitable Bed</b>               | Is one in a hospital where the care offered is able to meet the ongoing care needs of the individual.  | Repatriation and Transfer Policy                            |
| <b>Telephone Order</b>            | An order given during a telephone conversation between the person authorized to give the order and the person authorized to receive the order.   | Order Management for Patient Care - CPOE Environment Policy |
| <b>Threshold Amount</b>           | For each capital asset class represents the minimum cost of an individual asset must have before it is treated as a capital asset addition.  | Tangible Capital Assets Policy                              |
| <b>Translation</b>                | Refers to the written conversation of one language into another.   | Language Interpretation Policy                              |



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| Term                                | Definition   | Policy Document   |
|-------------------------------------|--|---|
| <b>Treatment/Care Plan</b>          | A procedure or set of procedures that is done for a therapeutic, preventive, palliative, diagnostic, cosmetic or other health-related purpose, and includes a course of treatment or group of associated treatments.                 | Patient Rights & Responsibilities Policy                    |
| <b>Venous Thromboembolism (VTE)</b> | Is defined as a disease process that includes both deep vein thrombosis and pulmonary embolism. A thrombus forms in one of the deep veins in the body preventing normal blood flow. An embolus breaks free and travels to the lungs. | VTE Prophylaxis – Stroke Patients Protocol                  |
| <b>Verbal Order</b>                 | An order given during a face-to-face communication between the person authorized to give the order and the person authorized to receive the order.   | Order Management for Patient Care - CPOE Environment Policy |
| <b>Year of Acquisition</b>          | Is the fiscal period when the asset is put into service. When an asset is acquired over a number of fiscal periods, no amortization is calculated until it is put into service.  | Tangible Capital Assets Policy                              |