



Accreditation Program: Laboratory
National Patient Safety Goals

Goal 1

Improve the accuracy of patient identification.



NPSG.01.01.01



Use at least two patient identifiers when providing laboratory services.

Rationale for NPSG.01.01.01

Wrong-patient errors occur in virtually all stages of diagnosis and treatment. The intent for this goal is two-fold: first, to reliably identify the individual as the person for whom the service or treatment is intended; second, to match the service or treatment to that individual. Acceptable identifiers may be the individual's name, an assigned identification number, telephone number, or other person-specific identifier.

Elements of Performance for NPSG.01.01.01

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|----------|---|--|
| M | 1. Use at least two patient identifiers when administering blood or blood components; when collecting blood samples and other specimens for clinical testing; and when providing other treatments or procedures. The patient's room number or physical location is not used as an identifier.
Note: An example of "other procedures" includes bone marrow aspirates. |  C |
| | 2. Label containers used for blood and other specimens in the presence of the patient. |  A |

KEY: **A** indicates scoring category A; **C** indicates scoring category C;  indicates situational decision rules apply;  indicates direct impact requirements apply; **M** indicates Measure of Success if needed; **D** indicates that documentation is required

Goal 2

Improve the effectiveness of communication among caregivers.


NPSG.02.03.01





Report critical results of tests and diagnostic procedures on a timely basis.

Rationale for NPSG.02.03.01

Critical results of tests and diagnostic procedures fall significantly outside the normal range and may indicate a life-threatening situation. The objective is to provide the responsible licensed caregiver these results within an established time frame so that the patient can be promptly treated.

Elements of Performance for NPSG.02.03.01

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|---|-----------------|
| <p>1.  Collaborate with organization leaders to develop written procedures for managing the critical results of tests and diagnostic procedures that address the following:</p> <ul style="list-style-type: none"> - The definition of critical results of tests and diagnostic procedures - By whom and to whom critical results of tests and diagnostic procedures are reported - The acceptable length of time between the availability and reporting of critical results of tests and diagnostic procedures | <p>A</p> |
| <p>2. Implement the procedures for managing the critical results of tests and diagnostic procedures.</p> | <p>A</p> |
| <p>3. Evaluate the timeliness of reporting the critical results of tests and diagnostic procedures.</p> | <p>A</p> |

KEY: **A** indicates scoring category A; **C** indicates scoring category C;  indicates situational decision rules apply;  indicates direct impact requirements apply;  indicates Measure of Success if needed;  indicates that documentation is required

Goal 7

Reduce the risk of health care–associated infections.


NPSG.07.01.01





Comply with either the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines or the current World Health Organization (WHO) hand hygiene guidelines.

Rationale for NPSG.07.01.01

According to the Centers for Disease Control and Prevention, each year, millions of people acquire an infection while receiving care, treatment, or services in a health care organization. Consequently, health care-associated infections (HAIs) are a patient safety issue affecting all types of health care organizations. One of the most important ways to address HAIs is by improving the hand hygiene of health care staff. Compliance with the World Health Organization (WHO) or Centers for Disease Control and Prevention (CDC) hand hygiene guidelines will reduce the transmission of infectious agents by staff to patients, thereby decreasing the incidence of HAIs. To ensure compliance with this National Patient Safety Goal, an organization should assess its compliance with the CDC and/or WHO guidelines through a comprehensive program that provides a hand hygiene policy, fosters a culture of hand hygiene, and monitors compliance and provides feedback.

Elements of Performance for NPSG.07.01.01

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| 1. | Implement a program that follows categories IA, IB, and IC of either the current Centers for Disease Control and Prevention (CDC) or the current World Health Organization (WHO) hand hygiene guidelines. (See also IC.01.04.01, EP 5) |  A |
| 2. | Set goals for improving compliance with hand hygiene guidelines. (See also IC.03.01.01, EP 3) | A |
| 3. | Improve compliance with hand hygiene guidelines based on established goals. | A |

KEY: **A** indicates scoring category A; **C** indicates scoring category C;  indicates situational decision rules apply;  indicates direct impact requirements apply;  indicates Measure of Success if needed;  indicates that documentation is required

