NATIONAL PATIENT SAFETY GOALS CY2021

NPSG Calendar Year 2021		*Numerator/ Denominator*	Target	Jan	Feb	Mar	Q1	Apr	May	Jun	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	98%	107,689	98,390	97,825	**303,904**	101,067	97,133	99,666	**297,866**	114,311	113,522	112,183	**340,016**	104,656	98,553	101,799	**305,008**	**1,246,794**
		Total # of medication administration		113,344	102,733	101,809	**317,886**	105,774	101,820	104,584	**312,178**	120,217	120,541	117,944	**358,702**	109,999	102,904	106,548	**319,451**	**1,308,217**
				95.0%	**95.8%**	**96.1%**	**95.6%**	**95.5%**	**95.4%**	**95.3%**	**95.4%**	**95.1%**	**94.2%**	**95.1%**	**94.8%**	**95.1%**	**95.8%**	**95.5%**	**95.5%**	**95.3%**
	% of Medications Scanned **NPSG 01.01.01** Use at least two ways to identify patients.	# of medications scanned	98%	106,201	96,998	96,526	**299,725**	99,759	95,744	98,270	**293,773**	112,707	111,860	110,447	**335,014**	102,950	97,063	100,389	**300,402**	**1,228,914**
		Total # of medication administration		113,344	102,733	101,809	**317,886**	105,774	101,820	104,584	**312,178**	120,217	120,541	117,944	**358,702**	109,999	102,904	106,548	**319,451**	**1,308,217**
				93.7%	**94.4%**	**94.8%**	**94.3%**	**94.3%**	**94.0%**	**94.0%**	**94.1%**	**93.8%**	**92.8%**	**93.6%**	**93.4%**	**93.6%**	**94.3%**	**94.2%**	**94.0%**	**93.9%**
	% of Lab MislabeledSpecimens **NPSG 01.01.01** Use at least two ways to identify patients.	# of Mislabeled	≤0.03%	0	0	0		0	0	0		0	2	0		0	0	0		**2**
		Total # speci drawn		1398	1234	1258	**3890**	1277	1145	1247	**3669**	1448	1704	1302	**4454**	1259	1213	1406	**3878**	**15891**
				0.00%	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.12%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**0.00%**	**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	90%	5	2	0	**7**	1	0	1	**2**	4	2	2	**8**	3	3	4	**10**	**27**
		# of Critical Results called		5	2	0	**7**	1	0	1	**2**	4	2	2	**8**	3	3	4	**10**	**27**
				100%	**100%**	-	**100%**	**100%**	-	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**	**100.00%**
	Critical Test Not Called to LIP **NPSG 02.03.01** Get important results to LIP on time. (LAB results/nursing calls)	# CTRs to LIP	90%	45	52	51	**148**	48	43	48	**139**	58	49	27	**134**	35	31	32	**98**	**519**
		# of Critical Results		24135	21111	24513	**69759**	23646	21566	22406	**67618**	24424	24926	23630	**72980**	24001	23432	24327	**71760**	**282117**
				0%	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0%**	**0.18%**
Goal 3: Use Medicines Safely	**EOM 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%	1	0	0	**1**	0	2	0	**2**	0	0	1	**1**	0	0	1	**1**	**5**
		# Inpatients receiving warfarin		33	30	24	**87**	25	17	22	**64**	22	22	13	**57**	18	31	23	**72**	**280**
				3%	**0%**	**0%**	**1%**	**0%**	**12%**	**0%**	**3%**	**0%**	**0%**	**8%**	**2%**	**0%**	**0%**	**4%**	**1%**	**2%**
	Anticoagulant Occurrences **NPSG 03.05.01** Take extra care with patient who take medicines to thin their blood. (Pharmacy)	Actual Variances		1	1	2	**4**	1	0	0	**1**	0	0	1	**1**	0	2	0	**2**	**8**
		Total # of admissions		1	1	2	**4**	1	0	0	**1**	0	0	1	**1**	0	2	0	**2**	**8**
				100.00%	**100.00%**	**100.00%**	**100.00%**	**100.00%**	-	-	**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.	# of patients with Medications reconciled on admission completed		217	219	189	**625**	202	185	186	**573**	175	196	179	**550**	176	173	121	**470**	**2218**
		Total # of admissions		235	232	205	**672**	224	202	199	**625**	199	210	189	**598**	182	182	132	**496**	**2391**
				92.3%	**94.4%**	**92.2%**	**93.0%**	**90.2%**	**91.6%**	**93.5%**	**91.7%**	**87.9%**	**93.3%**	**94.7%**	**92.0%**	**96.7%**	**95.1%**	**91.7%**	**94.8%**	**92.8%**
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 Alarms		25	32	41	**98**	28	33	31	**92**	38	39	39	**116**	42	37	31	**110**	**416**
		Total # of patient's charts reviewed		25	32	41	**98**	28	33	31	**92**	38	39	39	**116**	42	37	31	**110**	**416**
				100.00%	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**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. *Adult & Salah (EPI)	# Compliant	90%	**88.10%**	**89.90%**	**90.30%**	**89.43%**	**92.10%**	**91.70%**	**89.50%**	**91%**	**88.70%**	**85.50%**	**84.20%**	**88%**	**92.40%**	**87.50%**	**90.20%**	**90%**	**89%**
	Suicide Assessment completed	# of Charts		224	221	193	**638**	205	190	192	**587**	189	203	182	**574**	171	165	114	**450**	**2249**
				226	222	195	**643**	210	192	193	**595**	192	204	182	**578**	175	167	117	**459**	**2275**
				99.1%	**99.5%**	**99.0%**	**99.2%**	**97.6%**	**99.0%**	**99.5%**	**98.7%**	**98.4%**	**99.5%**	**100.0%**	**99.3%**	**97.7%**	**98.8%**	**97.4%**	**98.0%**	**98.9%**
Universal Protocol	**Prevent Mistakes in Surgery** **NPSG/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** **NPSG/UP 01.02.01** **Team confirmed Correct Site/Side Marked**	Team confirmed Correct Site/Side Marked (Compliant)	100%	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	**360**
		Total # of Patients		30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	**360**
				100.0%	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**
	Surgical Procedure Area **NPSG/UP 01.03.01** **Time Out** before the surgery to make sure that a mistake is not being made. (OR)	Time Out called by physician provider before incision (Compliant)	100%	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	**360**
		Total # Assessed		30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	30	30	30	**90**	**360**
				100.0%	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**