BHIP NATIONAL PATIENT SAFETY GOALS CY2022

NPSG Calendar Year 2022		*Numerator/ Denominator*	Target	Prior YTD	Q1	Q2	Q3	Q4	YTD
Goal 1: Improve the Accuracy of Patient ID	**% of Patients Scanned** **NPSG 01.01.01** Use at least two ways to identify patients. **(Medication)**	# of patients scanned	95%		156557	134094	134476	135178	560305
		Total # of medication administration			165811	141633	140478	141120	589042
				99.00%	98.67%	95.00%	96.00%	96.00%	95%
	% of Medications Scanned **NPSG 01.01.01** Use at least two ways to identify patients. **(Medication)**	# of medications scanned	95%	674188	152942	132270	129354	133737	548303
		Total # of medication administration		686,288	164429	140431	136514	141120	582494
				98.00%	93.01%	94.19%	94.76%	94.77%	94%
	% of Specimens Scanned **NPSG 01.01.01** Use at least two ways to identify patients. (Lab)	# of specimens	95%	199922	47704	44390	44742	42882	179718
		Total # specimens received		206,345	49313	46024	46054	44166	185557
				97.00%	96.74%	96.45%	97.15%	97.09%	97%
	% of Lab MislabeledSpecimens **NPSG 01.01.01** Use at least two ways to identify patients. (Lab)	# of Mislabeled	0%	2	0	1	1	1	3
Goal 2: Improve the Effectiveness of Communicating Among Caregivers Critical Test Results Timeliness - Overall Goal 60 minutes	**Critical Test Called to LIP** **NPSG 02.03.01** Get important results to the right to LIP on time. (Respiratory)	# Critical results called back in 30 minutes	90%	1371	196	236	202	133	767
		# of Critical Results looked at		1405	198	237	204	137	776
				98.0%	99%	100%	99%	97%	12
	Compliance with Critical Result Communication **NPSG 02.03.01** Get important results to LIP on time. (Radiology)	# Result Called within 30 min	90%	54	8	7	4	8	27
		# of Critical Results called		54	8	7	4	8	27
				100%	100%	100%	100%	100%	100%
	Critical Test Called to LIP **NPSG 02.03.01** Communicate results to LIP within 60 minutes. (LAB & Nursing)	# CTRs to LIP	90%	1398	458	388	451	372	1669
		# of Critical Results		1498	470	390	461	391	1712
				93%	97%	99%	98%	95%	12
Goal 3: Use Medicines Safely	**Excessive anticoagulation with Warfarin** **NPSG 03.05.01** Take extra care with patient who take medicines to thin their blood. (Pharmacy)	# of patients with INR>5	0%	0.00					
		# Inpatients receiving warfarin		113	24	16	24	22	86
				0%	0%	0%	0%	0%	0%
	Anticoagulant Occurrences **NPSG 03.05.01** Take extra care with patient who take medicines to thin their blood. (Pharmacy)	Actual Variances		2325	557	508	576	514	2155
		Total # of Adiusted admissions		2325	557	508	576	514	2155
				100.00%	100.00%	100.00%	100.00%	100.00%	100%
	Medication Reconciliation **NPSG 03.06.01** Record and pass along correct information about patient's meds. Find out what patient is taking. Compare to new meds. (Nursing)	# of patients with Medications reconciled on admission completed	95%	353	90	90	90	90	360
		Total # of patient's charts reviewed		360	90	90	90	90	360
				98.00%	100.00%	100.00%	100.00%	100.00%	100%
Goal 6: Use Alarms Safely	**Clinical Alarms** **NPSG 06.01.01** Make improvements to ensure that alarms on medical equip are heard and responded to. (Nursing Admin)	# of Patient's Physiological Alarms	90%	120	30	30	30	30	120
		Total # of patient's charts reviewed		120	30	30	30	30	120
		BHIP ICU		100.0%	100.00%	100%	100.00%	100.00%	100%
Goal 7: Prevent Infection	**Hand Hygiene (Observational)** **NPSG 07.01.01** Use the hand cleaning guidelines from the CDC and Prevention or the WHO. (EPI)	# Compliant	90%	27545	5405	5406	5471	6055	16931
		Total # Observed		28405	5540	5541	5693	6467	17700
				96.0%	97.56%	98%	96%	94%	96%
Goal 15: ID Patients at Risk for Suicide	**Suicide Assessment completed** **NPSG 15.01.01** Reduce the risk for suicide. (Nursing Admin)	Risk Assessment completed	95%	30	90	90	90	90	360
		# of Charts		30	90	90	90	90	360
				100%	100%	100%	100%	100%	100%
Universal Protocol	**Prevent Mistakes in Surgery** ***UP.01.01.01** **Make sure the correct surgery is done on the correct patient and at the correct place on the patient's body** Correct surgery done on correct patient and at correct place of person's body **/** **UP 01.02.01** **Team confirmed Correct Site/Side Marked** Mark the corret place on the patient's body where the surgery is to be done. (OR)	Team confirmed Correct Site/Side Marked (Compliant)	100%	360	90	90	90	90	300
		Total # of Patients		360	90	90	90	90	360
				100%	100%	100%	100%	100%	100%
	***UP.01.01.01** **Make sure the correct surgery is done on the correct patient and at the correct place on the patient's body** Make sure the correct surgery is done on the correct patient and at the correct place on the patient's body **/** **Surgical Procedure Area** **UP 01.03.01** Pause before the surgery to make sure that a mistake is not being made. (OR)	Time Out called by physician provider before incision (Compliant)	100%	360	90	90	90	90	360
		Total # Assessed		360	90	90	90	90	360
				100%	100%	100%	100%	100%	100%