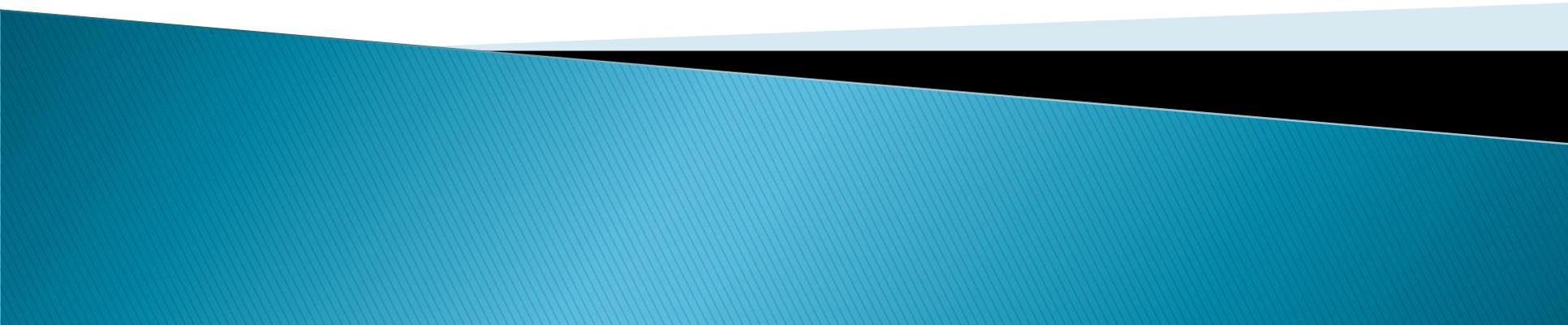


# National Patient Safety Goals

2012/2013



# Update

Only one new patient safety goal but revision of other goals that remove very specific requirements and allow for new clinical practices.

The NPSG on reconciling medication information (*formerly NPSG.08.01.01 – 08.04.01, now NPSG.03.06.01*) was streamlined and focused to place a spotlight on critical risk points in the medication reconciliation process.



The NPSG focuses on catheter-associated urinary tract infection (CAUTI)

CAUTI is the most frequent type of health care-associated infection (HAI) and represents as much as 80 percent of HAIs in hospitals

# Patient Identification

## Goal 1:

Improve the accuracy of patient identification.

# Patient Identification

NPSG.01.01.01: Use at least two patient identifiers when providing care, treatment and services Full SSN, Full Name, Full Birthday

# Patient Identification

NPSG.01.03.01: Eliminate transfusion errors related to patient misidentification

# Improve Communication

## Goal 2:

Improve the effectiveness of communication among caregivers.

# Improve Communication

NPSG.02.03.01: Report critical results of tests and diagnostic procedures on a timely basis.

# Medication Safety

## Goal 3:

Improve the safety of using medications

# Medication Safety

NPSG.03.04.01: Label all medications, medication containers, and other solutions on and off the sterile field in perioperative and other procedural settings.

# Medication Safety

NPSG.03.05.01: Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.

# Medication Safety

NPSG.03.06.01: Maintain and communicate accurate patient medication information

# Health Care–Associated Infections

## Goal 7:

Reduce the risk of health care–associated infections.

# Health Care–Associated Infections

NPSG.07.01.01: Comply with either the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines or the current World Health Organization (WHO) hand hygiene guidelines.

# Health Care–Associated Infections

NPSG.07.03.01: Implement evidence-based practices to prevent health care–associated infections due to multidrug-resistant organisms in acute care hospitals.

# Health Care–Associated Infections

NPSG.07.04.01: Implement evidence-based practices to prevent central line–associated bloodstream infections.

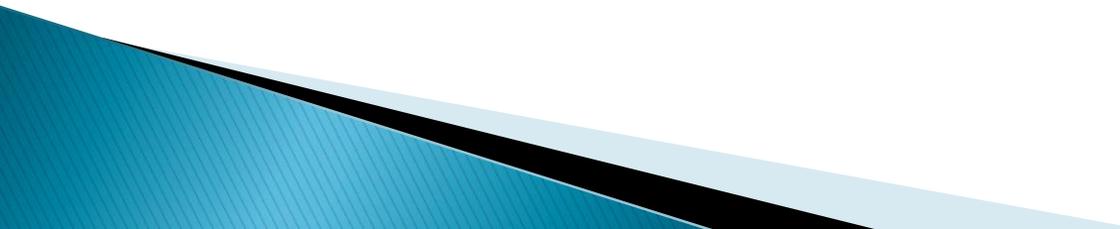


# Health Care–Associated Infections

NPSG.07.05.01: Implement evidence-based practices for preventing surgical site infections.

# Health Care–Associated Infections

NPSG.07.06.01: Implement evidence-based practices to prevent indwelling catheter–associated urinary tract infections (CAUTI).



# Reduce Falls

## **Goal 9:**

Reduce the risk of patient harm resulting from falls.

# Pressure Ulcers

## Goal 14:

Prevent health care–associated pressure ulcers (decubitus ulcers).

# Pressure Ulcers

NPSG.14.01.01: Assess and periodically reassess each resident's risk for developing a pressure ulcer and take action to address any identified risks.

# Risk Assessment

## Goal 15:

The organization identifies safety risks inherent in its patient population.

# Risk Assessment

NPSG.15.01.01: Identify patients at risk for suicide.

# Risk Assessment

NPSG.15.02.01: Identify risks associated with home oxygen therapy, such as home fires.

# Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

UP.01.01.01: Conduct a  
preprocedure verification process.

# Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

UP.01.02.01: Mark the procedure  
site.

# Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

UP.01.03.01: A time-out is performed  
before the procedure.



Thank you for  
your time &  
attention!!



# QUESTIONS ??

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