

National Patient Safety Goals

Goal 1

Improve Patient Identification Accuracy

Must use 2 patient identifiers whenever taking blood samples or administering medication/blood products.

Conduct final verification process (time-out) using “active” communication techniques to confirm correct patient, procedure and site prior to the start of any surgical/invasive procedures.

Goal 2

Improve effectiveness of communication among caregivers

Implement process for taking verbal or telephone orders or critical test results requiring verification “read-back” of complete order by person receiving order or critical test results.

Standardize abbreviations, acronyms and symbols used throughout the organization and include a list of those not to use.

Goal 3

Improve high-alert medications safety use

Remove concentrated electrolytes – to include but not limited to, potassium chloride, potassium phosphate and sodium chloride > 0.9% - from patient care units.

Standardize and limit number of drug concentrations available in the organization.

Goal 4

Eliminate wrong-site, wrong patient, wrong surgery

Create and use preoperative verification process (checklist) to confirm appropriate documents available - medical records, imaging studies, etc. are available.

Implement process to mark surgical site and involve patient in process

Goal 5

Improve safety of using infusion pumps

Ensure free-flow protection on all general-use and PCA intravenous infusion pumps used in the organization

Goal 6

Improve effectiveness of clinical alarm systems

Implement regular prevention maintenance and testing of alarm systems.

Assure alarms activated with appropriate settings and audible with respect to distance and competing noises within unit.

Goal 7

Reduce the risk of health care-acquired infections

Comply with current CDC hand-hygiene guidelines.

Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-acquired infection.