

Standards Improvement Initiative (SII) Chapter Outline

Chapter: National Patient Safety Goals (NPSG) Program: Critical Access Hospital

- I. Goal 1 – Improve the accuracy of patient identification.
 - A. Use of Two Patient Identifiers (revised NPSG.01.01.01)
 - B. Not Applicable to Critical Access Hospital (revised NPSG.01.02.01)
 - C. Eliminating Transfusion Errors (revised NPSG.01.03.01)

- II. Goal 2 – Improve the effectiveness of communication among caregivers.
 - A. Reading Back Verbal Orders (revised NPSG.02.01.01)
 - B. Creating a List of Abbreviations Not to Use (revised NPSG.02.02.01)
 - C. Timely Reporting of Critical Tests and Critical Results (revised NPSG.02.03.01)
 - D. Not Applicable
 - E. Managing Hand-Off Communications (revised NPSG.02.05.01)

- III. Goal 3 – Improve the safety of using medications.
 - A. Not Applicable
 - B. Not Applicable
 - C. Managing Look Alike, Sound Alike Medications (revised NPSG.03.03.01)
 - D. Labeling Medications (revised NPSG.03.04.01)
 - E. Reducing Harm from Anticoagulation Therapy (revised NPSG.03.05.01)

- IV. Goal 4 – Not Applicable
- V. Goal 5 – Not Applicable
- VI. Goal 6 – Not Applicable

- VII. Goal 7 – Reduce the risk of health care-associated infections.
 - A. Meeting Hand Hygiene Guidelines (revised NPSG.07.01.01)
 - B. Sentinel Events Resulting from Infection (revised NPSG.07.02.01)
 - C. Preventing Multi-Drug Resistant Organism Infections (revised NPSG.07.03.01)
 - D. Preventing Central-Line Associated Blood Stream Infections (revised NPSG.07.04.01)
 - E. Preventing Surgical Site Infections (revised NPSG.07.05.01)

- VIII. Goal 8 – Accurately and completely reconcile medications across the continuum of care.
 - A. Comparing Current and Newly Ordered Medications (revised NPSG.08.01.01)
 - B. Communicating Medications to the Next Provider (revised NPSG.08.02.01)
 - C. Providing a Reconciled Medication List to the Patient (revised NPSG.08.03.01)
 - D. Settings in Which Medications are Minimally Used (revised NPSG.08.04.01)

- IX. Goal 9 – Reduce the risk of patient harm resulting from falls.
 - A. Implementing a Fall Reduction Program (revised NPSG.09.02.01)

- X. Goal 10 -- Reduce the risk of influenza and pneumococcal disease in institutionalized older adults.
 - A. Not Applicable to Critical Access Hospital (revised NPSG.10.01.01)

- B. Not Applicable to Critical Access Hospital (revised NPSG.10.02.01)
- C. Not Applicable to Critical Access Hospital (revised NPSG.10.03.01)

- XI. Goal 11 – Reduce the risk of surgical fires.
 - A. Not Applicable to Critical Access Hospital (revised NPSG.11.01.01)

- XII. Goal 12 Not Applicable

- XIII. Goal 13 – Encourage patients’ active involvement in their own care as a patient safety strategy.
 - A. Patient and Family Reporting of Safety Concerns (revised NPSG.13.01.01)

- XIV. Goal 14 – Prevent health care associated pressure ulcers (decubitus ulcers).
 - A. Not Applicable to Critical Access Hospital (revised NPSG.14.01.01)

- XV. Goal 15 – The organization identifies safety risks inherent in its patient population.
 - A. Not Applicable to Critical Access Hospital (revised NPSG.15.01.01)
 - B. Not Applicable to Critical Access Hospital (revised NPSG.15.02.01)

- XVI. Goal 16 – Improve recognition and response to changes in a patient’s condition.
 - A. Requesting Assistance for a Patient with a Worsening Condition (revised NPSG.16.01.01)

Universal Protocol

- I. Universal Protocol
 - A. Conducting a Pre-Procedure Verification Process (revised UP.01.01.01)
 - B. Marking the Procedure Site (revised UP.01.02.01)
 - C. Performing a Time-Out (revised UP.01.03.01)