National Patient Safety Goals®

January 2023
Background

- The National Patient Safety Goals (NPSGs) were established in 2002 to help accredited organizations address specific areas of concern in regard to patient safety

- The first set of NPSGs was effective January 1, 2003

- The Joint Commission determines the highest priority patient safety issues, including NPSGs, from input from practitioners, provider organizations, purchasers, consumer groups, and other stakeholders

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Patient Identification

Goal 1:

Improve the accuracy of patient identification.
Patient Identification

NPSG.01.01.01: Use at least two patient identifiers when providing care, treatment and services.

Applies to: Ambulatory, Assisted Living Community, Behavioral Health and Human Services, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery
Improve Communication

Goal 2:

Improve the effectiveness of communication among caregivers.
Improve Communication

NPSG.02.03.01: Report critical results of tests and diagnostic procedures on a timely basis.

Applies to: Critical Access Hospital, Hospital, Laboratory
Medication Safety

Goal 3:

Improve the safety of using medications.
Medication Safety

**NPSG.03.04.01**: Label all medications, medication containers, and other solutions on and off the sterile field in perioperative and other procedural settings.

*Applies to: Ambulatory, Critical Access Hospital, Hospital, Office Based Surgery*
Medication Safety

NPSG.03.05.01: Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.

Applies to: Ambulatory, Critical Access Hospital, Hospital, Nursing Care Center
Medication Safety

NPSG.03.06.01: Maintain and communicate accurate patient medication information.

Applies to: Ambulatory, Assisted Living Community, Behavioral Health and Human Services, Critical Access Hospital, Home Care, Hospital, Nursing Care Center, Office-Based Surgery
Clinical Alarm Safety

Goal 6:

Reduce patient harm associated with clinical alarm systems.
Clinical Alarm Safety

NPSG.06.01.01: Improve the safety of clinical alarm systems.

Applies to: Critical Access Hospital, Hospital
Health Care-Associated Infections

Goal 7:

Reduce the risk of health care-associated infections.
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.

Applies to: Ambulatory, Assisted Living Community, Behavioral Health and Human Services, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery
Reduce Falls

Goal 9:

Reduce the risk of patient harm resulting from falls.
Reduce Falls

NPSG.09.02.01: Reduce the risk of falls.

Applies to: Assisted Living Community, Home Care, Nursing Care Center
Pressure Ulcers

Goal 14:

Prevent health care-associated pressure ulcers (decubitus ulcers).
Pressure Ulcers

NPSG.14.01.01: Assess and periodically reassess each patient’s and resident’s risk for developing a pressure ulcer and take action to address any identified risks.

Applies to: Nursing Care Center
Risk Assessment

Goal 15:

The organization identifies safety risks inherent in its patient population.
Risk Assessment

NPSG.15.01.01: Reduce the risk for suicide.

Applies to: Behavioral Health and Human Services, Critical Access Hospital, Hospital
Risk Assessment

NPSG.15.02.01: Identify risks associated with home oxygen therapy, such as home fires.

Applies to: Home Care
Health Care Equity

Goal 16:

Improve health care equity.
Health Care Equity

NPSG.16.01.01: Improving health care equity for the organization’s patients is a quality and safety priority.

Applies to: Ambulatory, Behavioral Health and Human Services, Critical Access Hospital, Hospital

*Effective July 1, 2023
Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

**UP.01.01.01:** Conduct a preprocedure verification process.

*Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery*
Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

**UP.01.02.01:** Mark the procedure site.

*Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery*
Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery

UP.01.03.01: A time-out is performed before the procedure.

Applies to: Ambulatory, Critical Access Hospital, Hospital, Office-Based Surgery
For more information...

The National Patient Safety Goals for each program and more information are available on The Joint Commission website at www.jointcommission.org

Questions can be sent to the Standards Interpretation Group at 630-792-5900 or via the Standards Online Question Form

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