

National Patient Safety Goals

1. Question:

What are National Patient Safety Goals?

Answer:

In July 2002, JCAHO approved its first set of six National Patient Safety Goals, with 11 related specific recommendations, for improving the safety of patient care in health care organizations. Each year there after new goals will be added. In July 2003, one goal was added bringing the total now to seven with specific recommendations to implement to ensure compliance. The recommendations were developed based on sentinel events that have been reported to the JCAHO—the recommendations are to focus on reducing the risk of medical errors and to increase patient safety. In July 2005 2 goals were added bringing the total to nine with specific recommendations to implement to ensure compliance.

2. Question:

What are the seven national patient safety goals?

Answer:

1. Improve the accuracy of patient identification.
 2. Improve the effectiveness of communication among caregivers.
 3. Improve the safety of using high-alert medications.
 4. Eliminate wrong-site, wrong patient procedure surgery.
 5. Improve the safety of using infusion pumps.
 6. Improve the effectiveness of clinical alarm systems.
 7. Reduce the risk of health care-acquired infections.
- Accurately and completely reconcile medications across the continuum of care.
Reduce the risk of patient harm resulting from falls.

<p>3. Question:</p> <p>What recommendations have we implemented to promote Goal #1, improve the accuracy of patient information?</p>	<p>Answer:</p> <p>There are two activities we use to identify the accuracy of patient information, they are.</p> <ol style="list-style-type: none"> a. Patient identifiers at LSUHSC-S include the patient name and medical record number. b. Prior to the start of any surgical procedure or invasive procedure a final verification is performed to confirm the correct patient, procedure, site, etc.
<p>4. Question:</p> <p>How does LSUHSC-S meet compliance with Goal # 2, Improve the effectiveness of communication among caregivers?</p>	<p>Answer:</p> <p>We meet compliance with Goal # 2 by:</p> <ol style="list-style-type: none"> a. At LSUHSC-S we verify the verbal order/result of critical lab by a verbal read back procedure. The individual accepting the verbal order/critical lab result must read back the order/result and record it in the medical record. b. Acceptable and unacceptable abbreviations, acronyms and symbols used at LSUHSC-S are published on the LSU web site. A pocket flier is also available from the Medical Records Department.
<p>5. Question:</p> <p>How do we meet compliance with Goal # 3, Improve the safety of using high-alert medications?</p>	<p>Answer:</p> <ol style="list-style-type: none"> a. At LSUHSC-S there are no concentrated electrolytes located in any patient area. b. At LSUHSC-S we have standardized all concentrations of high-risk drugs. Additional verification steps are required before administering Heparin, Insulin, Chemotherapy, and Morphine/Meperidine via PCA pumps.

<p>6. Question:</p> <p>How does LSUHSC-S meet compliance with Goal # 4, Eliminate wrong-site, wrong patient procedure surgery?</p>	<p>Answer:</p> <ul style="list-style-type: none"> a. At LSUHSC-S we have a pre-operative checklist completed by the Nursing staff prior to the patient being transferred to the OR Holding Room. b. At LSUHSC-S the surgeon must mark the area of the surgery prior to the induction of anesthesia using an indelible marker. This is usually performed when the informed consent is signed. Marking the surgical site is required for all cases involving right/left distinction, multiple structures---such as fingers, toes, etc., and levels as in the spine.
<p>7. Question:</p> <p>How does LSUHSC-S ensure the safety of patients using infusion pumps, Goal # 5, Improve the safety of using infusion pumps?</p>	<p>Answer:</p> <p>At LSUHSC-S all intravenous tubing is protected from flowing freely.</p>
<p>8. Question:</p> <p>How does LSUHSC-S ensure compliance with Goal # 6, Improve the effectiveness of clinical alarm systems?</p>	<p>Answer:</p> <ul style="list-style-type: none"> a. Preventive maintenance is completed by Biomedical Engineering on equipment and it is documented that the alarm is functioning properly. b. Biomedical Engineering also performs walk around inspections, as well as Hospital Administration completing monthly zone inspections to verify alarms are audible and that all alarms are tuned on and functioning. Staff also check at the beginning of their shift to assure alarms are set appropriately and functioning.

<p>9. Question:</p> <p>What steps are taken to meet compliance with Goal # 7, Reduce the risk on health care-acquired infections?</p>	<p>Answer:</p> <ul style="list-style-type: none"> a. At LSUHSC-S we use the recommendations published by the CDC for hand washing to reduce the risk of nosocomial infection. b. At LSUSHC-S we perform an intensive analysis on all occurrences reported as an unanticipated death or major permanent loss of function, defined as a sentinel event.
<p>10. Question:</p> <p>What steps were taken to ensure timely and accurate documentation of a comprehensive list of patient's medication?</p>	<p>Answer:</p> <p>At LSUHSC-S we created a Medication Reconciliation Form (LSUHSC-7266). The Medication Reconciliation form must be completed on admission, inpatient and outpatient transfers, and discharge.</p>
<p>11. Question:</p> <p>What steps were taken to prevent the number of falls in this institution?</p>	<p>Answer:</p> <p>At LSUHSC-S we implemented a falls reduction program with continuous evaluation of the effectiveness of the program.</p>
<p>12. Question:</p> <p>How do I find out more about the National Patient Safety Goals?</p>	<p>Answer:</p> <p>To find out more about the National Patient Safety Goals go to the JCAHO web site (www.jcaho.org) and type in Patient Safety Goals.</p>