

# 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](http://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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