2011 - 2012 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 development and updating of the NPSGs is overseen by the Patient Safety Advisory Group.
Patient Safety Advisory Group

- Comprised of a panel of widely recognized patient safety experts including nurses, physicians, pharmacists, risk managers, clinical engineers, and other professionals with hands-on experience in addressing patient safety issues in a wide variety of health care settings.

2011 Revisions

- No new NPSGs were implemented for 2011

- Four elements of performance (EPs) were revised to remove very specific requirements and allow for the use of new accepted clinical practices

- The revised EPs are:
  - NPSG.03.05.01, EP 6
  - NPSG.07.04.01, EP 11
  - NPSG.07.05.01, EP 7
  - NPSG.07.05.01, EP 8
Update to NPSG on Reconciling Medication

- 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 was revised based on input from the field about implementation difficulties related to the 2009 version of the NPSG which was too prescriptive and detailed.

- NPSG.03.06.01 replaces Goal 8 (08.01.01, 08.02.01, 08.03.01 and 08.04.01) and its related elements of performance.

- NPSG.03.06.01 became effective July 1, 2011.
New Goal for 2012

- The Joint Commission has approved one new NPSG for 2012

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

- Applicable to the hospital and critical access hospital accreditation programs

- 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.

- Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Lab, Long Term Care, 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

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

- Applies to: Critical Access Hospital, Hospital, Lab
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.

- Applies to: Ambulatory, Critical Access Hospital, Hospital
Medication Safety

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

- Applies to: Ambulatory, Critical Access Hospital, Hospital, Long Term Care
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, Long Term Care, Office-Based Surgery
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.

- Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Lab, Long Term Care, Office-Based Surgery
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.

• Applies to: Critical Access Hospital, Hospital
Health Care-Associated Infections

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

- Applies to: Critical Access Hospital, Hospital, Long Term Care
Health Care-Associated Infections

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

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.)

*NEW 2012 NPSG
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, Long Term Care
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.

- Applies to: Long Term Care
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
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
Additional Resources

- An article on the 2011 NPSGs published in the September 2010 issue of *Perspectives on Patient Safety*

- The final program-specific 2011 goals appear in 2011 Update 1, and the 2011 E-edition (electronic manual) and accreditation manuals
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

Questions can be sent to the Standards Interpretation Group at (630) 792-5900 or via the Standards Online Question Submission Form