BHIP NATIONAL PATIENT SAFETY GOALS CY2021																					
NPS	G Calendar Year 2021	Numerator/ Denominator	Target	Prior YTD	Jan	Feb	Mar	Q1	Apr	May	Jun	Q2	Jul	Aug	Sep	Q3	Oct	Nov	Dec	Q4	YTD
Goal 2: Improve the Effectiveness of Communicating Caregivens Crister For Route Transformer Caregivens Crister For Route	% of Medications Scanned NPSG 01.01.01 Use at least the ways to identify patients. (Medication)	# of medications scanned Total # of medication administration	95%		59,800	55,173	61712	176685	59050	58604	55294	172948	29896	78975	58660	167531	49350	48929	58745	157024	674188
					60729	56176	62568	179473	59784	59591	56213	175588	30399	80728	59837	170964	50353	49889	60021	160263	686288
					98.47%	98.21%	98.63%	98.45%	98.77%	98.34%	98.37%	98.50%	98.35%	97.83%	98.03%	97.99%	98.01%	98.08%	97.87%	97.98%	98%
	% of Specimens Scanned NP5G 01.01.01 Use at lists the ways is lotterly patients. (Lab) % of Lab MislabeledSpecimens	# of specimens			15,520	15,040	17735	48295	16746	16233	15929	48908	17862	19996	15451	53309	14860	18132	16418	49410	199922
			95%		16040	15586	18319	49945	17313	16816	16504	50633	18414	20574	15936	54924	15349	18666	16828	50843	206345
					96.76%	96.50%	96.81%	96.70%	96.73%	96.53%	96.52%	96.59%	97.00%	97.19%	96.96%	97.06%	96.81%	97.14%	97.56%	97.18%	97%
	NPSG 01.01.01 Use at least two ways to identify patients. (Lab)	# of Mislabeled	0%	4	0	0	0	0	0	0	0		1	0	1	2	0	0	0		
	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 # of Critical Results looked at	90%		113	82	150	345	108	111	83	302	81	260	138	479	99	53	93	245	1371
					116 97%	82 100%	154 97%	352 98%	110 98%	111 100%	84 99%	305 99%	84 96%	268 97%	150 92%	502 95%	99 100%	53 100%	94 99%	246 100%	1405 98%
	Compliance with Critical Result Communication NPSG 02.03.01 Get important results to LIP on time. (Radiology)	# Result Called within 30 min # of Critical Results called	90%	28 28	7	2	4	13 13	4	2	3	9	8	12	5	25 25	2	5		7	54 54
					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%
Goal 60 minutes	Critical Test Called to LIP NPSG 02.03.01 Communicate results to LIP within 60 minutes. (LAB & Nursing)	# CTRs to LIP # of Critical Results			99	71	134	304	88	115	105	308	115	189	124	428	96	116	146	358	1398
			90%		101 98%	73 97%	138 97%	312 97%	92 96%	118 97%	107 98%	317 97%	121 95%	195 97%	139 89%	455 94%	98 98%	124 94%	152 96%	374 96%	1458 93%
	Excessive anticoagulation with Warfarin NPSG 03.05.01 Tale extra care with patient who take medicines to thin there blood. (Pharmacy)	# of patients with INR>5		0.00	0	0	0		0	0	0		0	0	0		0	0	0		
Goal 3: Use Medicines Safety		# Inpatients receiving warfarin	0%	85.00	6	9	13	28	9	11	6	26	11	8	10	29	14	7	9	30	113
				0.00%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	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 Total # of Adjusted admissions		2307	228	205	228	661	179	183	185	547	188	194	205	587	177	170	183	530	2325
				2307	228	205	228	661 100.00%	179 100.00%	183 100.00%	185	547	188 100.00%	194 100.00%	205	587	177	170 100.00%	183 100.00%	530	2325
	Medication Reconciliation NPSG 03.06.01 Record and pass along correct information about patient's meds. Compare to new meds. (Nursing)	# of patients with Medications reconciled on admission completed Total # of patient's charts reviewed	95%	30	30	30	30	90	30	28	28	100.00 %	30	30	30	90	27	30	30	87	353
				30	30	30	30	90	30	30	30		30	30	30	90	30	30	30	90	360
				100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	93.33%	93.33%		100.00%	100.00%	100.00%	100.00%	90.00%	100.00%	100.00%	96.67%	98%
	Clinical Alarms NPSG 66.01.01 medical exprovements to ensure that alares on medical exprovements to ensure the (Nursing Admin)	# of Patient's Physiological Alarms		30	10	10	10	30	10	10	10	30	10	10	10	30	10	10	10	30	120
Goal 6: Use Alarms Safely		Total # of patient's charts reviewed	90%	30	10	10	10	30	10	10	10	30	10	10	10	30	10	10	10	30	120
		BHIP ICU		100.0%	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 Hyglene (Observational) NPSG 07.01.01 Use the hand change guidelines from the CDC and Prevention or the WHO. (EPI)	# Compliant	90%	11848	2218	1338	1743	5299	1238	3281	2575	7094	2390	2642	2422	7454	2092	2544	3062	7698	27545
		Total # Observed		13067	2316	1397	1782	5495	1280	3404	2703	7387	2431	2712	2462	7605	2146	2624	3148	7918	28405
				91.0%	95.77%	95.78%	97.81%	96.43%	96.72%	96.39%	95.26%	96%	98.31%	97.42%	98.38%	98%	97.48%	96.95%	97.27%	97%	97%
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 # of Charts	95%	30	30	30	30	90	30	30	30	90	30	30	30	90	30	30	30	90	360
				30	30	30	30	90	30	30	30	90	30	30	30	90	30	30	30	90	360
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	Team confirmed Correct Site/Side Marked		100% 30	100.00% 30	100.00% 30	100.00% 30	100% 90	100% 30	100% 30	100% 30	100% 90	100% 30	100% 30	100% 30	100% 60	100% 30	100% 30	100% 30	100% 90	100% 360
		(Compliant) Total # of Patients		30	30	30	30	90	30	30	30	90	30	30	30	90	30	30	30	90	360
	body Correct surgery who en correct patient and at correct place of person's body / UP 01.02.01 Team confirmed Correct Site(Side Marked Marked Marke corres places on the patient's body where the surgery is to be done. (O(R)	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	#REF!	67%	100%	100%	100%	100%	100%
		Time Out called by physician			20		~		~~	20	~	90	~			90		20	20	90	260
	"UP3.151.01 Make sure the correct jaces on the correct back on the correct jaces on the patient's body back on the patient's body "Back of the correct place and a flow on the correct patient and the correct place on the patient's body "Back of the correct place on the UP 10.03.01 Prave body the usery for make user that a missible is not being mask." (CR)	provider before incision (Compliant) Total # Assessed	100%	30	30	30	30	90	30	30	30	90	30	30	30	90	30 30	30	30	90	360
				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%