

BHCS NATIONAL PATIENT SAFETY GOALS CY2021													
NPSG Calendar Year 2021		Numerator/Denominator	Q1	Q2	Jul	Aug	Sep	Q3	Oct	Nov	Dec	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	268,764	266,850	94,159	113,138	103,463	310,760	96,843	82,074	91,675	270,592	1,116,966
		Total # of medication administration	277,320	278,208	98,649	118,809	108,110	325,568	100,999	85,367	95,920	282,286	1,163,382
			96.9%	95.9%	95.4%	95.2%	95.7%	95.5%	95.9%	96.1%	95.6%	95.9%	96.0%
	% of Medications Scanned NPSG 01.01.01 Use at least two ways to identify patients.	# of medications scanned	266,224	263,775	93,406	112,106	102,449	307,961	95,902	81,387	90,941	268,230	1,106,190
		Total # of medication administration	277,320	278,208	98,649	118,809	108,110	325,568	100,999	85,367	95,920	282,286	1,163,382
			96.0%	94.8%	94.7%	94.4%	94.8%	94.6%	95.0%	95.3%	94.8%	95.0%	95.1%
	% of Specimens Scanned NPSG 01.01.01 Use at least two ways to identify patients.	# of specimens (Total PPID)	90,470	95,969	32,597	39,471	35,408	107,476	36,618	33,736	33,540	103,894	397,809
		Total # specimens received (Total Sticks)	92,726	98,187	33,332	40,613	36,770	110,715	39,209	35,670	35,073	109,952	411,580
			97.6%	97.7%	97.8%	97.2%	96.3%	97.1%	93.4%	94.6%	95.6%	94.5%	96.7%
	% of Lab Mislabeled Specimens NPSG 01.01.01 Use at least two ways to identify patients.	# of Mislabeled	20	7	1	2	3	6	6	1	7	14	47
		Total # specie drawn	97890	98849	34572	37950	34216	106738	33889	30181	33696	97766	401243
			0.02%	0.01%	0.00%	0.01%	0.01%	0.01%	0.02%	0.00%	0.02%	0.01%	0.01%
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	1	1	15	13	15	43	13	15	15	43	88
		# of Critical Results called	1	1	15	13	15	43	13	15	15	43	88
			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Critical Test Called to LIP NPSG 02.03.01 Get important results to LIP on time. (LAB results/nursing calls)	# CTRs to LIP (RN to Dr <60mins)	845	831	294	388	338	1020	292	202	237	731	3427
		# of Critical Results (Lab call to RN)	1251	1189	385	587	507	1479	369	292	331	992	4911
			68%	70%	76%	66%	67%	69%	79%	69%	72%	74%	70%
Goal 3: Use Medicines Safely	Surgical Procedure Area NPSG 03.04.01 Before a procedure label medicines that are not labeled. (OR)	All Medications and Solutions are Appropriately Labeled (Compliant)	3	3	1	1	1	3					9
		Total # of Observations	3	3	1	1	1	3					9
			100%	100%	100%	100%	100%	100%	-	-	-	-	100%
	EUM ADE 12 EXCESSIVE anticoagulation inpatients 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	2	0	2	1	3	0	1	0	1	6
		# Inpatients receiving warfarin	30	39	17	18	8	43	9	12	12	33	145
			0%	5%	0%	11%	13%	7%	0%	8%	0%	3%	4%
	Anticoagulant Occurrences NPSG 03.05.01 Take extra care with patient who take medicines to thin their blood. (Pharmacy)	Actual Variances	0	0	0	0	0	0	0	0	0	0	0
		Total # of admissions	2701	2686	945	1065	863	2873	903	818	952	2673	10933
			0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0%
	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 admission completed	2694	2672	940	1060	857	2857	895	813	944	2652	10875
Total # of admissions		2701	2686	945	1065	863	2873	903	818	952	2673	10933	
		99.7%	99.5%	99.5%	99.5%	99.3%	99.4%	99.1%	99.4%	99.2%	99.2%	99.5%	
Goal 6: Use Alarms Safety	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 Alarms	0	1	0	0	0		0	0	0		1
		Total # of patient's charts reviewed	-	-	-	-	-	-	-	-	-	-	-
Goal 7: Prevent Infection	(Observational) NPSG 07.01.01 Use the hand cleaning guidelines from the CDC and Prevention or the WHO. *Adult & Salah (EPI)	# Compliant	3769	8071	4051	3312	2887	10250	4360	4022	5127	13509	35599
		Total # Observed	3860	8320	4167	3405	2958	10530	4478	4079	5054	13611	36321
			97.64%	97%	97.22%	97.27%	97.60%	97%	97.36%	98.60%	101.44%	99%	98%
Goal 15: ID Patients at Risk for Suicide	Suicide Assessment completed NPSG 15.01.01 Reduce the risk for suicide. (Quality)	Risk Assessment completed	90	90	30	30		60	29	28	29	86	326
		# of Charts	90	90	30	30		60	30	30	30	90	330
			100.0%	100.0%	100.0%	100.0%	-	100.0%	96.7%	93.3%	96.7%	95.6%	98.8%
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 (Compliant)	3	3	1	1	1	3					9
		Total # of Patients	3	3	1	1	1	3					9
			100.0%	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. (OR)	Time Out called by physician provider before incision (Compliant)	3	3	1	1	1	3					9
		Total # Assessed	3	3	1	1	1	3					9
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	-	-	-	-	100.0%	