NPSG Calend	dar 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.	# of patients scanned  Total # of medication administration	98%	1,116,966	262,676	263,100	258,689	269,627	1,054,092
					-				
				1,163,382	275,193	274,551	267,959	276,848	1,094,551
				96.0%	95.5%	95.8%	96.5%	97.4%	96.3%
	% of Medications Scanned NPSG 01.01.01 Use at least two ways to identify patients.	# of medications scanned  Total # of medication administration	98%	1,106,190	260,032	260,539	255,751	267,120	1,043,442
				1,163,382.0	275,193	274,551	267,959	276,848	1,094,551
				95.1%	94.5%	94.9%	95.4%	96.5%	95.3%
	% of Specimens Scanned NPSG 01.01.01 Use at least two ways to identify patients.  % of Lab MislabeledSpecimens NPSG 01.01.01 Use at least two ways to identify patients.	# of specimens (Total PPID)	98%	397,809	87,238	94,604	94,602	93,075	369,519
		Total # specimens received (Total Sticks)		411,580	91,452	99,884	98,988	97,465	387,789
				96.7%	95.4%	94.7%	95.6%	95.5%	95.3%
		# of Mislabeled	<u>&lt;</u> 0.03%	47	11	4	4	3	22
		Total # speci drawn		401,243	95,277	99,884	99,840	99,177	394,178
				0.01%	0.01%	0.00%	0.0%	0.00%	0.0%
Goal 2: Improve the Effectiveness of Communicating Among Caregivers Critical Test Results Timeliness - Overall Goal 60 minutes	Compliance with Critical Result Communication NPSG 02.03.01 Get important results to LIP on time. (Radiology)	# Result Called within 30 min	90%	88	3	4	5	4	16
		# of Critical Results called		88	3	4	5	4	16
				8	100%	100%	100%	100%	100.0%
	Critical Test Called to LIP NPSG 02.03.01 Get important results to LIP on time. (LAB results/nursing calls)	# CTRs to LIP (RN spoke to DR<60mins)		3,427	648	843	1,185	1,044	3,720
		# of Critical Results (lab call to RN)	90%	4,911	948	1,104	1,557	1,424	5,033
				70%	68%	76%	76%	73%	73.9%
Goal 3: Use Medicines Safely	Surgical Procedure Area NPSG 03.04.01 Before a procedure label medicines that are not labeled. (GI & OR)	All Medications and Solutions are Appropriately	100%	9	163	178	170	173	684
		Labeled (Compliant)		9	165	180	180	180	705
		Total # of Observations		100%	99%	99%	94%	96%	97.0%
	EOM ADE 12 Excessive anticoagulation								
	inpatients with Warfarin NPSG 03.05.01 Take extra care with patient who take medicines to thin their blood.	# of patients with INR>5	0%	6	2	1	2	2	7
		# Inpatients receiving warfarin		145	35	24	46	27	132
				4%	6%	4%	4%	7%	5%
	Anticoagulant Occurrences NPSG 03.05.01 Take extra care with patient who take medicines to thin their blood. (Pharmacy)	Actual Variances		10	0	5	3	4	12
		Total # of admissions		10,933	2,470	2,601	2,668	2,734	10,473
				0%	0.00%	0.19%	0.11%	0.15%	0.1%
	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.	# of patients with Medications reconciled on		10,875	2,455	2,588	2,651	2,720	9,528
		admission completed	-	10,933	2,470	2,601	2,668	2,734	10,473
		Total # of admissions		99.5%	99.4%	99.5%	99.4%	99.5%	91.0%
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. (rapid response calls by monitor tech)	# of Patient's Physiological		1	4	2	2	0	8
		Alarms Total # of patient's charts	100%	1	4	2	2	0	8
		reviewed		100.00%	100.00%	100.00%	100.00%		100.0%
Goal 7: Prevent Infection	Hand Hygiene (Observational) NPSG 07.01.01 Use the hand cleaning guidelines from the CDC and Prevention or the WHO. *Adult & Salah (EPI)		95%	35,599	11,461	10,497	9,248	96,118	127,324
		# Compliant		36,321	11,989	11,268	10,300	107,274	140,831
		Total # Observed		98%	96%	93%	90%	90%	90%
Goal 15: ID Patients at Risk for Suicide	Suicide Assessment completed NPSG 15.01.01 Reduce the risk for suicide. (Quality)	Risk Assessment		326	83	83	84	82	332
		completed	90%						
		# of Charts	90%	330	90	90	90	90	360
				98.8%	92.2%	92.2%	93.3%	91.1%	92.2%
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 UP 01.02.01 Team confirmed Correct Site/Side Marked	Team confirmed Correct Site/Side Marked (Compliant)	100%	9	165	180	180	120	645
				9	165	180	180	120	645
				100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Surgical Procedure Area UP 01.03.01 Pause before the surgery to make sure that a mistake is not being made.	Time Out called by physician provider before	100%	9	165	180	180	180	705
		incision (Compliant)							
				9	165	180	180	180	705
				100.0%	100.0%	100.0%	100.0%	100.0%	100.0%