




# 2016 National Patient Safety Goals

# Background

- ▶ The National Patient Safety Goals (NPSGs) were established in 2002 to help accredited organizations address specific areas of concern in regards to patient safety
- ▶ The first set of NPSGs was effective January 1, 2003
- ▶ The Patient Safety Advisory Group advises The Joint Commission on the development and updating of NPSGs

# Patient Safety Advisory Group

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- ▶ Panel of widely recognized patient safety experts
    - Nurses, physicians, pharmacists, risk managers, clinical engineers, other professionals
  - ▶ Hands-on experience in addressing patient safety issues in wide variety of health care settings
  - ▶ Advises The Joint Commission how to address emerging patient safety issues
    - NPSGs, *Sentinel Event Alerts*, standards and survey processes, performance measures, educational materials, Center for Transforming Healthcare projects

# 2016 NPSGs



▶ No new Goals for 2016

▶ Clinical Alarms NPSG:

- Phase 2 is now effective. Hospitals are expected to establish and implement policies and procedures for managing clinical alarms and to educate individuals about alarm systems.


# Patient Identification



## Goal 1:

Improve the accuracy of patient identification.

# Patient Identification

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- ▶ NPSG.01.01.01: Use at least two patient identifiers when providing care, treatment and services.

- *Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery*

# Patient Identification



- ▶ NPSG.01.03.01: Eliminate transfusion errors related to patient misidentification.

- *Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery*

# Improve Communication



## Goal 2:

Improve the effectiveness of communication among caregivers.



# Improve Communication

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

- *Applies to: Critical Access Hospital, Hospital, Laboratory*


# Medication Safety



## Goal 3:


Improve the safety of using medications.

# Medication Safety

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

- *Applies to: Ambulatory, Critical Access Hospital, Hospital, Office Based Surgery*

# Medication Safety

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

- *Applies to: Ambulatory, Critical Access Hospital, Hospital, Nursing Care Center*

# Medication Safety



▶ NPSG.03.06.01: Maintain and communicate accurate patient medication information.

- *Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Nursing Care Center, Office-Based Surgery*


# Clinical Alarm Safety



## Goal 6:

Reduce the harm associated with clinical alarm systems.

# Clinical Alarm Safety



▶ NPSG.06.01.01: Improve the safety of clinical alarm systems.

- *Applies to: Critical Access Hospital, Hospital*

# Health Care-Associated Infections




## Goal 7:

Reduce the risk of health care-associated infections.




# Health Care-Associated Infections

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- ▶ 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.


- *Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery*

# Health Care-Associated Infections


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

- *Applies to: Critical Access Hospital, Hospital*

# Health Care-Associated Infections


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- ▶ NPSG.07.04.01: Implement evidence-based practices to prevent central line-associated bloodstream infections.
    - *Applies to: Critical Access Hospital, Hospital, Nursing Care Center*

# Health Care-Associated Infections

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

- *Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery*

# Health Care-Associated Infections

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

- *Applies to: Critical Access Hospital, Hospital*

(Note: This NPSG is not applicable to pediatric populations. Research resulting in evidence-based practices was conducted with adults, and there is not consensus that these practices apply to children.)

# Reduce Falls



## Goal 9:

Reduce the risk of patient harm resulting from falls.

# Reduce Falls



▀ NPSG.09.02.01: Reduce the risk of falls.

- *Applies to: Home Care, Nursing Care Center*

# Pressure Ulcers




## Goal 14:

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



# Pressure Ulcers

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- ▶ 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.

- *Applies to: Nursing Care Center*

# 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.

- *Applies to: Behavioral Health Care, Hospital*

*(Applicable to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals.)*

# Risk Assessment



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

- *Applies to: Home Care*



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

## ▶ UP.01.01.01: Conduct a preprocedure verification process.

- *Applies to: Ambulatory, Critical Access Hospital,  
Hospital, Office-Based Surgery*



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

## ▶ UP.01.02.01: Mark the procedure site.

- *Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery*



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

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

- *Applies to: Ambulatory, Critical Access Hospital,  
Hospital, Office-Based Surgery*



## For more information...

- ▶ The National Patient Safety Goals for each program and more information are available on The Joint Commission website at [www.jointcommission.org](http://www.jointcommission.org)
- ▶ Questions can be sent to the Standards Interpretation Group at 630-792-5900 or via the [Standards Online Question Form](#)